



Rethink
Mental
Illness.

**Directors' report,
Trustees' strategic report
& Consolidated
financial statements**

For the year ended 31 March 2021

Rethink Mental Illness

(Operating name of the National Schizophrenia Fellowship)

(a company limited by guarantee)

Registered Company number 1227970, Registered Charity number 271028

Challenging attitudes, changing lives.

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The Trustees of Rethink Mental Illness present their Directors' Report and their Trustees' Strategic Report, which together comprise the Trustees' Annual Report, and the Consolidated Financial Statements for the charity for the year ended 31 March 2021 as required under the Charities Act 2011 and the Companies Act 2006.

Name and nature of the charity

Rethink Mental Illness is the operating name of the National Schizophrenia Fellowship. The charity was formed in 1972 and is registered with the charity Commission of England and Wales. The charity is also a company limited by guarantee and is governed by its Articles of Association.

The term “charity” refers to Rethink Mental Illness and the term “Group” refers to Rethink Mental Illness together with its subsidiaries as set out in note 19.

Our mission and vision

Our mission is to lead the way to a better quality of life for everyone severely affected by mental illness. This includes people with lived experience, their carers, families and friends.

Our vision is equality, rights, fair treatment, and the maximum quality of life for all those severely affected by mental illness.

Our values

Commitment. We work tirelessly to provide support for everyone severely affected by mental illness.

Equity. We believe that in a world where discrimination and disadvantage exist, treating people with equity is critical to ensure justice and fairness for all.

Expertise. We constantly use our expertise to provide practical and personal support for people who are severely affected by mental illness.

Hope. We offer hope of a better quality of life for all those severely affected by mental illness.

Openness. We are open and transparent in all our work with beneficiaries, supporters, partners and the public to achieve change for people severely affected by mental illness.

Passion. We are passionate about leading the way to a better quality of life for everyone severely affected by mental illness.

Understanding. People who are severely affected by mental illness are at the heart of everything we do in our organisation – our membership, our governance and our workforce

A message from our Chair of Trustees

2020 will be forever remembered for two global events. One that changed everyone's lives and one that needs to. The former, the Covid-19 pandemic, and the latter, the murder of George Floyd by a white police officer in Minneapolis and the resulting worldwide calls for change. As a charity these tragic events have shaped and informed our year.

We knew relatively early in the pandemic that there was likely to be an impact on the mental health of the population, the reverberations of which are likely to be felt for years to come. This has included the trauma experienced by those who became seriously unwell, the grief experienced by those who lost loved ones, the burnout felt by those working on the frontline and the anxiety and isolation felt by nearly everyone as we adapted to living in lockdown. But further to this we also knew that those who were most likely to be hit by the full force of the pandemic were people already severely affected by mental illness.

People severely affected by mental illness faced two stark risks in addition to those experienced by the rest of the population. First, an increased risk of becoming seriously ill if they contracted the virus. Secondly, disruption to existing care, support and treatment that keeps them well. Responding with speed, we ensured that our frontline services remained open and that service users and staff were protected with the equipment and resources they

needed. Non-frontline services quickly transitioned to provide support remotely online and by phone. Our 132 groups also adapted to provide ongoing peer support. Many of the groups continued to meet online and all remained in contact via the phone or social media.

We then reached out to people severely affected by mental illness and their carers to develop a clearer understanding of the challenges they faced. Further to which, we ensured that we provided the information and advice they needed – made available on our website through a new information hub, and via our social media channels and newsletters. Towards the end of 2020/21 our focus moved towards encouraging people who were severely affected by mental illness to be vaccinated against Covid-19 as part of priority group six.

As a critical friend to both government and the opposition we used our voice, publicly and in private, to reinforce the need for additional resources to support people's mental health needs. We advocated for



For all the challenges, I am very proud of what we achieved to keep people safe and improve lives.

and were pleased to see additional funds made available in the Autumn Spending Review for mental health care, specifically the additional funding to support mental health inpatients being discharged from hospital and to accelerate the expansion of community mental health care.

Throughout the year we remained conscious that while the pandemic had created unprecedented challenges, the issues that impacted on people severely affected by mental illness and their carers that existed before the pandemic had not disappeared. In fact their continued existence threatened to magnify the impact of the pandemic and hinder our recovery from it, including an out-of-date Mental Health Act, a welfare system that is frequently a cause of distress rather than support and a lack of funding for adult social care services (with local authorities facing severe funding problems).

To the credit of our staff and campaigners, we have retained a focus on these issues in the last twelve months. After years of campaigning, the publication of the Mental Health Act White Paper means we are finally on the verge of much needed reform. Less positively, we continued to shine a light on the damage and misery our welfare system causes, with campaigns for an independent inquiry into the hundreds of cases of death and serious harm caused by the benefits system and an urgent call to end sanctions and conditionality. This is a battle that we are yet to win, but we will continue to fight until change is secured.

On the transformation of community mental health services, we have cemented our place as a sector leader, expanding our

place-based alliances across the country. These alliances bring together service providers, commissioners, local authorities, social care agencies, funding bodies, mental health trusts, government agencies and other parties to create a 'no wrong door' approach, meaning that a person's mental health support needs can be responded to regardless of where they come into contact with services. This makes the system easier to navigate and more efficient. Our work in building place-based alliances is based on the principle of 'generous leadership' – ensuring lessons learnt are proactively shared far and wide across the health and social care sector.

All of this work is underpinned by the principles of coproduction and involvement. In 2020/21, we developed a new Co-production & Involvement Strategy, which was co-produced with our Lived Experience Advisory Board. The strategy ensures that we feed the insights of a diverse range of people with lived experience and carers into our business development, campaigns, policy and services activities as well as other parts of the charity's work such as the advice and training we provide. The strategy will also see the creation of a new Carers Advisory Board in 2021 which will work in co-operation with our Lived Experience Advisory Board.

One issue that did transcend the pandemic was the ongoing impact of racism on our society. Recognising progress to be made, we have incorporated equity as a new organisational value and in 2020/21 we began the journey towards becoming an anti-racist organisation. Throughout the

year we focused on ensuring the voices of people from minority backgrounds are an integral part of the coproduction of services. We also continued to lobby the government to both implement Seni's Law (the Mental Health Units (Use of Force) Act 2018) and end the racial disparities in how many people are detained under the Mental Health Act. Our Advice and Information service worked with people from Black, Asian and minority ethnic communities who have lived experience of mental illness to create a new resource about the intersection of mental health and racial injustice. Internally, we commissioned an extensive programme of work with an independent consultancy that works with organisations to assist them in becoming anti-racist and separately created staff 'Pledge Groups' to hold the charity to account on delivering change to ensure we increase diversity and call out racism as and where we see it.

Financially, we ended 2020/21 on a sound footing, something we appreciate is not uniform across the third sector. Our reputation as a charity that delivers high quality services has seen our income grow in the last twelve months. At the same time we saw a decrease in some traditional costs, such as travel, as more of us turned to Teams or Zoom for meetings. In 2021/22 our resources will be invested in fast-tracking transformation projects, such as our ICT infrastructure, that will enhance our capacity and ability to improve people's lives. This work is part of a wider project of organisational change, led by our new Director of Strategy and Transformation, Kate Husselbee, to ensure that the charity

can respond with agility to both the challenges and opportunities it faces in the coming years.

It has undoubtedly been a difficult year, for those living with mental illness and their loved ones as well as our staff, volunteers and supporters. For all the challenges, I am very proud of what we achieved to keep people safe and improve lives. I am hugely thankful to everyone connected with Rethink Mental Illness for their effort, commitment and hard work. This year, more than any other, has reinforced that we are more than a charity. We are a movement driven by passionate, caring people working together to make a big difference to people's lives.

This reflection is especially poignant for me as I approach the end of my second and final term as Chair in November 2021. Rethink Mental Illness will always hold a special place in my heart, from when I first contacted it for advice and information, to becoming a member, then joining a regional committee, then the board, I have had the privilege to work with amazing people dedicated to improving people's lives. I have seen the Charity grow and its voice become stronger, long may that continue. I wish my successor the very best.



Philippa Lowe

Chair of Trustees

What we do

Rethink Mental Illness is the charity for people severely affected by mental illness. They are at the heart of everything we do.



Online, over the phone and face-to-face, we provide services that support and empower people to live and thrive independently in their communities. Every day, we help thousands of people to learn more about specific mental illnesses and treatments, understand their rights and access support that focuses on their wider physical health, financial, housing, work and volunteering needs.



We also provide local peer support groups across the country to help people living with mental illness and their carers support each other, grow in confidence and take greater control of their lives.



We campaign on a local and national level to ensure people severely affected by mental illness are listened to, treated fairly and have easy access to the health and social care services they need.



And we work with a wide range of organisations, including other charities, private businesses, the NHS and local authorities, to create communities that genuinely care for the wide range of people we support.

Informing and shaping all our work are people severely affected by mental illness. They are the ones who know best what they need and what must change.

We won't stop until everyone severely affected by mental illness:



Has a voice in how their care, support and treatment is delivered.



Has their rights respected and enhanced.



Can receive recommended care and treatment, close to home, when they need it.



Has a safe, secure and affordable place to call home, with the support they need to live there if required.



Has access to networks, online and off, to develop friendships, new interests and receive peer support.



Has their physical health taken seriously, so that their mental illness does not “overshadow” or cause avoidable physical ill health, leading to decreased life expectancy.



Can work or volunteer in roles they love, with any support they may need, free from stigma and discrimination.



Has enough money to pay their bills and live a satisfying life, able to rely on and navigate a welfare system designed to support, not penalise.

Our commitment to becoming an anti-racist organisation

One result of the racial inequality in society is that people from Black, Asian and minority ethnic backgrounds can experience different rates of mental illness than the majority white population. Things like fear, stigma and lack of culturally sensitive treatment may also prevent people from accessing the mental health care they need.

The murder of George Floyd by a white police officer in Minneapolis in May 2020, and the subsequent global response, asked a question of all of us: do we, as both individuals and organisations, do enough to challenge racism? This question prompted us to undertake a period of reflection and review. Following honest – and at times painful – conversations with employees, people severely affected by mental illness and partners across the health and social care sector and beyond, we made a commitment to become a truly anti-racist organisation.

This means putting equity at the heart of everything we do. It means campaigning for better mental health support for people from Black, Asian or minority ethnic communities, working with them to co-design the services they need and challenging the inequalities that underpin poor mental health. It also means creating a truly inclusive and anti-racist workplace.

Recognising progress to be made, we have incorporated equity as a new organisational value and in 2020/21 began

the journey towards becoming an anti-racist organisation.

We are now playing a key role in facilitating the coproduction of new models of community mental health with experts by experience and NHS England. Ensuring we are working with people from minority backgrounds, people with lived experience who can represent their local communities and in partnership with local organisations and grassroots communities is of highest priority. This will ensure NHS England's transformation of community mental health care doesn't just work for existing users of services but also for excluded groups with unmet needs.

Our ongoing campaign to reform the Mental Health Act is shaped and informed by racial disparities in how many people are detained under the act and their outcomes. There is a long way to go but by ensuring the reformed Act recognises the individual backgrounds, experiences and needs of people treated under it, the government will be taking a big step in the right direction. At the same time, NHS England is taking

forward the recommendation for a Patient and Carer Racial Equality Framework to improve outcomes for people from diverse backgrounds in inpatient mental health care. We are also involved in recommendations to deliver culturally sensitive advocacy.

With allies across the mental health sector, we've continued to apply pressure on the government publicly and privately to implement Seni's Law, the Mental Health Units (Use of Force) Act 2018. It has not yet been enacted despite passing through Parliament several years ago following campaigning by Rethink Mental Illness and others. We are hopeful that this law will be implemented within the next year and will keep pushing strongly for this to happen.

Recognising the need for improved advice and information, our Advice and Information service worked with people from Black, Asian and minority ethnic communities who have lived experience of mental illness to create a new resource about the intersection of mental health and racial injustice. The resource identifies barriers to accessing mental healthcare and treatment and signposts appropriate resources and support.

Internally, we have commissioned an extensive programme of work with an independent consultancy that works with organisations to assist them in becoming anti-racist.

We understand that our workforce is not currently as diverse or representative as it needs be to mirror the community we serve. Because of this we are committed to diversifying our staff, and in particular the senior levels of management and leadership. In 2021, we are creating new

roles to ensure reducing racial injustice plays a part in everything we do. We are also committed to improving our recruitment and selection policies to not only create positive action, but to remove any bias that may disadvantage those from disproportionately represented groups. In tandem, we are developing anti-racist training with specialist organisations as part of our learning and development offer and on-boarding process for new staff.

More widely, we will continue to seek out and listen to the experiences of those affected by racism and ensure they have a platform. We will lend our support and our voice to the work of organisations tackling racial inequality and in 2021/22 we will continue with our efforts to ensure a truly anti-racist workplace.

Future annual reports will update on progress made.

Step Up is a co-production project which aims to build on young people's strengths and abilities to deal with issues that could cause a mental health crisis. Within schools and colleges we were overwhelmed with the numbers of young people interested in getting involved with the programme last year and were able to work with 68 young people to build a diverse range of new workshops and resources, including supporting young Black people on topics including colourism and institutionalised racism and supporting young men, topics including the impact of social media on finances.



Involvement, & co-production

People with lived experience of mental illness and carers are at the heart of everything we do. In 2020/21, we developed a new Co-production & Involvement Strategy, which was co-produced with our Lived Experience Advisory Board (LEAB). The strategy ensures that we feed the insights of a diverse range of people with lived experience and carers into our business development, campaigns, policy and services activities as well as other parts of the charity's work such as the advice and training we provide. The strategy will also see the creation of a new Carers Advisory Board in 2021, which will work in co-operation with LEAB.

As well as developing our co-production and involvement practice within the charity, we have applied our expertise in co-production to facilitating the involvement of experts by experience and carers as equal partners in the re-design of integrated mental health services. Co-production and community engagement became a key focus – alongside community partnership

building – in our conversations with health and care system leaders in 2020/21. To support the transformation of community mental health services, we proactively shared our co-production approaches in trailblazer places, such as Somerset. This approach reinforces the need to acknowledge lived experience/carer expertise as a necessary factor in effective co-design, and co-delivery of services.

Our work on bringing the lived experience perspective into integrated community mental health service development started to include co-delivery through peer support. This included the development of whole system peer support frameworks and roles, and Peer Support Worker roles applying the new Health Education England guidelines. To support our growing number of Co-production & Involvement practitioners in places across the country, we started to bring guidelines and tools together, and created new practice roles to develop a Co-production and Involvement Hub resource.

Our members

Our 2,203 members (as of March 2021) are central to our past and our future. We were formed nearly 50 years ago by carers of people living with schizophrenia. Our first members laid the foundations for the charity that exists today, which now helps thousands of people severely affected by mental illness.



Our many thousands of campaigners, supporters and donors, along with our members, give Rethink Mental Illness its mandate. Members are engaged in campaigns and policy development and are an important source of volunteers for our governance and peer support groups. They help shape the direction of our work through our Annual General Meeting (AGM) and the work of the Board of Trustees and other committees at national and regional levels.

Membership also provides people with a sense of belonging to an organisation that helps them to cope with the demands of living with severe mental illness, whether they have direct experience, or are a carer, relative or friend.



Our impact in 2020/21 - building communities that care

We are working hard to ensure the all-round needs of everyone severely affected by mental illness are met so they can live independently in communities they feel connected to. This includes their housing, financial, welfare, physical health, and employment and volunteering needs, as well as access to health and social care.

We also strongly believe that for a person severely affected by mental illness to have a good quality of life, they must feel part of their community, not be subjected to discrimination and have their voice heard and rights respected.

To achieve all these goals, we are working with a wide range of organisations, including voluntary, community and social enterprises, the NHS and local authorities, public bodies and private businesses.

We are also collaborating with people severely affected by mental illness to develop new and improve existing services.

Our year in numbers...

32,500

We responded to more than 32,500 enquiries through our commissioned helplines.

5.5 million

We had more than 5.5 million visitors to our website a 66% increase on 2019/20.

700,000

By the end of March 2021 we had secured more than 700,000 followers across our social media channels (Facebook, Instagram, LinkedIn and Twitter).

15,000

We directly supported more than 15,000 people through our services.

3,000

Our work as a charity was mentioned over 3,000 times in the media.

28

We secured 28 new business contracts (16 community services, nine accommodation services, two criminal justice and prison services and one Money & Advice).

5,494

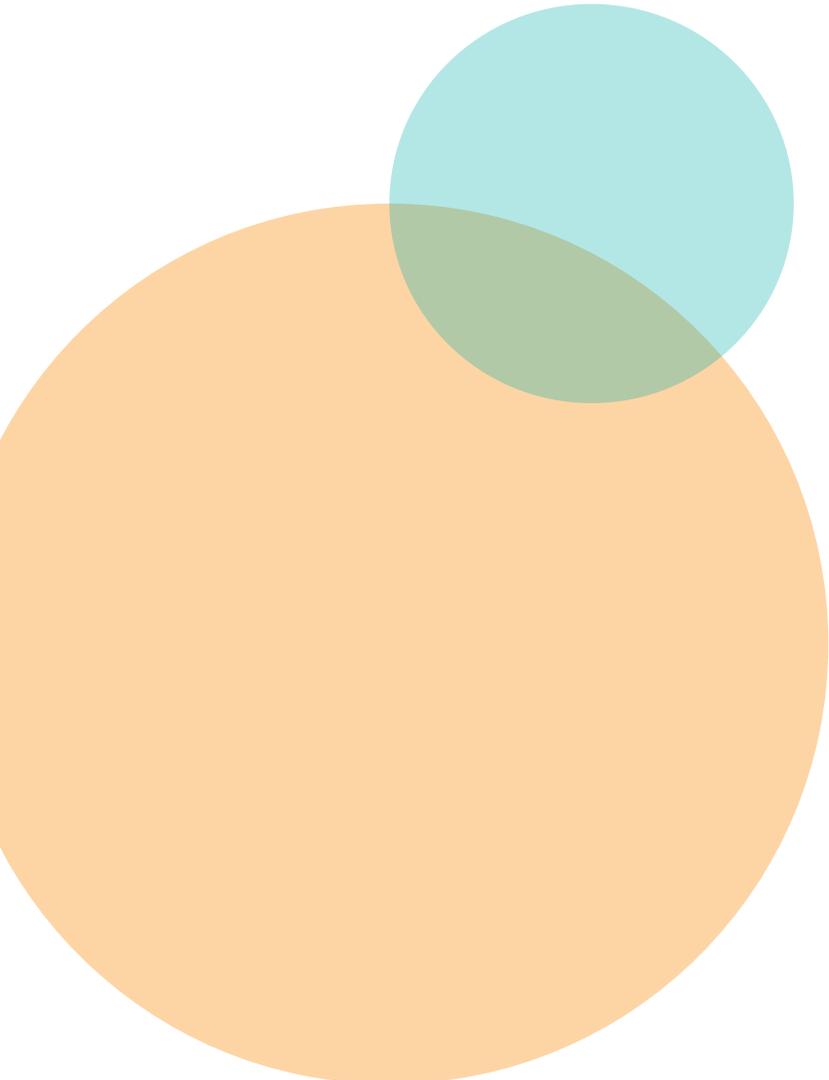
We responded to 5,494 enquires through our national advice and information service. In feedback, 89% of people reported that they had a better understanding of their situation and 87% felt more able to take action.

5,516

We delivered workplace training to 5,516 individuals across 408 different training sessions.

Mental Health Navigators

The way mental health support is delivered in the community is changing in Grimsby, and it is in no small part down to the hard work of Teresa Harrison. Teresa is the focal point of a pioneering a new project delivered by Rethink Mental Illness, funded by Mental Health UK and Johnson & Johnson, trialling the use of a Mental Health Navigator to improve the community support for people severely affected by mental illness.



As the navigator, Teresa is working to stamp out the reliance on emergency crisis care by providing tailored support for people severely affected by mental illness. She signposts patients to local support that will improve their quality of life and in turn could limit the number of people in the community reaching crisis point. Her work is already taking the pressure off overstretched medical services. Whether people need support with money issues, employment, housing, physical health or social connections within their community, Teresa will be there to help.

“It’s about being that in-between person” says Teresa, “It’s about being there to support the GPs and being there to reduce their appointments. For the patients, I try to get back to them within a 24–48-hour period so that they are reassured that they’re not waiting for weeks to get support.”

*“That’s the difficult thing” she says,
“Sometimes you’ve got to let these people
go and sometimes it is sad, because you do
build those relationships.”*

*“But I always say to people if they’re
struggling with their mental health or if
they need any support, I’m always there to
help. My door is always open.”*

Teresa’s work helps GPs, but, crucially, it gives patients in the local area a one-stop shop for all of their community mental health needs. Within the context of Covid-19, her support for some people has been nothing short of lifesaving. “We once had a lady that was blind who had recently broken a wrist, she hadn’t gone out because her blind dog couldn’t socially distance and she hadn’t been contacted for support. That meant that she had been eating finger food for three months because she couldn’t cook.”

“I did everything I could to help. I got her meals on wheels so that she was able to have hot food. I provided her with audio books so that she had things to keep her occupied, I even helped her with her heart monitor and got it all fitted and working at home for her. I arranged her transport to help her get to and from her hospital appointments. I referred her to a befriending service so she was getting a weekly call from someone to check in on how she was – and she also had a bit of emotional support from me.”

That emotional support is a big part of the role for Teresa.

Changing lives through our services

In 2020/21 we delivered 90 services, which collectively embody our aim to empower people to live and thrive independently in their community through meeting their whole needs. We secured 28 new business contracts (16 community services, nine accommodation services, two criminal justice and prison services and one Money & Advice). Including new services in the Black Country, Brent, Wiltshire, North West London and a national advice helpline.

15,000



Across the year our services **supported more than 15,000 people.**

7,113



In 2020/21 our **advocacy services** supported 7,113 people



In homes, care homes, hospitals, local communities and secure settings, our advocacy services empowered people by helping them voice their opinions and feelings, stand up for their rights and access the services they need. A service we were able to maintain throughout the pandemic. For those that did not feel able or lacked the capacity to do this, we represented their interests and spoke up on their behalf, so that their views and concerns were heard.

“In the absence of face-to-face contact there was a danger of referrals dropping dramatically. As a response we devised a friendly letter for potential clients, including the advocate’s photo. The Independent Mental Health Advocacy (IMHA) letter was sent out by the mental health act office to all newly detained patients, along with our official IMHA leaflet.”

“Video conferencing was essential for our clients during lock down and in general throughout the year. This was a good example of where there was a real willingness from key professionals to liaise with our service and explore difficulties and ways forward.

“As the year went on, advocates began to attend more safeguarding meetings via video link as advocates and clients became more comfortable with the technology. Discharge meetings were also essential to attend as pandemic restrictions often threatened a phased, gentle discharge process.”

**Rethink Mental Illness,
Advocacy Service Manager**

914

In 2020/21 our **care home services** supported 914 people

Our 24/7 care home services provided a safe, stable environment and specialist nursing support to people facing a mental health crisis or who had left hospital after being an inpatient. Support that involves experienced and dedicated staff building up a detailed understanding of a person's needs, including those relating to their physical health, which in many cases is neglected.

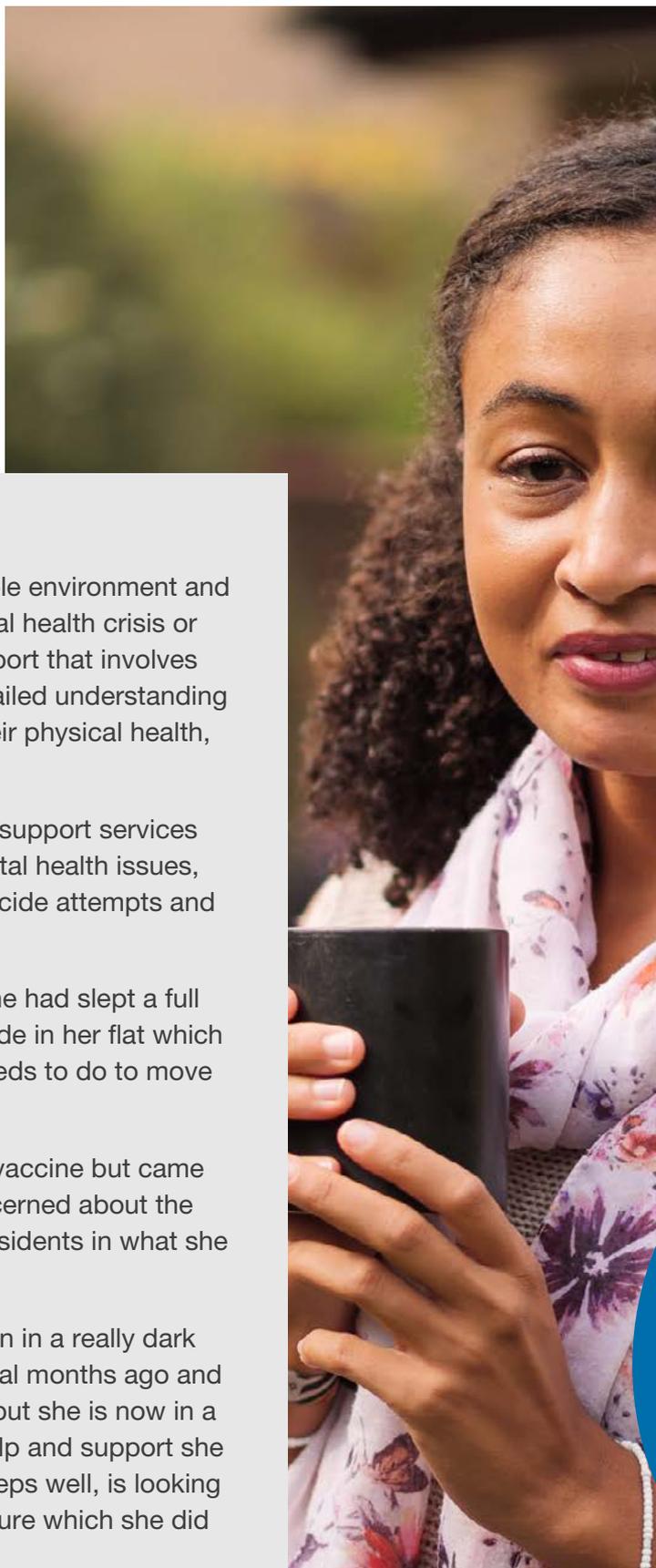
“Our resident had been known to the professional support services for much of her adult life. She has a history of mental health issues, substance misuse, self-harm, suicidal ideation, suicide attempts and homelessness with periods of rough sleeping.

“On the first full day at our crisis house she said she had slept a full night for the first time in years. She takes a real pride in her flat which she calls her ‘home’. She is talking of what she needs to do to move on and get an independent flat in the future.

“Our resident was undecided about her Covid-19 vaccine but came to tell us she was going to have it as she was concerned about the wellbeing of some of her more vulnerable fellow residents in what she considers to be her community now.

“She spoke to staff recently and said she ‘had been in a really dark place’ when she moved into the crisis house several months ago and did not think she would get through the next year but she is now in a ‘really good place’ which she says is due to the help and support she gets from Rethink Mental Illness. She says she sleeps well, is looking at her diet to stay healthy and has plans for her future which she did not think she would ever feel.”

Rethink Mental Illness, Care Home Manager





715

In 2020/21 our **carers services** supported 715 people

To help carers maintain and improve their wellbeing, our carers services provided tailored information and advice about the care and support available to them and how they can access it. Including carer's assessments from their local authorities, benefits and financial support they may be entitled to, and peer support that can connect them with others who understand their day-to-day experiences.

"In the last 12 months we have provided 2,639 one to one carer support sessions, the service has adapted to working remotely using telephone and virtual platforms to provide ongoing support to mental health carers. The service has adapted monthly carer groups to run virtually, these have been well attended and the service will continue to offer virtual groups alongside in person groups."

Rethink Mental Illness, Carers Service Manager



4,310

In 2020/21 our **community support services** supported 4,310 people

Our range of community support services gave people severely affected by mental illness access to personalised help to rebuild their confidence, help them stay in or return to work, and take part in social activities they enjoy.

"We rapidly launched a support group using WhatsApp where we've had over 80+ service users utilise this group throughout the year

"The group provided staff led and peer support and have shared the lockdown journey together. Together we have supported people to take their first visit to the shops or a walk in the park. They have shared good times and difficult times, motivated each other to complete tasks and shared the results within the group."

Rethink Mental Illness Community Service Manager

715

In 2020/21 our **mental health services in prisons services** supported 1,603 people

We provided primary mental health services in prisons across England that are based on expertise, the preferences of prisoners, and the best available evidence. These services are provided to individuals and groups of prisoners and are aimed at those who experience less severe mental illnesses such as mild or moderate anxiety or depression.

“All prisons have moved to wing based working to enable therapies to continue being delivered even when healthcare units closed due to Covid-19. In addition, we have utilised telephone therapy, developing new local operating procedures and increasing patient choice of modality, also allowing support to continue when regimes meant residents could not be unlocked.”

Rethink Mental Illness, Criminal Justice Service Manager

543

In 2020/21 our **supported housing services** supported 543 people

Our supported housing services include shared living spaces where staff are on site and self-contained flats that staff regularly visit. In both environments, our trained staff worked with people living with mental illness to identify their individual goals and aspirations and the support they need to make these ambitions a reality.

“Throughout the year, and via training and equipment provided, we were able to take baseline observations and report any concerns. By providing relevant ICT equipment and training when needed we ensured that tenants were able to stay in touch, via virtual appointments, with their GPs, consultants and psychiatrists.

“We also ensured that throughout the year tenants had the opportunity to speak regularly to their friends and family via the phone and/or online via Zoom or Microsoft Teams. Further to donations from Lloyds Banking Group, we were able provide tenants with iPads. Tenants now use these devices to access the internet, shop online, order prescriptions, listen to music and explore their interests.”

Rethink Mental Illness, Supported Housing Manager

Changing lives through our groups and peer support

We have 132 groups with more than half a dozen new groups in development, and a growing list of new enquiries.

34 groups for people living with mental illness.

46 groups for carers.

50 groups for carers and people living with mental illness.

2 groups for siblings.

The pandemic, and the restrictions to stop its spread – notably social distancing, was challenging for our groups. Our groups team worked hard throughout the year to support groups to adapt. During the pandemic, and while recognising that this wasn't possible for all, we were able to support groups to stay in regular contact via online video conferencing.

While there was a unanimous view that online contact was not an alternative to meeting face to face, it did have its own benefits - opening up groups to some people that may not have otherwise attended. As a result many groups are looking to deliver a hybrid of online and face to face activities in the future.

Those groups that didn't deliver online meetings, did stay connected. Mainly over the phone and groups texts, whilst some have used Facebook and email. A large number of groups chose to make the most of the better weather in 2020 and when restrictions allowed met outdoors in green spaces and organised walks.

Groups have seen a steady increase in enquiries to attend their meetings, with many having to create waiting lists of people wanting to join their full activities when they recommence, or in some circumstances when there is a space in the group, as many venues have capacity restrictions in place following Covid-19 secure risk assessments.

To ensure there was regular contact between group members and the charity, we introduced a new groups at home newsletter at the start of the first lock down. We also held online forums to bring coordinators together to share support and best practice, this will continue as part of our approach to connect groups as we move out of the pandemic.

Changing lives through our advice, information and training

“The pandemic has changed so much in our lives, but the message on mental health remains the same. If you’re struggling, or worried about someone else, don’t avoid or dismiss it. Seek support as soon as possible.”

Rethink Mental Illness, Head of Advice and Information Services

Our advice and information service gives free practical advice to adults living in England who are affected by mental illness. We advise people living with mental illness, their friends, families and carers. We also advise professionals who may want to know more about mental illness and how they can support the person they are working with. Advice is delivered over the phone, via our freephone number, email and webchat.

Recognising the range of issues that impact on people affected by mental illness, the Advice Service is expertly trained to provide up to date information on mental health conditions, access to care and treatment, different medications, individual rights under the Mental Health Act, social care, and welfare benefits. When further support is needed around welfare and/or debt issues we refer people directly to our partner service Mental Health and Money Advice. We also give advice to carers about their rights and how they can support the person they care for.

In 2020/21 the service directly advised 5,494 people - 3,925 by phone, 2,115 by email and 750 by webchat. This included advice on:

- how to access mental healthcare 1,544 times.
- money matters 598 times.
- housing rights 383 times.

After taking advice from us, 89% of respondents said that they had a better understanding of their situation and 87% felt more able to take action.

The Advice Service also provides and regularly updates a range of information on our website. With sections on mental illness, living with mental illness, rights & restrictions and a carers hub. Responding quickly to the pandemic, we created a new online hub providing a range of information to support people manage the impact of Covid-19. Including detailed advice on adapting to the restrictions and on the vaccination programme.

Demand for these online resources soared during the pandemic – with more than 2 million additional visits to our website compared to 2019/20. From the announcement of the first national lockdown in March 2020, in the following 12 months we saw a:

- 703% increase in people seeking advice and information about anxiety
- 459% increase in people seeking advice and information about self-harm
- 217% increase in people seeking advice and information about PTSD

89% of respondents who accessed information on our website felt their knowledge had improved.

The need for high quality mental health advice was recognised by Government during the Covid-19 pandemic, and funding for our Advice & Information Service was provided by the Department of Health & Social Care which allowed us to increase our capacity and provide advice to more people.

“I would just like to say that I have approached four different mental health functions, charities and official bodies and the service that Rethink Mental Illness has given me, is of a different scale to everything else. The questions that I wanted answers too, no one has been able to answer apart from Rethink Mental Illness. I would recommend Rethink Mental Illness strongly to absolutely everybody. I could not be happier with the amount of time and understanding and information that I have received.. 10 out of 10 almost seems insufficient.”

Anonymous

“Thank you so much for your email, it’s so informative and I really appreciate the advice! We have since somehow managed to get the person into a hostel for the time being however I predict that won’t last very long! I will definitely look into social care for him, we also managed to get in touch with his mental health team recently so that’s been really helpful. Thanks again so much for your help I will certainly keep referring to your advice. Many thanks”

Anonymous

In addition to our national Advice Service, we also delivered eight commissioned helplines in 2020/21 which responded to more than 32,500 enquiries and provided a mixture of:

- crisis support - Black County Urgent Mental Health Helpline and North East Lincs Helpline
- culturally appropriate support - Sahayak Asianline
- emotional support - Black County Emotional Support Helpline, Doncaster Helpline, Sheffield Helpline and the Sanctuary Hubs in Walsall
- specialist confidential support - Gloucestershire Self Harm Telephone Support



Embedding change through workplace training

In 2020/21 we delivered training to **5,516** people across **408** sessions.

Mental health training is an important way of changing the experience of people affected by poor mental health. Through our external training team we strive to enable people to feel more comfortable and confident to talk about mental health and know more about how to respond when problems arise.

In response to the pandemic, our external training team repurposed our workplace mental health awareness and mental health for managers training courses so they could be delivered online. We also created new course content that focussed on how to manage mental health and wellbeing as a result of Covid-19, including supporting homeworkers.

We developed and delivered our first Train the Trainer course with Asda. By training others to deliver our mental health at work content, Asda were able to continue our good work and reach even more people. We trained 10 of their internal Learning & Development staff. Those staff have since gone on to deliver 57 sessions which have reached 726 colleagues. 100% of those trained rated the quality of the training session as excellent.

Changing lives through our influencing and campaigns

We campaign nationally and locally to improve the lives of everyone living with mental illness. In doing so we have pushed mental health up the public agenda and changed government policy.

In 2020/21 we directed capacity at short notice towards supporting people to navigate their way through and protect themselves from the pandemic. Central to which was ensuring there was sufficient government focus and resource in place to safeguard access to clinical support for people's physical and mental health needs. However, we also knew that it was important to maintain momentum on issues that pre-dated the pandemic, including community mental health service transformation, modernising the mental health act and welfare reform. Conscious that they are fundamental to the lives of people severely affected by mental illness and that they would impact on both people's experience of the pandemic and recovery from it.

Throughout the pandemic we have done more than ever to listen to the views and experiences of people living with mental illness. In May 2020, and during the first lockdown, we launched a lived experience network that has grown to over 1,000 people severely affected by mental illness, who through surveys and other work have helped us understand the challenges that the pandemic has created and what the solutions may be. Our first survey found that

79% reported that their mental health had worsened during the pandemic. With 42% citing reduced support from mental health services. This spurred us on to advocate that their needs were understood and met by government.

In the summer of 2020 we brought together over 50 organisations to call for a new social contract to address the huge challenges created by the pandemic. This shaped our campaigning and influencing work in the autumn to influence the Spending Review and the Winter Plan for mental health and wellbeing, which helped secure a £500m package of mental health funding and a further £87m to support mental health inpatients being discharged from hospital and **£58 million to accelerate the expansion of community mental health care.**

We also surveyed people within secure care services about their experience of the pandemic resulting in our subsequent report highlighted the significant variation amongst secure care services in supporting service users during this time, including their approaches to activities, communication, access to technology and contact with family and friends. This report was signed

off and endorsed by NHS England/Improvement and disseminated to all services to inform their future pandemic planning.

The pandemic had a significant impact on people living with severe mental illness's physical health. Our survey of people severely affected by mental illness (May 2020) found that 51% of respondents were eating less healthily, 54% exercising less and people were smoking (16%) and drinking (23%) more than usual. At the same time the number of annual physical health checks carried out dropped to their lowest recorded level with only 21% of people having received one in the year preceding Oct-Dec 2020. In response we prioritised this as an issue to raise with policy makers and government, which helped secure a renewed emphasis from NHS England/Improvement to reinforce, on an ongoing basis, their importance in communications with primary care. Additionally, payments to primary care are changing from April 2021 to incentivise GPs to carry out all 6 health checks annually. We also successfully lobbied for £14 million of the government's additional funding for mental health care in the Autumn Spending Review to go to the NHS to put in place outreach initiatives to support people living with severe mental illness to take up their vaccines.

We welcomed the recognition by the Joint Committee on Vaccinations and Immunisation (JCVI) of the risk to people living with severe mental illness from contracting Covid-19, which saw them placed in priority group 6 for vaccination. Following our earlier survey of people severely affected by mental illness, we

commissioned a new survey of over 400 people to understand the enablers and barriers to people taking up the vaccine. This information helped influence NHS England's guidance to the system, including ensuring a tailored letter was sent to people living with severe mental illness. Accompanying this was an extra £4.5 million funding for the health system to spend on outreach to support people living with severe mental illness to take up their vaccine. Additionally, we developed resources for the system in our role within Equally Well (an initiative which seeks to promote and support collaborative action to improve physical health among people with a mental illness, hosted by Centre for Mental Health in partnership with Rethink Mental Illness) and held several webinars for Sustainability and Transformation Partnerships (STPs).



Maintaining the momentum of community mental health service transformation

The transformation of community mental health services, as set out in the NHS Long Term plan, represents the biggest opportunity in a generation to radically improve the lives of people severely affected by mental illness. In 2020/21 we have continued to play a leading role in this ongoing transformation.

On the ground we are now partnering with six STPs to co-produce new community models of care and build alliances of voluntary organisations. These alliances break down barriers between service providers and make it easier for people to access the support they need.

In the spirit of generous leadership we have absorbed lessons learnt and made them widely available. With funding from Janssen-Cilag Limited, we worked with national and local decision makers and experts by experience, to co-produce a set of guides for STPs and Integrated Care Systems (ICSs) setting out how they should begin their transformation of community mental health services. The guides were accompanied by a series of webinars attended by over 400 unique stakeholders involved in community mental health service transformation.

Reinforcing the importance of physical health outcomes

Our Sport England funded project has been testing how peer support groups can help increase physical activity amongst people severely affected by mental illness. While impacted by the pandemic restrictions, over the year 24 groups managed to meet in line with government regulations, recognising that for many people living with severe mental illness the peer support element of exercising in groups is crucial for motivation and participation around physical activity.

We supported groups to adapt and upskill to work in new ways. This has seen some groups meet regularly online or outside to exercise via zoom or over the phone, often taking time to check in and support each other too. Our support also included non-digital methods such as posting over 160 copies of the winter wellbeing packs directly to beneficiaries which included a host of resources and a resistance band for home exercising.



Delivering a reformed mental health act

Following years of campaigning and influencing we were delighted in January 2021 when the government published a Mental Health Act White Paper setting out long needed reform. We were successful in winning two tenders from the Department of Health and Social Care to deliver its engagement on the White Paper with people currently detained under the Mental Health Act and people previously detained. This engagement will not only deliver high quality feedback from people severely affected by mental illness on the White Paper proposals but has also allowed us to further develop our own Mental Health Act policy and involve people with direct experience more thoroughly.

Campaigning for welfare and social care reform

In the spring of 2020 we launched our Stop Benefit Deaths campaign which brought together over 20 charities to call for an inquiry into benefit related deaths, such as the tragic case of Errol Graham who died of starvation following the failure of the Department for Work and Pensions to take account of his mental illness before stopping his benefits. Our concern about the way that the benefit system often feels needlessly cruel to people living with mental illness was also at the heart of our work on sanctions and conditionality later in the year, when nearly 2,000 people signed our petition to the Department for Work and Pensions.

In early 2021 we turned our attention to social care. The government has promised to bring forward long term plans to reform and fund the social care system, but there is a risk

that the needs of people living with mental illness and their carers will be overlooked.

We rallied allies in local authorities, the voluntary sector, Westminster and Whitehall and evidence from Rethink Mental Illness groups and services to make the case that it is impossible to deliver on the promise of transforming NHS mental health services without excellent social care.

Sadly, at the end of March 2021 and after 15 years, the anti-stigma and discrimination campaign Time to Change, which we ran with the mental health charity Mind, closed when government funding ended. In those 15 years it ran a ground-breaking social contact programme, galvanising a movement of thousands of people to share their experiences. It also delivered tailored programmes in schools and in the broader community as well as in the workplace. The campaign played an instrumental role in changing attitudes and behaviours to mental health and mental illness.

While much has changed thanks to the hard work of Time to Change's staff and champions, stigma and discrimination still exist today, notably in relation to people severely affected by mental illness and the intersection of racial injustice and mental health. Moving forwards, we are committed to building on the legacy of the Time to Change campaign and will challenge stigma and discrimination wherever it exists.



Delivering through our partnership with Mental Health UK

Mental Health UK brings together four national mental health charities working across the country: Adferiad Recovery (Wales), MindWise (Northern Ireland), Rethink Mental Illness (England) and Support in Mind Scotland. The four charities combine their experience in one partnership to improve life for anyone affected by mental illness.

“Individually we are mental health experts in our respective nations. Together we are an even stronger team.”

Mental
Health
UK



The Mental Health and Money Advice service

The service delivers a remote-access casework service for people living with mental health and money problems. Caseworkers have a full understanding of the money issues that affect people living with mental illness. By providing support with welfare benefits claims and finding solutions to any debt problems the service helps people increase their income.

In 2020/21 the service supported 924 clients across the UK. Collectively, clients saw their financial situation improve by nearly £3.3m and 84% of clients reported an increase in their wellbeing as a result.

The impact of the pandemic on both our mental health and our money was a huge concern. This was recognised by Government who provided Mental Health & Money Advice in England with funding to maintain our telephone advice line and also develop and distribute a Mental Health & Money toolkit. The toolkit was distributed across primary care settings, with health and social care professionals, such as social prescribers, using the toolkit with patients who contacted them feeling anxious and low about their money situation.

“Our client is diagnosed with depression with anti-psychotic episodes. She also lives with recurrent suicidal thoughts and memory loss. She was in receipt of Personal Independence Payment (PIP), but following a review of her award, her entitlement was withdrawn. By working closely together with the client and her family we were able to gather enough medical evidence and information to submit a mandatory reconsideration on the PIP claim. With this support she was awarded PIP at the enhanced rate for both the daily living and mobility component – this was higher than her previous award. Her income increased by over £150 per week, which has enabled her to access all her medical appointments without worry of the financial impact.”

Mental Health and Money Advice Service Manager



For young people's mental health

The service delivers a resilience-based programme in schools and colleges across the UK. It aims to equip young people aged 14-18 with knowledge and tools to maintain their mental health resilience through life transitions. The principal recipients of the programme are young people, it also supports teachers by training them in Bloom content and co-delivering workshops with them. Responding to the pandemic the programme was made available on-line whilst also maintaining our original offer of face-to-face co-delivery in classrooms.

In 2020/21 the programme trained 1,002 teachers across the UK and reached 61,392 young people.

“The previous 12 months have presented many new challenges. Young people have had to adapt to online learning, deal with social isolation, missing their friends and not being able to sit their exams. Bloom workshops have helped to equip our learners with useful tools and knowledge to help build their resilience and improve their mental health and wellbeing.”

Teacher, Grimsby Academy



Fundraising

We are grateful to the commitment that thousands of supporters showed during an incredibly challenging year. The dedication, energy and creativity of so many people has meant that over **£5 million** was raised through donations, gifts in wills and charitable grants.

The pandemic has had a huge impact on the lives of so many people across the country, Rethink Mental Illness supporters included. Yet during the year there were some incredible fundraising efforts including a virtual trek to Snowdon and over £70,000 raised by hundreds of people taking part in our virtual marathon in a month, Miles for Mental Health.

£1,041,000 was received through gifts in wills during 2020/21 and we are grateful to all of those individuals who chose to remember us in this way. One such person, Ernestine Adams, who passed

away in 2019, was Rethink Mental Illness' first member (the charity was known as the National Schizophrenia Fellowship then). Ernestine was the primary carer for her younger brother Philip, who lived with schizophrenia.

Rethink Mental Illness received a number of grants from charitable trusts and other grant-makers, including Stone Family Foundation, Sport England, National Lottery Community Fund, the City of London Corporation's charity, City Bridge Trust, and the Association of British Insurers Covid-19 Fund.

This support has enabled us to continue and expand our services to support people severely affected by mental illness and transform community mental health care through alliances built around our Communities that Care model.

Fundraising activities are delivered to the highest ethical standards. As a member of the Fundraising Regulator, we proudly follow the standards in the Code of Fundraising Practice.

We work with a professional fundraising agency who telephone supporters and prospective supporters to raise funds for our work. Our fundraising team undertake and observe training of the professional fundraisers to ensure they meet our high standards and regularly monitor phone calls. We have a Supporter Promise which ensures that people in vulnerable circumstances are protected.

We are also grateful to our Commercial Participants for their support. Partnerships are managed responsibly with appropriate due diligence, contracts and ongoing monitoring of activities.

During the year, we received seven complaints about fundraising activities, one regarding the FPS register and the remainder relating to communications regarding the transition from one Direct Debit provider to another. All complaints were monitored and responded to.





Our plans for 2021-23

We will drive the transformation of care and support for all people severely affected by mental illness.

We will campaign and influence government to follow up the NHS Long Term Plans investment in mental health and to provide the social care system with the financial support it needs to deliver its part of the effort. We will also campaign to meet increased needs as a result of the pandemic. Our national campaign focus will align directly to the Communities that Care model, focussing on securing improvements in the welfare system, supporting people with their financial problems, developing more appropriate housing policy and a better social care settlement for people who are severely affected by mental illness.

We will deliver at least four new pilots based on the Communities that Care model, targeting areas with diverse populations. We will use evidence and outcomes to influence government and the local system to spread delivery and develop our organisation to align to the model.

We will support the government to ensure smooth passage of the Mental Health Act on to the statute book and seek to build the case for reform in the housing and welfare sector, so it more effectively supports people living with severe mental illness. We will be a leading voice in addressing inequalities and injustice in the health and social care system, particularly around race.

We will ensure that the services and activities we develop are led and shaped by experts by experience.



We will make co-production a reality, internally and externally, in the development and application of service and policy provision. Through our Lived Experience Network and our Communications and Marketing Advisory Panel we will work to ensure that our campaigns and communications reflect the needs and views of people with lived experience of mental illness and their carers.



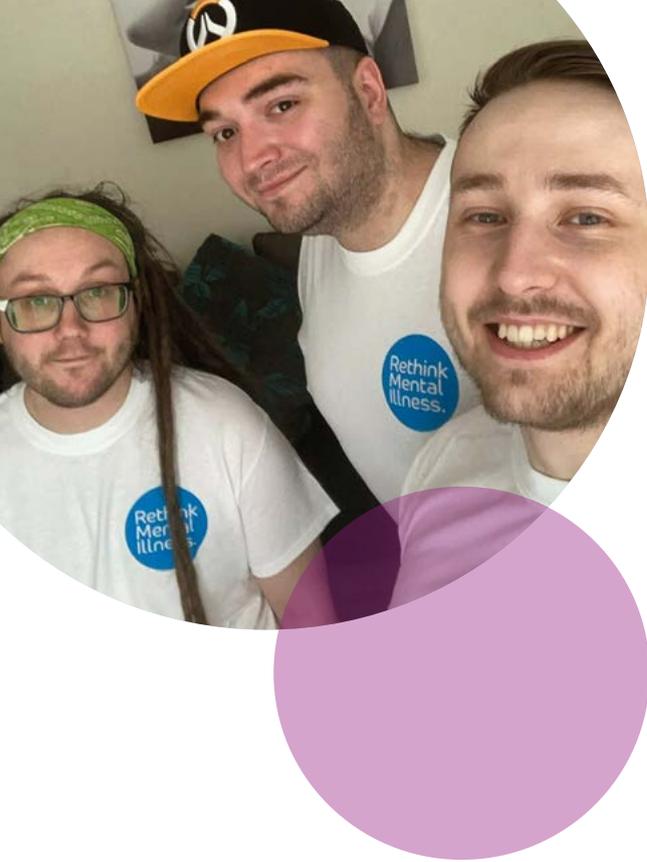
We will engage in areas of innovation, approaches for example such as New Models of Care/Provider Collaborative, to develop our policy and service solutions for people severely affected by mental illness. We will leverage funding to innovate and demonstrate proof of concept models, for example Mental Health and Money Advice Service and Mental Health Navigators, to the system so that we gradually meet more of the unmet need.



We will create a Carers Advisory Board to help co-produce a new model and partnerships to address the decline in specialist services for mental health carers. We will invest further in our volunteers to provide a high-quality volunteer experience and support the delivery of our mission. We will ensure that our activity goes much further in seeking out the experience and views of underserved communities and take action.



We will develop our existing offer around the Communities that Care model. As a campaigning organisation, which also provides information and support to the general public, we will make sure we reflect the pillars of Communities that Care in all our work. In our increasingly influential place-based activity we will support the local health and social care system and its partners with their transformation plans, so that regardless of where people live they will get the support they need across the different areas of their lives. Where we deliver services, we will play our part in ensuring people receive the appropriate care they require for their own needs and are supported to have the best quality of life they can.



We will develop new and innovative partnerships to create wider social change.

We will build partnerships with like-minded organisations, in particular those representing the voices of people from Black, Asian and minority ethnic communities, to spread innovation and transform the way we deliver care and support for people severely affected by mental illness.

We will seek to grow our profile in order to build a larger movement to achieve more social good, including a strong focus around stigma and discrimination in the context of mental illness in areas such as homelessness, LGBT+ and disabilities.

We will challenge stigma vocally when we see it and will stand up for the rights of people severely affected by mental illness whenever unfair systems and practices or policy failures let them down. We will seek to improve attitudes and practice to mental illness in the workplace by educating employers and supporting them to change their culture and practice by providing innovative training and consultancy services.

We will transform our internal ways of working to underpin our delivery.

We will review how we measure our outcomes, success, and the impact that we are having in improving outcomes for people severely affected by mental illness. We will consolidate our focus on quality, continuing to improve outcomes in our commissioned services and ensuring that the campaigns we run on issues such as welfare, money and rights are well-evidenced and led through lived experience.

We will continue to develop our culture and staff to support our changing environment, including embedding our commitment to becoming an anti-racist organisation. We will improve our systems, information sharing, and data gathering to underpin both our day-to-day work and the measurement of our impact. We will continue the journey of workplace transformation, reviewing our models of working, the size of our estate, our digital capability and our ways of connecting and strengthening our brand with colleagues.

We will develop our financial sustainability to invest in service provision, external relations and internal infrastructure, and set ambitious and realistic fundraising targets. We will develop the financial approach to our Communities that Care model.



Reference and administrative details

Registered Office:

15th Floor
89 Albert Embankment
London
SE1 7TP

Registered Charity Number (England and Wales): 271028

Company Registration Number: 1227970

The Trustees of Rethink Mental Illness are the charity's Trustees under charity law and the Directors of the Charitable Company. During 2020/21 the Trustees were:

Chair of the Board

Philippa Lowe

Members of the Board (Trustees)

Shaun Johnson – Vice chair (until 14 November 2020)	Regional
George Hook - Treasurer; Vice chair from 14 November 2020	Co-opted
John Liver – Treasurer from 9 December 2020	Co-opted
Aphra Tulip	Regional
Jane Watkinson	Regional
Frances Ashworth	Regional
Stuart Hellingsworth	Regional
Garrick Prayogg (from 30 July 2020)	Regional
Christine Stead (from 14 November 2020)	Regional
Edward Gorringe (from 21 January 2021)	Regional
Stephanie Holderness (until 21 January 2021)	Regional
Daniel Fletcher	Co-opted
Kathryn Tyson	Co-opted
Ian Jackson	Co-opted
Jeremy Connick	Co-opted
Khurum Sethi (from 24 September 2020)	Co-opted

The day-to-day management of Rethink Mental Illness is led by the Chief Executive on authority delegated by the Board of Trustees. The Chief Executive and the senior executive officers of the charity form the Executive Team, and each has clearly defined areas of responsibility and accountability.

Executive Officers

Mark Winstanley:	Chief Executive
Caroline Cannar:	Company Secretary
Brian Dow:	Deputy Chief Executive
Kelly Brown:	Director of Corporate Resources (resigned 31 July 2020)
Mark Yates:	Director of Operations
Kate Husselbee	Director of Strategy and Transformation (appointed 4 January 2021)

The Executive Team is complemented by the Senior Management Team, which draws together Associate Directors from each of the charity's main activities.

The charity's main professional advisors during the year were:

Auditors

Crowe U.K. LLP
Black Country House
Rounds Green Road, Oldbury
West Midlands, B69 2DG

Bankers

NatWest Commercial Office
2nd Floor, 2 Trinity Court
Wolverhampton Business Park
Broadlands
Wolverhampton, WV10 6UH

Solicitors

Bates Wells
10 Queen Street Place
London, EC4R 1BE

Insurers

Markel International Insurance Company Ltd
20 Fenchurch Street
London
EC3M 3AZ

Investment Managers

Investec Wealth & Investment Ltd
2 Gresham Street
London, EC2V 7QN

Internal Auditors

Mazars
Tower Bridge House
St Katherine's Way
London, E1W 1DD

VAT Advisors

Dains LLP
St Johns Court
Wittell Road
Lichfield
Staffordshire
WS14 9DS

Employees and volunteers

Rethink Mental Illness has a diverse and committed workforce of over 720 staff. We are an accredited ILM provider, a Disability Confident and Mindful Employer and hold an Investors in People Silver award. We carry out an equality impact assessment on all new policies that are developed for use within the charity.

We are proud to announce that we have worked hard to improve our pay structures this year and we have now become a 'Real Living Wage' Employer. This means our lowest paid staff are earning hourly rates which exceed both the National Minimum and National Living Wage. Alongside the increases in hourly rate, we have also been able to introduce a 35-hour working week, with increased rest breaks to support and improve employee wellbeing. In 2021/22 we will continue to focus on maintaining our Real Living Wage status and improving our overall employee offering by reviewing our benefits and total rewards.

Our Senior Management Team actively consults with staff on matters relating to our people, encouraging them to participate in focus groups, share their views and raise any concerns they may have. This year we have introduced our Diversity Pledge Groups which have given a staff from across the charity an opportunity to have a say in our work on anti-racism. They have been instrumental in contributing towards our Equality, Diversity and Inclusion (EDI) Strategy which will underpin our overarching corporate objectives for 2021/22.

Despite the challenges created by the pandemic, we have been able to continue to embed our behavioural framework RethinkCARES, through an improved performance appraisal and wellbeing check-in for all staff. RethinkCARES underpins our values and sets out our expectations in delivering the work we do and making Rethink Mental Illness a great place to work. As we head into 2021/22 RethinkCARES will be further embedded through a new Management Development Programme which will support circa 150 Managers with the skills they need to develop their teams.

Our staff are supported by volunteers, who contribute their time in a wide variety of ways. From involvement with local services and sitting on governance committees they make a real difference. Rethink Mental Illness acknowledges this with grateful thanks.

Rethink Mental Illness is also grateful for the support and commitment of thousands of active campaigners who have acted to secure positive change for people experiencing mental illness, challenging decision-makers at both a national and local level.

Section 172 Statement

The Trustees must act in accordance with a set of general duties. These duties are laid out in s172 of the U.K. Companies Act 2006, which is summarised as follows: 'A Director of a Company must act in the way he/she considers, in good faith, would be most likely to promote the success of the Company for the benefit of its members as a whole, and in doing so have regard to:

- The likely consequences of any decision in the long term
- The interests of the charity's employees
- The need to foster the charity's business relationships with suppliers, customers and others
- The impact of the charity's operations on the community and the environment
- The desirability of the charity's maintaining a reputation for high standards of business conduct,
- The need to act fairly as between members of the charity.'

The Trustees believed they have completed their duties under s172.

Public benefit

The Trustees have had due regard to the guidance issued by the charity Commission on public benefit. They have considered the requirements of the public benefit test and are satisfied that the charity's activities meet these criteria.

We deliver our charitable objects through our services, which directly support over 15,000 people, and 132 support groups, funded by voluntary and statutory sources. Our charitable objects are:

- a) to improve the lives of people severely affected by mental illness and their families and carers through local support groups and services;
- b) to provide expert advice, information and training to the public in the field of mental health and welfare, including influencing government and decision makers more widely; and
- c) to advance awareness and understanding as to the causes, consequences and management of mental illness, working to decrease the stigma surrounding it.

Streamlined energy and carbon reporting summary

This is the first year that we have reported on our environmental impact. Whilst there have been no specific activities in order to address energy efficiencies, we recognise the importance of everyone playing their part to tackle climate change. As part of our future estates strategy we are committed to reducing our environmental impact year on year, both in usage terms and our impact on the planet.

UK Greenhouse gas emissions and energy use data for the period 1 April 2020 to 31 March 2021

2020/21

Energy consumption used to calculate emissions (kWh)

Energy consumption break down (kWh):

- Gas	3,249,905
- Electricity	1,041,178
- Transport fuel	197,347

Scope 1: Emissions in metric tonnes CO2e

- Gas consumption	604
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Scope 2: Emissions in metric tonnes CO2e

- Purchased electricity	264
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Scope 3: Emissions in metric tonnes CO2e

- Business travel in employee-owned transport	46
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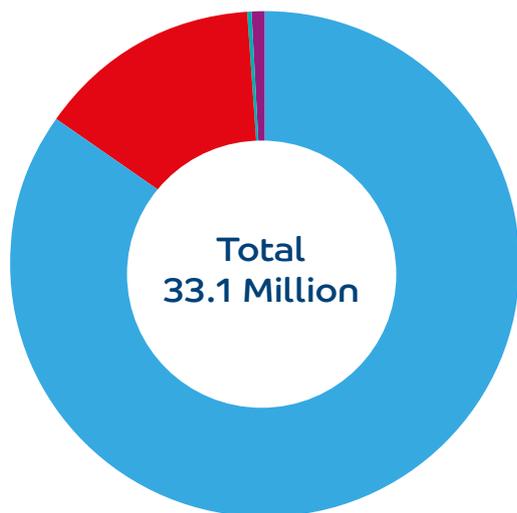
Total gross emissions in metric tonnes CO2e 914

Intensity ratio Tonnes CO2e per service user 0.06

Financial review

The Group's net income increased this year to £33.1m (2020: £31.7m), and our expenditure reduced this year to £30.5m (2020: £31.7m), leaving an operating surplus of £2,600,000 (2020: £49,000). This surplus was increased by net gains on investments of £1,622,000 (2020: decrease of £703,000), leaving a net surplus of £4,222,000 (2020: £654,000 net deficit), of which £3,816,000 (2020: £445,000) related to unrestricted funds (general and designated funds).

Income: Sources of funds:



- Charitable Activities - £28,055,000
- Donations and Legacies - £4,676,000
- Other Trading Activities - £165,000
- Investment Income £186,600

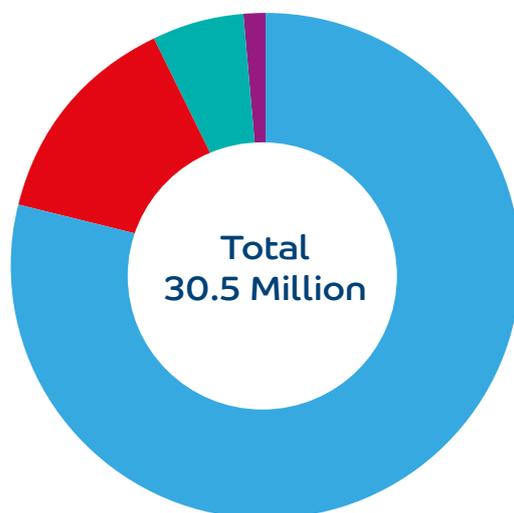
The largest source of our income comes from contracts with local authorities and NHS Commissioners to deliver our services. Whilst there remains pressure on commissioners, particularly local authority social care budgets, the renewed focus on community mental health transformation led by the NHS is providing an emerging opportunity for us to sustain and develop some of our core service models and work with colleagues across the system to develop new ways of working to support this work. Alongside this, there was financial support made available to social care providers during the pandemic which helped us to navigate through a potentially difficult period as well as develop new solutions to help the system cope during the crisis

During 2020/21, we received £953k in relation to covid funding, a mix of furlough and Covid 19 infection control funding.

Thanks to the continued support from our generous donors, we have been able to increase our level of income from fundraising activities which has enabled us to continue to support our beneficiaries through a number of activities, including our campaigns, groups and information service line.

Expenditure

The pie chart shows that the largest area of spend was on charitable activities.



- Charitable Activities - Direct costs - £24,050,00
- Charitable Activities - Support costs - £4,270,000
- Raising Funds - £1,808,000
- Other Expenditure - £354,000

Further analysis of our expenditure is given in note 5 of the accounts.

Pension Scheme

The charity has two final salary pension schemes, the Growth Plan and the Care Plan, details of which are explain in note 18 of the financial statements. Both schemes are only open to members of the executive team with the sole purpose of avoiding crystallising the debt.

Actuarial valuations are carried out every three years, and a full actuarial valuation of the Care Scheme in September 2019. The net effect of the revaluation, repayments made in the year and FRS102 year-end valuation resulted in a financial impact on the 2021 results, with a decrease in provision of £536,000. The Growth Plan underwent a valuation in September 2017 however no further increase in provisions was required following this review. The net effect of the repayments made in the year and FRS102 year end valuation resulted in a decrease in provision of £112,000.

Structure, governance and management

Rethink Mental Illness is governed by a Board of Trustees comprising a Chair, eight Trustees nominated by the Regions and up to seven co-opted Trustees. The Board of Trustees is responsible for the overall direction and control of the activities of Rethink Mental Illness. The Board holds six formally constituted meetings a year, one of which is a facilitated two-day event looking at forward planning, strategy and Board development.

The Chair of the Board of Trustees is elected by the Board from the existing Trustees.

There is one Trustee for each of the eight Regions of England, each nominated by

their relevant Regional Committee, subject to the approval of the Honorary Officers Committee (HOC) and endorsement by the Board. Regional Trustees must be either a carer, relative, user of mental health services or otherwise considered by the Board to have relevant experience or expertise. Co-opted Trustees are appointed by the Board and are chosen for their skills, for example, fundraising, financial or business development, which may not be provided by the Regional Trustees, having regard to the balance on the Board of carers, people who use mental health services and others and representation by gender, age and ethnicity.

Board members are formally appointed at the AGM to serve up to a three-year term and can serve no more than nine years in total, except for the Chair who may serve up to 12 years.

New Trustees receive a formal induction into their role to familiarise themselves with both Rethink Mental Illness and the responsibilities that go with Trusteeship. Trustees are invited to discuss their developmental requirements with the Chair on an annual basis. This enables more specialised development in areas such as finance or governance to be provided to either the full Board or specific individuals.

To assist the Board in its work there are three formally constituted national committees, each with its own Terms of Reference:

The Honorary Officers Committee (HOC) performs the function of an Executive Committee. In exceptional circumstances it has delegated authority to assume control over the work of the charity when urgent decisions need to be made that cannot wait until the next Board meeting. HOC acts as a Nominations, Appointment

and Remuneration Committee and has responsibility for appointments to the Board and recommends the appointment of new Trustees. It also has responsibility for setting the salaries of the Chief Executive and members of the Executive Team. HOC meets three times each year and holds additional meetings, depending on organisational demands.

The Audit and Assurance Committee (AAC) is responsible for overseeing all aspects of the charity's external and internal audit arrangements, internal control procedures and risk management. Meetings are attended by both the charity's external and internal auditors. Internal audits were scaled back during 2020/21 due to the pandemic but will resume in 2021/22. AAC also has responsibility for monitoring health and safety assessments and for ensuring that the charity delivers high quality services, operating in compliance with regulatory frameworks. AAC reviews a range of key metrics to identify trends or themes that require management action.

The Finance Scrutiny Committee agrees fundraising and service development strategies, monitors income and expenditure against budget and the effectiveness of financial management. It recommends relevant budget priorities in the form of a draft annual budget to the Board of Trustees. During the early months of the Covid 19 pandemic, the FSC significantly increased its activity to support the executive team in the management of what was potentially a volatile financial environment.

The Investment Committee is a Sub-committee of the Finance Scrutiny Committee, responsible for the appointment and supervision of the charity's Investment Managers. It sets and monitors annual performance objectives for the Investment

Managers, including ensuring that the required level of free reserves is maintained, as specified in the Reserves Policy. The Sub-committee ensures that Rethink Mental Illness's investments are conducted in accordance with the Investment Policy, the charity's Articles of Association and all relevant laws and regulations.

The charity has in addition two Governance Link Groups that involve a wider range of members interested in contributing to the work of the charity at a national level.

The Council of Representatives meets three times a year to share practice, consults on key issues and makes recommendations on the running of the charity. Whilst not a Committee of the Board with delegated decision-making powers, the Council of Representatives exists to improve and strengthen the work of Rethink Mental Illness Committees and in turn the governance of the charity through developing and supporting Committee Chairs, Vice Chairs, Regional Committee and Lived Experience Advisory Board members. The Council aims to increase the knowledge and confidence of people in their roles and to provide a forum for them to debate issues and to inform and influence decision-making in the organisation.

The Lived Experience Advisory Board (LEAB) comprises up to 18 members, plus any Trustees who use, or have used, mental health services. Key areas of work include monitoring the progress of the Involvement Strategy and making suggestions and providing constructive feedback on issues relating to the involvement and support of service users. LEAB also provides support and advises on organisational matters relating to people who use mental health services, for example, on policies and communications. LEAB meets at least three times a year and has been meeting with

greater frequency during the pandemic.

During the latter part of 2020/21, work started on setting up a third Link Group, the Carers Advisory Board (CAB), which would continue the long tradition of carer involvement within the charity and provide a distinct and strong voice for the carers of people with lived experience. A small Working Group was established to consider the scope of the CAB and draft terms of reference. An interim membership will be appointed to take the work forward in 2021/22, pending making formal appointments to the CAB.

Throughout 2020/21 all governance and link group meetings have been held remotely. This has enabled good governance, oversight and decision-making to continue during the pandemic with a high level of attendance at meetings, including by those who were having to shield.

During the year we introduced Board Briefings into the governance calendar. Initially these were to keep the Board informed about how the pandemic was impacting on the charity. More recently Board Briefings have been an invaluable method of keeping Trustees informed about other activities taking place within the charity, particularly matters where no formal decision or resolution is required.

Statement of engagement with employees

Our Senior Management Team (SMT) is made up of Executive Directors and Associate Directors who meet collectively at least once a quarter to discuss the performance of the charity in line with a core set of Key Performance Indicators. The group ensure the standing agenda item 'matters to communicate/cascade' is

agreed by the group and cascaded down the management line. At the outbreak of the pandemic, the Emergency Planning and Contingency Committee (supported by relevant planning groups) met on a weekly basis where all key messages are discussed and cascaded as required.

Managers receive a monthly bulletin from internal communications with matters of interest/concern for all employees and we use 'E-think,' our fortnightly internal newsletter, to announce specific changes and seek feedback from staff. Our Human Resources team has a dedicated email box for staff queries/concerns of any sort. We regularly use staff surveys for input into key decision making and hold focus groups across the charity on matters of importance.

This year we have introduced more regular shorter 'pulse surveys' with a focus on specific areas such as wellbeing, line management support, communications and equality, diversity & inclusion. Our response rates have been the highest we have recorded, and our overall engagement score is eleven percentage points higher than those of our chosen benchmark charities.

The Charity Governance Code

The Board of Trustees is committed to developing and maintaining high standards of governance throughout the charity. Our mission, 'leading the way to a better quality of life for everyone severely affected by mental illness', lies at the heart of all our work and feeds into the overall strategy, which is set by the Board of Trustees.

The annual Board Awaydays provide the opportunity for the Board and Executive Team to review the strategy and prioritise areas of work for the coming year. The Committees of the Board and Governance

Link Groups are consulted, and views considered when the Board makes its decisions.

During the latter part of the year, Trustees have been involved in the refresh of the Corporate Strategy and Transformation Plan for the period 2021- 2023. The strategic objectives have been updated and will guide the work of the charity over the next two years.

In March 2021, the charity added 'equity' to its core values in recognition that some groups, in particular people from Black, Asian and Minority Ethnic backgrounds, are disproportionately likely to experience severe mental illness due to social and economic factors, including discrimination. This further value will guide our external work campaigning for change, underpinning the way we deliver our mission of reaching underserved groups of the population and helping the charity to become a truly anti-racist and inclusive organisation in the coming years.

We have policies and procedures in place that underpin the requirement to act with integrity and in the best interests of the charity and its charitable purposes. A Governance Review was carried out at the end of 2020 and a plan has been put in place to address areas of governance that we feel could be improved.

All Trustees, including the Chair, receive an annual review and the Chair, Chief Executive and Company Secretary work collaboratively to address the development needs of Trustees. We undertake a skills audit to record skills and experience, identify gaps and thereby inform the process for appointing new Trustees.

Subsidiary company information

There are three active subsidiary companies: NSF Trustees Limited (NSFT), Rethink Trust Corporation Limited (RTC) and Rethink Mental Illness Limited.

NSFT was established to meet an important need for families of people with severe mental illness to make financial provision for the care of their dependants after the carer's death. RTC was later established in 2010/11 to expand the potential range of services provided through NSFT.

Rethink Mental Illness Limited operates as the trading subsidiary of Rethink Mental Illness. It commenced trading during 2017/18, with several service contracts previously held by the charity being novated across to the subsidiary.

The financial statements of the subsidiaries have been consolidated into the financial statements of the Group.

Two further subsidiary companies are incorporated as possible future trading subsidiaries. Rethink Mental Illness also acts as Trustee of the Befriending Visitors Service (BVS). Financial details relating to the subsidiaries and BVS are contained in notes 19 and 20 to the financial statements.

Wider networks

Rethink Mental Illness is part of The Richmond Group of Charities, a collaboration of 14 of the leading health and social care organisations in the voluntary sector. The Group works together as a collective voice to better influence health and social care policy, with the aim of improving the care and support for the 15 million people living with long term conditions it represents.

The charity is also part of the Mental Health Policy Group (MHPG), a coalition of six national organisations working together to improve mental health. MHPG represents providers, professionals and the hundreds of thousands of people who use mental health services, and advocates for cross-government approaches to improve services and support early intervention and prevention of mental health problems.

Rethink Mental Illness is a member of the Association of Mental Health Providers (AMPG), which is the leading representative body for voluntary and community sector mental health organisations in England and Wales. Representing small, medium and large providers – from locally focused to regional and national organisations – members provide services covering the full range of mental health provision.

The charity is also connected with Mental Health UK, a Charitable Incorporated Organisation (CIO). Rethink Mental Illness, Adferiad Recovery in Wales, MindWise in Northern Ireland, and Support In Mind Scotland are all members of Mental Health UK. Mental Health UK is not considered part of the Rethink Mental Illness Group and has not been consolidated in the financial statement.

The operating policies of Rethink Mental Illness are not affected by any of the above relationships.

Reserves policy

Rethink Mental Illness recognises the importance of maintaining a reserves policy to provide a prudent level of cover to meet future obligations and guard against unforeseen contingencies on a going concern basis.

The reserves of the charity at the year-end are:

	£
Unrestricted reserves – general funds	7,508,000
Unrestricted reserves – designated funds	3,354,000
Restricted funds	1,107,000
Total funds	11,969,000

The Board approved additional designated funds of £2.5m during the year, which have been allocated to support the delivery of our two-year transformation strategy. This investment will focus on ICT infrastructure and improvements in our estate and organisational development, with the aim of ensuring we can respond flexibly and effectively to future challenges and opportunities to improve the lives of people severely affected by mental illness. An analysis of designated funds is included in note 15 of the accounts.

Our reserves policy focuses on the level of our “free” reserves.

Free reserves are defined as net assets excluding restricted funds, designated funds and the element of general funds that have been used to acquire fixed assets for the charity’s own use.

Our unrestricted reserves, which exclude designated funds, on 31 March 2021 were £7.5m (2020: £6.1m) of which £2.4m (2020: £2.9m) are fixed and intangible assets in use by the charity. The level of free reserves on 31 March 2021 was £5.1m (2020: £3.2m).

The current target range for free reserves has been set at between £3.5m and £5.4m reflecting a 12-month forward view of expected calls of reserves factoring in commercial and other risks, as well as the need for potential investment opportunities.

This enables Rethink Mental Illness to meet planned charitable expenditure over the next financial year.

The level of free reserves has improved during the year, reflecting the in-year surplus and the improved investment portfolio valuation, and are now at the top end of our target level.

The Board recognise the need to ensure the charity has the appropriate level of free reserves to enable it to meet its future needs. With this in mind free reserves will remain under review throughout the next financial year and if necessary designated funds will be reallocated to ensure they remain in line with the target range set out within the reserves policy.

The Board will keep its reserves policy under regular review to ensure that an appropriate balance is maintained between developing reserves to provide sufficient funds to meet its forward obligations, to provide a reserve against unforeseen events and to provide adequate resources to fund new initiatives in order to promote the charitable objects of Rethink Mental Illness. Further details of reserves held on 31 March 2021 are shown in note 15 to the financial statements.

Investment policy

The Trustees have wide investment powers set out in the charity's Articles of Association. Currently, monies of the charity not immediately required for its purposes are placed in short-term interest-bearing accounts with the charity's main bankers or invested by the formally appointed Investment Managers.

During 2020/21 the Investment Committee reviewed the investment strategy of the charity and confirmed the strategy remained appropriate for the charity's investment managers, Investec Wealth & Investment, to follow. The objective is to achieve a balance between income and capital returns ensuring low to medium risk.

Any investments will have due regards for the charity's objects and the committee have decided that it will not make any direct investments in companies or funds, primarily concerned with the production or distribution of pornography, tobacco, armaments or alcoholic beverages.

The medium-term performance benchmark is linked to the Consumer Price Index (CPI) plus 3%. During 2020/21 CPI was 0.7% this gives a performance benchmark of 3.7% for the year ending 31 March 2021. The performance benchmark has been confirmed by the Investment Committee as being appropriate to continue with. During the year, the total return (net of fees) was +25.0% as global markets exhibited a strong recovery from the negative impact of COVID-19 in the prior year.

Remuneration policy

Every role at Rethink Mental Illness undergoes a job evaluation to ensure we can attract and retain the talented and motivated people we need to achieve our mission and deliver our strategic goals. We are delighted to have reached our aim this year of achieving Real Living Wage Foundation accreditation which improves our ability to attract and retain staff in the not-for-profit sector. We will continue to focus attention on our employee benefits and total rewards so that we are able to maintain the progress we have made.

Learning and development

We have worked hard to adapt our training solutions to remote working this year and have been able to create engaging and interactive online training to ensure there has been no interruption to our mandatory offering. In addition, we have utilised our e-learning platform, The Learning Zone, to provide specific Covid-19 and wellbeing support for colleagues during the crisis. New online training programmes have included Coaching Culture offered to 147 managers and Leading the Way which was successfully delivered to 47 Accommodation service managers and senior staff / nurses.

We have continued to offer training through the Apprenticeship Levy; the initial Level 5 Apprenticeship in Care and Leadership cohort rolled out successfully, and we are now starting to see the cohort achieve their full apprenticeship frameworks. We are also supporting a wider range of apprenticeship frameworks across the organisation, including Lead Adult Care Worker, Senior Housing and Property Management and Professional Accounting Technician. We have maintained our support for our advocacy staff members, ensuring that all are registered for the full Independent Advocacy City and Guilds Level 3 Qualification.

Principal risks and uncertainties

- Pressures on finances, accentuated by the Covid-19 pandemic. These include the possibility of increased agency spend, loss of fundraising income, decrease in investment income, all leading to the inability to invest in existing priorities and future innovation.

This risk has been mitigated by utilising opportunities for additional support from government, the private sector and individuals that recognise the detrimental impact of the pandemic on the nation's mental health.

- Pressures on staff teams as a result of the pandemic, leading to workforce burnout, increased stress and mental illness within the workforce.

The risk is mitigated by the work of the charity's Emergency Planning and Contingency Committee which oversees the conduct of business during the pandemic, including ensuring that there is on-going support to staff.

- A risk around sustainability of the charity, should pressures on central government, health and local authorities result in the government making cuts to offset the increased costs incurred during the pandemic, leading to reduced funding for social care.

The risk is mitigated by using the learning during the pandemic to inform a review of the charity's future service provision, assessing what services can be effectively delivered remotely and adapting working practices where possible to effect savings.

- Serious untoward incidents, including unpredictable death or serious injury to a beneficiary, staff member, volunteer or a member of the public.

The risk is mitigated by the charity's operational governance framework, including Safeguarding and Health and Safety policies and procedures and a system of integrated governance that regularly reviews all areas of risk.

- Inability to effectively evidence level of care outcomes, which in turn impacts on new and continuing business.

This is mitigated by (a) the work carried out on improving quality, the development of the Evidence and Outcomes Framework and KPIs and (b) work to understand the evolving landscape and what may be needed to respond quickly to new business opportunities and those provided by the NHS Long Term Plan.

Serious incidents

The charity reported one serious incident to the Charity Commission and confirms that there are no other serious incidents during 2020/21 that should have been reported to the Commission.

Going concern

The Board have sought to understand and mitigate the impact of COVID-19 as much as possible as the pandemic continues into another financial year. The budget set for 2021/22 included estimations of impacted on restrictions into quarter 2 and the impact of operational changes as a result of the pandemic.

Areas at risk are the achievement of fundraising targets, the external training provision, increased agency costs and the impact on the investment portfolio. There are being reviewed monthly using a risk report to monitor the performance against the budget. To date the charity is achieving the budget.

Cashflow projections and forecasts have been prepared covering at least 12 months which support the continued operations of

the charity. Accordingly, they continue to adopt the going concern basis in preparing the financial statements as outlined in the Statement of Trustees responsibilities.

The first half on the 2021-22 year has seen continued positive growth through successful bids for a number of contracts across both our Operations and External Affairs directorates, further supporting our assessment of going concern. These successes include the Money and Pensions Service 'Breathing Space' contract where we successfully bid to provide advice and help to people experiencing a mental health crisis with 'breathing space' for any finance issues they may have whilst receiving mental health crisis treatment.

We also successfully bid to deliver the North West London Suicide Prevention programme; this innovative contact requires the coordination and delivery of a programme of initiatives including network development, co-production, direct support and training across the eight boroughs of North West London

These successes have been followed up with further successful bids for Norfolk and Waveney CCG Co-Production; building and sustaining co-production capacity integral to the work of local system wide mental health transformation and Kent Peer Support; a further expansion of our community support provision.

We have also seen existing services draw down additional funding and extend additional temporary funding. For example the NHS block funding of beds in our Derbyshire Nursing Services initiated in Winter 2020 to help alleviate in-patient NHS bed pressures continues and our Brighton SOS Suicide Bereavement service successfully negotiated additional recurring funding.



Auditors

Crowe U.K. LLP has indicated its willingness to be reappointed as statutory auditor.

Employees and volunteers

The Trustees would like to put on record their thanks and gratitude to everyone working at the charity for their hard work and dedication in what has been an exceptionally challenging 12 months. Their steadfast commitment is an inspiration.

Rethink Mental Illness has a diverse and committed workforce of over 800 staff. We are an accredited ILM provider, a Disability Confident Employer and hold an Investors in People Silver award. We carry out an equality impact assessment on all new policies that are developed for use within the charity.

We are pleased to have become a 'National Living Wage' Employer during 2020/21 and are now undertaking a benchmarking process that aims to ensure that our salaries and allowances are as generous and as competitive as we can sustainably afford.

Our Senior Management Team actively consults with staff on matters relating to our people, encouraging them to participate in focus groups, share their views and raise any concerns they may have. We promote an open and transparent culture which welcomes questioning, probing and the challenging of management proposals. Our aim is to encourage discussion and consensus among Rethink Mental Illness staff at all levels and to ensure decision-making is fair and representative.

We have worked with staff across all levels and directorates within the charity to develop a new behavioural framework, RethinkCARES which underpins our values and sets out our expectations in delivering the work we do and making Rethink Mental Illness a great place to work.

Our staff are supported by volunteers, who contribute their time in a wide variety of ways. From involvement with local services and sitting on governance committees they make a real difference. Rethink Mental Illness acknowledges this with grateful thanks.

Rethink Mental Illness is also grateful for the support and commitment of thousands of active campaigners who have acted to secure positive change for people experiencing mental illness, challenging decision-makers at both a national and local level.

Disclosure of information to auditors

The Trustees who held office at the date of approval of this Trustees' Report confirm that, so far as they are each aware, there is no relevant audit information of which the Charitable Company's auditors are unaware; and each Trustee has taken all the steps they ought to have taken as a Trustee to make themselves aware of any relevant audit information and to establish that the Charitable Company's auditors are aware of that information.

Statement of Trustees' Responsibilities in respect of the Trustees' Annual Report and the Financial Statements

The Trustees are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and regulations.

Company law requires the Trustees to prepare financial statements for each financial year in accordance with UK Accounting Standards, including Financial Reporting Standard 102, The Financial Reporting Standard applicable in the UK and Republic of Ireland (UK Generally Accepted Accounting Practice).

The financial statements are required by law to give a true and fair view of the state of affairs of the Charitable Company and of the excess of income over expenditure for that period.

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

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charitable Company will continue its activities.

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that its financial statements comply with the Companies Act 2006. They have general responsibility for taking such steps as are reasonably open to them to safeguard the assets of the Charitable Company and to prevent and detect fraud and other irregularities.

The Trustees are responsible for the maintenance and integrity of the charity and financial information included on the Charitable Company's website. Legislation in the UK governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

This Annual Report of the Trustees, under the Charities Act 2011 and the Companies Act 2006, was approved by the Board of Trustees on 13 October 2021 including approving in their capacity as Directors the Trustees Strategic Report and Directors' Report contained therein, and is signed as authorised on its behalf by the Chair of the Board of Trustees.

By Order of the Board



Philippa Lowe

Chair of the Trustees

Date 21 September 2021

Opinion

We have audited the financial statements of Rethink Mental Illness ('the charitable company') and its subsidiaries ('the group') for the year ended 31 March 2021 which comprise the Group Statement of Financial Activities, the Group and Company Balance Sheets, the Group Cash Flow Statement 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 Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the group's and the charitable company's affairs as at 31 March 2021 and of the group's 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.

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 group 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 trustee's 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 the charitable company's or the group'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 trustees are responsible for the other information contained within the annual report. The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. 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 the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether 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 our audit

- the information given in the trustees' report, which includes the directors' report and the strategic report prepared for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the directors' report included within the trustees' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In light of the knowledge and understanding of the group and charitable company and their environment obtained in the course of the audit, we have not identified material misstatements in the strategic report or the directors' report included within the trustees' 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 and proper accounting records have not been kept; 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.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 34, 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.

Details of the extent to which the audit was considered capable of detecting irregularities, including fraud and non-compliance with laws and regulations are set out below.

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

Extent to which the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We identified and assessed the risks of material misstatement of the financial statements from irregularities, whether due to fraud or error, and discussed these between our audit team members. We then designed and performed audit procedures responsive to those risks, including obtaining audit evidence sufficient and appropriate to provide a basis for our opinion.

We obtained an understanding of the legal and regulatory frameworks within which the charitable company and group operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Companies Act 2006, the Charities Act together with the Charities SORP (FRS 102). We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's and the group's ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company and the group for fraud. The laws and regulations we considered in this context for the UK operations were General Data Protection Regulation (GDPR), Health and safety legislation, and Employment legislation.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any.

We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing of recognition of income and the override of controls by management. Our audit procedures to respond to these risks included enquiries of management, and the Audit and Quality Assurance Committee about their own identification and assessment of the risks of irregularities, sample testing on the posting of journals, reviewing accounting estimates for biases, reviewing regulatory correspondence with the Charity Commission, and reading minutes of meetings of those charged with governance.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

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.



Kerry Brown

Senior Statutory Auditor

For and on behalf of

Crowe U.K. LLP

Statutory Auditor

Black Country House

Rounds Green Road

Oldbury

West Midlands

B69 2DG

Date: 24 September 2021

	Note	2021 Unrestricted Funds £000	2021 Restricted Funds £000	2021 Total £000	2020 Unrestricted Funds £000	2020 Restricted Funds £000	2020 Total £000
Income and Endowments from:							
Donations and Legacies	2	3,551	1,125	4,676	2,826	379	3,204
Charitable Activities	3	24,739	3,316	28,055	24,033	4,082	28,115
Other trading Activities	4	165	-	165	151	-	151
Investments	4	186	-	186	244	-	244
Total Income		28,641	4,441	33,082	27,254	4,461	31,715
Expenditure on:							
Raising Funds	5	1,808	-	1,808	1,299	-	1,299
Charitable Activities	5	24,316	4,004	28,320	25,842	4,572	30,414
Other	5	354	-	354	(47)	-	(47)
Total Expenditure		26,478	4,004	30,482	27,094	4,572	31,666
Income less Expenditure Before Investments		2,163	437	2,600	160	(111)	49
Net gains/(losses) on Investments	9	1,622	-	1,622	(703)	-	(703)
Net Income/(Expenditure)		3,785	437	4,222	(543)	(111)	(654)
Transfers between funds		31	(31)	-	92	(92)	-
Net movement in funds		3,816	406	4,222	(451)	(203)	(654)
Fund balances brought forward at 1 April 2020		7,046	701	7,747	7,497	904	8,401
Fund balances carried forward at 31 March 2021	15	10,862	1,107	11,969	7,046	701	7,747

		Group		Charity	
		2021	2020	2021	2020
		£000	£000	£000	£000
Fixed assets					
Intangible assets	8	208	495	208	495
Tangible assets	8	2,226	2,416	2,226	2,416
Investments	9	8,745	7,166	8,734	7,170
		11,179	10,077	11,168	10,081
Current assets					
Stocks for resale		10	13	10	13
Debtors	10	6,153	4,751	2,789	2,521
Cash at bank and in hand		10,442	4,033	10,251	3,773
		16,605	8,797	13,050	6,307
Creditors: amounts due within one year	11	(9,688)	(7,321)	(6,146)	(4,860)
Net current assets		6,917	1,474	6,904	1,447
Total assets less current liabilities		18,096	11,553	18,072	11,528
Creditors: amounts due after one year	12	(5,777)	(3,540)	(5,777)	(3,540)
Provisions for liabilities	13	(350)	(266)	(350)	(266)
Total net assets or liabilities		11,969	7,747	11,945	7,722
Funds					
General funds	15	7,508	6,143	7,484	6,125
Designated funds	15	3,354	903	3,354	903
Restricted funds	15	1,107	701	1,107	694
		11,969	7,747	11,945	7,722

A surplus reflecting income above expenditure for the year of £4,222,000 (2020: deficit of £655,000) has been dealt with in the financial statements of the Charitable Company (company reg: 1227970).

The financial statements were approved by the Trustees on _____
and were signed on their behalf by:

Philippa Lowe (Chair of Trustees) _____

	Note	2021 £000	2020 £000
Net Cash provided by operating activities	24	6,187	984
Cash flows from investment activities			
Dividends, interest and rent from Investments		186	244
Proceeds from sale of property, plant and equipment		-	-
Purchase of property, plant and equipment		(7)	(43)
Proceeds from the sale of Investments		1,428	1,104
Purchase of investments		(1,453)	(1,174)
Net Cash provided by (used in) Investing Activities		154	(131)
Cash flows from investment activities			
(Increase)/Decrease in cash deposits		66	(37)
Net Cash provided by (used in) Investing Activities		66	(37)
Change in Cash and Equivalents in the reporting period		6,407	1,077
Cash and Cash Equivalents at the beginning of the reporting period		4,033	2,956
Cash and Cash Equivalents at the end of the reporting period	25	10,442	4,033

Company status

The charity is a company limited by guarantee, incorporated in England and Wales, and treated as a public benefit entity. The board members of the company are the Trustees named under “Legal and administrative information”. In the event of the charity being wound up, the liability in respect of the guarantee is limited to one penny per member of the charity.

The operating name of the National Schizophrenia Fellowship is Rethink Mental Illness.

Registered Office, 15th Floor, 89 Albert Embankment, London SE1 7TP.

Principal Office, 1st Floor Castlemill, Birmingham New Road, Tipton, DY4 7UF

1. Accounting policies

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the company's financial statements except as noted below.

Basis of preparation

The financial statements have been prepared under the historical cost accounting rules with the exception of investments which are included at market value. The financial statements have been prepared in accordance with the Statement of Recommended Practice ("SORP") 2015 "Accounting and Reporting by Charities", issued in January 2015, and Financial reporting standard 102 (FRS102), and the Companies Act. The charity is a public benefit entity for the FRS102 purposes.

Going concern

After making enquiries, the Trustees have a reasonable expectation that the charity has adequate resources to continue its activities for the foreseeable future.

The Board have sought to understand and mitigate the impact of COVID-19 as much as possible as the pandemic continues into another financial year. The budget set for 2021/22 included estimations of impacted on restrictions into quarter 2 and the impact of operational changes as a result of the pandemic.

Areas at risk are the achievement of fundraising targets, the external training provision, increased agency costs and the impact on the investment portfolio. There are being reviewed monthly using a risk report to monitor the performance against the budget. To date the charity is achieving the budget.

Cashflow projections and forecasts have been prepared covering at least 12 months which support the continued operations of the charity. Accordingly, they continue to adopt the going concern basis in preparing the financial statements as outlined in the Statement of Trustees responsibilities.

Basis of consolidation

The consolidated financial statements include the financial statements of the charity and its subsidiary undertakings made up to 31 March 2021. The results of the subsidiaries, as shown in note 19, are consolidated on a line by line basis within the consolidated Statement of Financial Activities ("SOFA"). In the Charitable Company's financial statements, investments in subsidiary undertakings are stated at cost less provision for permanent diminution.

Charitable Company income and expenditure

No separate statement of financial activities has been prepared for the charity alone as permitted by Section 408 of the Companies Act 2006. A surplus reflecting income above expenditure for the year of £4,222,000 (2020: deficit of £654,000) has been dealt with in the financial statements of the Charitable Company.

Fund accounting and transfers

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the charity and which have not been designated for other purposes.

Designated funds comprise unrestricted funds that have been set aside by the

Trustees for particular purposes. The aim and use of each designated fund is set out in note 15 to the financial statements.

General funds may be transferred to designated funds where Trustees wish to use these funds for a specific purpose. Such funds may be transferred back to general funds once the criteria for designation have been met or are no longer applicable.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The cost of raising and administering such funds are charged against the specific fund. The aim and use of restricted funds is set out in the notes to the financial statements. Restricted funds may only be transferred to general or designated funds once the criteria for restriction have been discharged or no longer apply.

Incoming resources

All incoming resources are shown net of VAT. They are included in the SOFA when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy. Gifts in kind and donated facilities are included at the value to the charity where this can be quantified and a third party is bearing the cost. No amounts are included in the financial statements for services donated by volunteers.

For legacy income, entitlement in the case of residuary and pecuniary legacies is counted from the earlier of estate accounts being finalised and communicated to Rethink Mental Illness and cash received. Legacies where Rethink Mental Illness's receipt of income is subject to a life tenancy have not been included.

Members' subscriptions are taken to income on a received basis. Grants, service agreement and fee income and grants for premises and equipment are recognised in the SOFA and income and expenditure account in the period in which they are receivable. Income is deferred only when the charity has to fulfil conditions before becoming entitled to it or where the donor/funder has specified that the income is to be expended in a future period.

COVID-19 Local Authority income is recognised in the SOFA and held as Restricted Fund balance where unspent.

Resources expended

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly attributed to particular headings, they have been apportioned to activities on the basis of direct costs.

Costs of generating voluntary income are those incurred in seeking voluntary contributions and do not include the cost of disseminating information in support of the charitable activities.

Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include an appropriate apportionment of management overheads.

Governance costs are those costs incurred in connection with governance and professional support to Trustees.

Intangible assets and amortisation

Intangible assets costing more than £500 are capitalised and included at cost including any incidental expenses of acquisition. Amortisation is provided on all intangible assets at rates calculated to write off the cost on a straight-line basis over their expected economic lives as follows:

ICT Licenses	the shorter of the life of the license or 10 years
--------------	--

Tangible fixed assets and depreciation

Tangible fixed assets costing more than £500 are capitalised and included at cost including any incidental expenses of acquisition. Depreciation is provided on all tangible fixed assets at rates calculated to write off the cost on a straight-line basis over their expected economic lives as follows:

Freehold land	Nil
Freehold buildings	2%
Leasehold land and buildings	2%
(or over life of lease if shorter)	
Furniture and equipment	25%
ICT Equipment	33.3%
(purchases from 01.04.2015)	
Motor vehicles.....	33.3%

Investments and interest receivable

Investments are stated at market value at the balance sheet date. Interest on deposit and other accounts is allocated to income in the year in which it is receivable. Net gains and losses on investments arising on revaluation are included in the SOFA.

Stock

Stock consists of purchased goods for resale. Stocks are valued at the lower of cost and net realisable value. Items for resale or distribution are not included in the financial statements until they are sold or distributed.

Volunteers

The charity has in the region of 500 volunteers. The financial value these volunteers make is not incorporated within the accounts.

Local groups

In order to correctly reflect the stewardship of the charity over the activities of its local groups, their results are included in the SOFA and their cash balances at the year-end are included in the balance sheet as restricted funds.

Liquid resources

For the purposes of the cash flow statement, cash comprises cash in hand and deposits repayable on demand without penalty, less overdrafts payable on demand.

Post-retirement benefits

Rethink Mental Illness participates in a pension arrangement with the People's Pension. This scheme was established in September 2013 and it is open to all staff who qualify under the Government's auto enrolment scheme. The People's Pension is a defined contribution scheme.

During the year the charity participated in the CARE (Career Average Revalued Earnings) and Growth Plan Pension Schemes administered by TPT Retirement Solutions. Both the CARE and Growth Plan Schemes are multi-employer defined benefit schemes. The Schemes are funded and contracted out of the State scheme. The assets of the schemes are held separately from those of the charity in an independently administered fund. It is not possible to identify the share of underlying assets and liabilities belonging to individual participating employers. Rethink Mental Illness has entered into an agreement with the Multi-Employer plan which determines how a deficit will be funded. As a result Rethink recognises the net present value of the contributions payable from this agreement as a liability on the balance sheet. The CARE and the Growth Scheme were closed during 2013 to new entrants.

All pension costs are funded through the unrestricted fund.

Finance and operating leases

Rentals applicable to operating leases are charged to the SOFA over the period in which the cost is incurred in equal amounts. Assets purchased under finance leases are capitalised at their fair value at the inception of the contracts and depreciated over their estimated useful lives. Obligations under such agreements are included in creditors. The difference between the capitalised cost

and the total obligation under the lease represents the finance charges. Finance charges are allocated over the period of the lease in proportion to the capital amount outstanding.

Deferred taxation

In the subsidiary financial statements, the policy is to pay all taxable profits to Rethink Mental Illness by way of Gift Aid. No deferred tax liability arises in the financial statements.

Critical accounting judgements and key sources of estimation uncertainty

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are described and summarised below. Estimates are made on the following bases:

- Gift in kind donated property is based on a standard price of £11.50 per square feet and a standard room size of 144 square feet per office space provided free of charge.
- Gift in kind donated advertising uses a market rate valuation provided by the donor. Where the service received has not changed, a % linked increase may be applied to a previous years' market rate valuation.
- Pension Liability - The charity is a member of two multi-employer defined benefit pension schemes. The charity has entered into a deficit recovery repayment plan with TPT Retirement Solutions in respect of these schemes and this liability has been recognised on the Balance Sheet at amortised cost. The discounting assumptions used are recorded in note 18.

Debtors

Debtors are measured at amortised cost less any impairment.

Creditors & 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.

Financial instruments

Rethink Mental Illness 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 amortised cost using the effective interest method. Financial assets held at amortised cost comprise cash at bank and in hand, together with trade and other debtors. Financial liabilities held at amortised cost comprise bank loans and overdrafts, trade and other creditors.

Investments, including bonds held as part of an investment portfolio are held at fair value at the Balance Sheet date, with gains and losses being recognised within income and expenditure. Investments in subsidiary undertakings are held at cost less impairment.

2. Analysis of Donations and Legacies

	2021	2021	2021	2020	2020	2020
	Unrestricted	Restricted	Total	Unrestricted	Restricted	Total
	£000	£000	£000	£000	£000	£000
Fundraising and Donations	602	71	673	476	113	589
Donated services and facilities	426	-	426	474	-	474
Membership subscriptions	43	-	43	69	-	69
Legacies	1,041	-	1,041	624	-	624
Sponsorship and events	374	257	631	464	150	614
Corporate Donations	499	410	909	719	115	834
COVID-19 Job Retention Scheme	451	-	451	-	-	-
Other COVID-19 Funding	115	387	502	-	-	-
	3,551	1,125	4,676	2,826	378	3,204

Donated services and facilities relate to office accommodation and Google Ad Words that have been provided free of charge.

A pipeline legacy valued between £1,275,000 - £1,500,000 has been identified during 2020-21 but excluded from the accounts due to the uncertainty of the exact measurement of the income and the expected timing of receipt.

3. Analysis of income from charitable activities

	2021 Unrestricted £000	2021 Restricted £000	2021 Total £000	2020 Unrestricted £000	2020 Restricted £000	2020 Total £000
Supported Housing & Floating Support Services	5,232	2	5,234	4,843	-	4,843
Prisons/Criminal Justice Services	2,046	-	2,046	1,589	45	1,634
Community Services	3,594	82	3,676	3,229	46	3,282
Carers' & Family Support Services	422	38	460	431	61	492
Advocacy Services	2,875	-	2,875	3,747	-	3,747
Helpline & Advice Services	174	243	417	278	52	330
Nursing & CQC Registered Services	9,298	5	9,303	8,916	5	8,921
Communications & Campaigns	892	21	913	959	53	1,005
Management & Support	167	-	167	41	-	41
Mental Health UK	39	1,982	2,021	-	1,925	1,925
Time To Change	-	943	943	-	1,895	1,895
Total funding received for charitable activities	24,739	3,316	28,055	24,033	4,082	28,115

Time to Change is a programme of activities that works to reduce stigma of mental illness in the wider population.

Mental Health UK is an independent charity which has the ambition to ensure that everyone has the tools they need to live their best possible life. Working through its founding charities (including Rethink Mental Illness) it is able to support people most in need and tackle some of the biggest challenges facing those with mental ill health.

Other Covid-19 Funding includes grant income for Infection Control, Rapid Testing and Workforce Capacity.

4. Analysis of incoming resources from Other Trading Activities and Investments

	2021	2021	2021	2020
	Unrestricted	Restricted	Total	Total
	£000	£000	£000	£000
Other trading Activities				
Income from Subsidiary undertakings	165	-	165	151
	165	-	165	151
Investments				
Interest received	2	-	2	6
Dividends received	184	-	184	238
	186	-	186	244

The following funders have specifically asked for income from their organisation to be listed:

	Incoming Resources recognised in SOFA
	£000
Time to Change in conjunction with Mind	962
Mental Health UK in conjunction with Lloyds Banking Group	1,862
Sport England	100
The Stone Family Foundation	115
The City Bridge Trust	49
The National Lottery Community Fund	156
Rayne Foundation	5
Janssen Cilag Ltd	136

5. Analysis of expenditure

	Direct costs	Support costs	Total 2021	Total 2020
	£000	£000	£000	£000
Raising funds				
Fundraising	1,092	197	1,289	1,251
Managing Investments	54	11	65	48
Trusts & Grants	380	74	454	-
Total cost of raising funds	1,526	282	1,808	1,299
Charitable activity				
Supported housing and floating support services	4,759	834	5,593	4,698
Prisons/criminal justice services	1,452	264	1,716	1,246
Community services	3,081	561	3,642	3,605
Carers' and family support services	784	109	893	1,150
Advocacy services	2,091	380	2,471	3,141
Helpline & Advice Services	1,778	321	2,099	3,180
Nursing and CQC registered services	7,570	1,378	8,948	9,100
Mental Health UK (& TTC)	1,040	178	1,218	2,299
Communications and Campaigns	1,373	221	1,594	1,975
Community MH Framework (Somerset Alliance)	122	24	146	20
Total cost of charitable activity	24,050	4,270	28,320	30,414
Other Expenditure				
Expenditure on Other trading Activities	426	-	426	52
Pension Interest Charge	(72)	-	(72)	(99)
Total Other Expenditure	354	-	354	(47)
	25,930	4,552	30,482	31,666

The split of direct and support costs for 2020 were Direct £27,620,000 and Support costs £4,046,000.

Direct and support costs include:

	2021	2020
	£000	£000
Auditors' remuneration:		
Fees payable to the charity's Auditors for the audit of the annual accounts	44	44
Fees payable to the charity's Auditor for the audit of the Charity's subsidiary undertakings, pursuant to legislation	3	3
Depreciation	477	643
Loss on disposal of fixed assets	9	1
Rents paid on leasehold premises	1,413	1,371
Operating lease rentals	164	262

Allocation of support costs:

	Allocated to Fundraising	Allocated to charitable activities	2021 Total	2020 Total
	£000	£000	£000	£000
Type of cost				
General management and administration	23	342	365	324
Governance	30	468	498	443
Finance costs	60	916	976	868
Human resources	49	731	780	693
Information and technology	119	1,814	1,933	1,718
	281	4,271	4,552	4,046

Support costs have been allocated to expenditure headings based on the proportion of direct costs included in each heading.

6. Staff costs

	2021	2020
	£000	£000
Wages and salaries	17,964	17,250
External agency costs	716	1,444
Social security costs	1,663	1,426
Pension costs: Defined benefit	(211)	(165)
Pension costs: Defined contribution	569	561
	20,701	20,516
Pension contributions made by Rethink Mental Illness in respect of higher paid employees amounted to:	32	39

The number of employees whose emoluments as defined for taxation purposes amounted to over £60,000 in the year and to whom retirement benefits are accruing under money purchase and defined benefit pension schemes are:

	2021	2020
	Number	Number
£60,001 - £70,000	12	6
£70,001 - £80,000	1	1
£80,001 - £90,000	1	1
£90,001 - £100,000	1	-
£100,001 - £110,000	1	-
£110,001 - £120,000	1	2
£180,001 - £190,000	1	1
	18	11

Key management remuneration relating the Executive Officers during the year totalled £763,000 (2020: £599,000) for 6 employees (2020: 5)

Bandings have been restated to include Benefit in Kinds not previous included. The key management remuneration has increased this year in relation to a historic Benefit In Kind issue which has been resolved during the current year.

The average number of employees, based on head count, analysed by function was:

	Average Number of Employees	
	2021 Number	2020 Number
Charitable activities Contract Staff	687	683
Charitable activities Bank Staff	155	194
Cost of generating funds	21	19
Governance and administration support	9	9
	872	905

The amount of redundancy and settlements paid to employees during the year was £167,150 (2020: £216,006). There were no outstanding redundancy settlements at year end.

7. Trustees' emoluments

Trustees are not remunerated.

Expenses for travelling and subsistence on Charity business in the amount of £0 (2020: £6,122) were reimbursed to 0 Trustees (2020: 8).

8. Intangible and Tangible fixed assets

	Intangible Assets	Land, buildings & property improvements	Furniture & Equipment	Total
	£000	£000	£000	£000
Cost				
At 1 April 2020	1,631	3,995	1,214	6,840
Additions	-	-	7	7
Disposals	(32)	(85)	(538)	(655)
At 31 March 2021	1,599	3,910	683	6,192
Depreciation				
At 1 April 2020	1,136	1,738	1,055	3,929
Charge for year	287	95	93	475
On disposals	(32)	(83)	(531)	(646)
At 31 March 2021	1,391	1,750	617	3,758
Net book value				
At 31 March 2021	208	2,160	66	2,434
At 31 March 2020	495	2,257	159	2,911

Of the land and buildings at cost, freehold was £2,207,000 and leasehold £1,047,000 (2020: freehold £2,863,000 and leasehold £1,132,000). All fixed assets are utilised by the Charity/ Group for charitable purposes.

9. Investments

	Group		Charity	
	2021	2020	2021	2020
	£000	£000	£000	£000
Market Value at beginning of year	7,166	7,762	7,169	7,760
Additions	1,453	1,174	1,453	1,174
Disposal Proceeds	(1,428)	(1,104)	(1,428)	(1,104)
Net movement in cash	(66)	37	(66)	37
Net realised investments Gain/ (Loss)	120	(13)	120	(13)
Net unrealised investments Gain / (Loss)	1,500	(690)	1486	(684)
Market Value at end of year	8,745	7,166	8,734	7,170
Historical cost at end of year	6,460	6,535	6,460	6,535
Investments are represented by:				
100% holding in Rethink Trust Corporation Limited	-	-	100	100
UK Fixed Interest	1,063	1,433	952	1,337
Overseas Fixed Interest	233	-	233	-
UK Equities	2,361	2,071	2,361	2,071
Overseas Equities	3,914	2,523	3,915	2,523
Alternative Assets – Property	956	831	956	831
Cash Balances	218	308	217	308
	8,745	7,166	8,734	7,170

10. Debtors

	Group		Charity	
	2021	2020	2021	2020
	£000	£000	£000	£000
Trade Debtors	4,969	2,921	1,929	1,038
Amount due from subsidiary undertakings	-	-	-	212
Prepayments & Accrued Income	1,166	1,801	849	1,241
Other Debtors	18	29	11	30
	6,153	4,751	2,789	2,521

11. Creditors: amounts due within one year

	Group		Charity	
	2021	2020	2021	2020
	£000	£000	£000	£000
Trade creditors	438	1,081	162	858
Accruals	882	873	867	440
Pension deficit payments	566	537	566	537
Deferred income (note 14)	2,708	1,548	1,018	493
Tax and social security	1,647	1,013	401	353
Other creditors	2,847	271	1,474	181
Amount due to subsidiary undertaking	-	-	1,058	-
Amounts due to related undertaking	600	1,998	600	1,998
	9,688	7,321	6,146	4,860

12. Creditors: amounts due after one year

	Group		Charity	
	2021	2020	2021	2020
	£000	£000	£000	£000
TPT Retirement Solutions – Growth Plan	454	570	454	570
TPT Retirement Solutions – Care Plan	2,408	2,970	2,408	2,970
MHUK Loan	1,076		1,076	
CAF Grant (April 22 – Dec 23)	1,839		1,839	
	5,777	3,540	5,777	3,540

Amounts due after 5 years are Growth Plan £0 and Care Plan £724,000.

The MHUK Loan is formalised by a Connected Charity Repayment Agreement stipulating full repayment of the principal by 15th January 2024. Repayments are made on a monthly basis and there is no interest payable on the loan.

Funds held as agent:

During the year the charity acted as agent for the Somerset Alliance, a Sustainability and Transformation Partnership. As agent, the charity processed income of £3,191,700 and expenditure of £2,200,000 including a £20,000 management fee retained by Rethink Mental Illness Limited. At the year end a balance of £1,374,000 remained held as agent and is included above in Other Creditors. Other than the management fee, the income and expenditure has been excluded from the statutory accounts.

13. Provisions for Liabilities

	Balance at 1 April 2020 £000	Charged to the SOFA £000	Released £000	Balance at 31 March 2021 £000
Dilapidation costs on leased properties	266	84	-	350
Total for the Charity	266	84	-	350

A portion of the provision is expected to be released during 2021-22. The provision is known to be understated but has not been increased due to the lack of a reliable estimate.

14. Deferred Income

	Group		Charity	
	2021 £000	2020 £000	2021 £000	2020 £000
Balance at beginning of year	1,050	260	493	163
Amount released to incoming resources	(871)	(241)	(493)	(143)
Amount deferred in the year	2,529	1,031	1,018	473
Balance at end of year	2,708	1,050	1,018	493

Deferred income comprises service income received in advance and grants which the donor has specified must be used in future accounting periods.

The 3 year CAF Grant had a deferred balance of £2,944,000 at the financial year end which is represented by £1,105,000 of creditors due within one year and £1,839,000 of creditors due after one year.

15. Statement of funds

Group and Charity

	Balance at 1 April 2020	Incoming resources	Expenditure	Gain/Loss on investments	Transfers	Balance at 31 March 2021
	£000	£000	£000	£000	£000	£000
General funds	6,143	28,641	(26,430)	1,622	(2,468)	7,508
Designated funds						
Estates	207	-	-	-	385	592
ICT Infrastructure	-	-	-	-	1964	1964
Organisational Development	55	-	-	-	505	560
The Pensions Trust Care Plan	355	-	-	-	(355)	0
Mental Health UK Investment Fund	286	-	(48)	-	-	238
	903	-	(48)	-	2,499	3,354
Total general funds and designated funds	7,046	28,641	(26,478)	1,622	31	10,862
Restricted funds						
CAF Grant	-	62	(62)	-	-	-
Welfare Funds	54	18	-	-	-	72
Capital Restricted Fund	262	-	-	-	(10)	252
Groups Fund	173	55	(33)	-	1	196
COVID Income w/ Restriction	-	387	(168)	-	-	219
Mental Health UK – Lloyds Banking Group	-	1,884	(1,884)	-	-	-
Time to Change – in conjunction with MIND	4	943	(947)	-	-	-
Other Restricted Fund Balances	208	1,092	(910)	-	(22)	368
Total Restricted Funds	701	4,441	(4,004)	-	(31)	1,107
Total Funds	7,747	33,082	(30,482)	1,622	-	11,969

Represented by:

	General Funds £000	Designated Funds £000	Restricted Funds £000	Total Funds £000
Intangible Assets	208			208
Fixed Assets – Tangible Assets	2,031		195	2,226
Fixed Assets – Investments	8,745			8,745
Current Assets	12,339	3,354	912	16,605
Current Liabilities	(9,688)			(9,688)
Non-Current Liabilities	(5,777)			(5,777)
Provision for Liabilities	(350)			(350)
	7,508	3,354	1,107	11,969

Designated funds

The Designated Funds have been reviewed at Board level with consideration to the Charity's Transformation Plan. It has been agreed that any free reserves over £5.4m can be designated into one of the four new funds:

- **Estates Fund** – the previous designated of £207k in the Repairs & Refurb Fund has been combined with an additional £385k of free reserves generated in year. The Estates fund provides income for major repairs, refurbishments, alterations and supporting the transformation to agile working.
- **IT Infrastructure** – funds designated for the upgrade, development or replacement of IT infrastructure and systems including HR, CRM, Housing Management & Finance.
- **Organisation Development** - the brought forward balance of £55k related to the Regional Committee Projects Funds which have been reduced to £30k. The remaining funds £25k was combined with a transfer of £505k of free reserves generated in year to create the Organisational Development Designated Fund balance. The objectives of the fund include management training, marketing spend, fundraising support and general innovation.
- **Mental Health UK Investment** - represents monies set aside for the future development of the fundraising department.

The Pension Trust Care Plan Fund represented monies set aside to mitigate against the risk of future revaluations of the two defined benefit pension schemes. As the liability could increase or decrease due to its dependency on capital markets, it was agreed that the revaluations should be accounted for in the same manner as the Investec portfolio revaluations whereby the SOFA takes the impact of gains/losses. As such this Designated Fund has been released.

Restricted funds

- The CAF grant will enable the charity to build place-based alliances and influence the community mental health transformation in 4 new ICSs areas: North East Lincs, East London, Coventry and Warwickshire and Sheffield. It also gives us the resource to influence the wider roll out of the community mental health framework.
- Welfare Funds represent income that has been specifically given to Services to be controlled by service users as part of their recovery. Service users are able to decide how to utilise this income subject to the financial regulations of the Charity.
- The Capital Restricted Fund represents the balance of funds held relating to purchase of property or property improvements. Depreciation charges relating to property assets are charged against this fund.
- The Groups Fund represents the balances of funds held by 123 local support groups that operate under the Rethink Mental Illness charity number.
- The Fund entitled “Mental Health UK – Lloyds Banking Group” represents funds received to create and sustain the Mental Health and Money Advice Service.
- The Fund entitled “Time to Change - in conjunction with MIND” represents unexpended income received in connection with the Time to Change campaign. The campaign finished in March 2021 and as such there is no carried forward fund.
- Other Restricted Funds represent unexpended income that has been received for a specific purpose. The total balance of £368000 is made up of 12 separate balances held against individual services.
- The COVID Income w/ Restriction Fund is comprised of Local Authority Infection Control funding which was unspent in the 21/22 financial year.

15a. Statement of funds 2020

For comparative purposes the below tables are provided.

Group and Charity

	Balance at 1 April 2019	Incoming resources	Expenditure	Gain/Loss on investments	Transfers	Balance at 31 March 2020
	£000	£000	£000	£000	£000	£000
General funds	6,345	26,425	(26,225)	(703)	301	6,143
Designated funds						
Repairs and Refurbishment	207	-	-	-	-	207
ICT Development	248	-	(40)	-	(208)	-
Regional Committee Projects	55	-	-	-	-	55
Contract Contingency	296	828	(828)	-	(296)	-
Rethink Mental Illness Plan ICT Development	144	-	-	-	(144)	-
Capital Equipment	2	-	-	-	(2)	-
The Pensions Trust Care Plan	200	-	-	-	155	355
Mental Health UK – Lloyds Banking Group	-	-	-	-	286	286
	1,152	828	(868)	-	(209)	903
Total general funds and designated funds	7,498	27,254	(27,094)	(703)	92	7,046
Restricted funds						
Welfare Funds	58	15	(13)	-	(6)	54
Capital Restricted Fund	262	-	-	-	-	262
Groups Fund	161	112	(100)	-	-	173
Alternatives to Respite Fund	143	-	(143)	-	-	-
Mental Health UK – Lloyds Banking Group	-	1,925	(1,923)	-	(2)	-
Time to Change – in conjunction with MIND	-	1,895	(1,888)	-	(3)	4
Other Restricted Fund Balances	280	514	(505)	-	(81)	208
Total Restricted Funds	904	4,461	(4,572)	-	(92)	701
Total Funds	8,402	31,714	(31,666)	(703)	-	7,747

Represented by:

	General Funds	Designated Funds	Restricted Funds	Total Funds
	£000	£000	£000	£000
Intangible Assets	495	-	-	495
Fixed Assets – Tangible Assets	2,154	-	262	2,416
Fixed Assets – Investments	7,166	-	-	7,166
Current Assets	7,455	903	439	8,797
Current Liabilities	(7,321)	-	-	(7,321)
Pension Liabilities	(3,540)	-	-	(3,540)
Provision for Liabilities	(266)	-	-	(266)
	6,143	903	701	7,747

16. Financial commitments

At 31 March 2021, the Group and Charity have commitments under non-cancellable leases as follows:

	2021			2020		
	Premises	Other	Total	Premises	Other	Total
	£000	£000	£000	£000	£000	£000
Expiry date:						
Less than one year	781	155	936	905	155	1,060
Two to five years	1,063	464	1,527	1,817	620	2,437
Over five years	36	-	36	54	-	54
Total for the Charity	1,880	619	2,499	2,776	775	3,551

17. Capital commitments

As at the financial year end, the charity has capital commitments as follows; Unit4 finance system upgrade (£20k) and the purchase of 125 Marston Road (£180k) (2020 :£0).

18. Pension Schemes

The Charity is a member of two defined benefit pension schemes providing benefits based on career average pensionable pay. Because the Charity is one of several contributors to these schemes and is unable to identify its share of the scheme assets and liabilities on a consistent and reasonable basis, Rethink Mental Illness has entered into a deficit recovery payment plan with TPT Retirement Solutions and as such has recognised this liability in the balance sheet.

A full actuarial valuation for the Care scheme was carried out at 30 September 2019. This valuation showed assets of £79m, liabilities of £93.9m and a deficit of £14.9m. Rethink Mental Illness will be required to make deficit recovery payments of £412,000 in 2021/22 (£385,000 – 2020/21) and the annual value of the deficit recovery payment will increase by 3% each year up to 30 September 2027. The Present Value of the future additional deficit recovery payments is £2,820,000 based upon a discount rate of 0.98%.

The Charity has been notified by the TPT Retirement Solutions that the estimated employer debt on withdrawal from the Care Plan scheme, as at 30 September 2019, was £15.05 million. The debt on withdrawal would crystallise upon the last active member leaving the Plan. The possibility of this debt crystallising is considered remote and, therefore, no adjustment has been made to the accounts.

A full actuarial valuation for the Growth scheme was carried out at 30 September 2017. This valuation showed assets of £794.9m, liabilities of £926.4m and a deficit of £131.5m. Rethink Mental Illness will be required to make deficit recovery payments of £154,000 in 2021/22 (£149,000 – 2020/21) and the annual value of the deficit recovery payment will increase by 3% each year up to 31 January 2025. The Present Value of the future additional deficit recovery payments is £607,221 based upon a discount rate of 0.98%.

The Charity has been notified by the TPT Retirement Solutions that the estimated employer debt on withdrawal from the Growth Plan scheme, as at 30 September 2017, was £2,335,000. The debt on withdrawal would crystallise upon the last active member leaving the Plan. The possibility of this debt crystallising is considered remote and, therefore, no adjustment has been made to the accounts.

There have been no new admissions to TPT Retirement Solutions CARE scheme after September 2013.

The Charity also makes contributions to a number of money purchase pension schemes on behalf of certain employees. These include contributions to schemes where Rethink Mental Illness has been granted “admitted body status, and there were contributions to other money purchase schemes.

In line with Government Auto Enrolment requirements, a new defined contribution scheme provided by the People’s Pension was made available for all staff to participate in from September 2013 onwards.

Rethink Mental Illness contributions to all defined benefit pension schemes are expected to be £566,000 for the year ending 31 March 2022.

Expenditure charged with regard to Pension Schemes	2021	2020
	£000	£000
People's Pensions Schemes	569	547
TPT Care including re-measurement charges	(232)	(146)
TPT Growth including re-measurement charges	21	(19)
Norwich Union	0	3
Allied Dunbar	3	3
Standard Life	7	8
	368	396

19. Subsidiary undertakings

All subsidiary companies dormant or active hold the same registered office address

Registered Office

15th Floor
89 Albert Embankment
London
SE1 7TP

NSF Trustees Limited, Company Registration Number 02515917, incorporated in England and Wales

NSF Trustees Limited is a company limited by guarantee. The Charity has control of this company by virtue of voting rights in respect of the appointment and removal of directors. The principal activity of the company is to act as a Corporate Trustee of any Trust whose objectives include provision for a person or persons suffering from severe mental illness. All activities of this company have been consolidated in the SOFA on a line by line basis.

	2021	2020
	£000	£000
Turnover	69	70
Cost of sales	-	-
Gross profit	69	70
Administrative expenses	(29)	(26)
Gift Aid payable to Charity	(40)	(44)
Net result	-	-

The aggregate of the assets, liabilities and funds:

	2021	2020
	£000	£000
Assets	76	99
Liabilities	(51)	(74)
Funds	25	25

Amounts owed to Rethink Mental Illness included as a creditor in these accounts were £39,742 (2020: £47,000). Amounts owed by Rethink Trust Corporation Limited included as a debtor in these accounts were £nil (2020: £nil).

Rethink Trust Corporation Limited, Company Registration Number 07327597, incorporated in England and Wales

Rethink Trust Corporation Limited is a private company limited by shares. The sole member of the company is the Charity. The share capital of the company is £250,000 of which £100,000 has been called up and paid representing £100,000 share capital investment by Rethink Mental Illness. The principal activity of the company is to undertake trust business including acting as trustee under wills and settlements and acting as executor and administrator. All activities of this company have been consolidated in the SOFA on a line by line basis.

	2021	2020
	£000	£000
Turnover	96	76
Cost of sales	-	-
Gross profit	96	76
Administrative expenses	(18)	(21)
Gift Aid payable to Charity	(78)	(55)
Net result	-	-

The aggregate of the assets, liabilities and funds:

	2021	2020
	£000	£000
Assets	183	221
Liabilities	(83)	(121)
Funds	100	100

Amounts owed to Rethink Mental Illness included as a creditor in these accounts were £78,418 (2020: £58,000). Amounts owed to NSF Trustees Limited included as a creditor in these accounts were £nil (2020: £nil).

Rethink Mental Illness Limited, Company Registration Number 04570581, incorporated in England and Wales.

Rethink Mental Illness Limited is a private company limited by shares. The sole member of the company is the Charity. The principal activity of the company is the provision of community based mental health related services across England. All activities of this company have been consolidated in the SOFA on a line by line basis.

	2021	2020
	£000	£000
Turnover	18,132	17,365
Cost of sales	(14,892)	(14,115)
Gross profit	3,240	3,250
Administrative expenses	(2,692)	(2,274)
Gift Aid payable to Charity	(548)	(976)
Net result	-	-

The aggregate of the assets, liabilities and funds:

	2021	2020
	£000	£000
Assets	4,585	2,490
Liabilities	(4,585)	(2,490)
Funds	-	-

Amounts owed to Rethink Mental Illness included as a creditor in these accounts were £764,900 (2020: £606,093). Management charge amounting to £2,691,000 was charged from the Charity to Rethink Mental Illness Limited in the year. (2020: £2,274,000)

Dormant Subsidiary Undertakings

The following two wholly owned subsidiaries are all companies incorporated in England and Wales. They have not been consolidated within these financial statements as they are all dormant and have no assets or liabilities:

- Rethink Severe Mental Illness Limited, Company Registration Number 04396376
- Rethink Mental Health Limited, Company Registration Number 4571057

20. Fund for which the Charity acts as Trustee

The Befriending Visitors Service (not consolidated)

	2021	2020
	£000	£000
Income	-	-
Cost of sales	-	-
Gross profit	-	-
Payment to Rethink Mental Illness	-	-
Net loss	-	-

The aggregate of the assets, liabilities and funds:

Assets	38	38
Liabilities	-	-
Funds	38	38

21. Fund for which the Charity acts as Agent

Open Mental Health - The Somerset Alliance

	2021	2020
	£000	£000
Income	3,191	714
Cost of sales	(2,200)	(215)
Gross profit	991	499
Payment to Rethink Mental Illness	-	-
Net profit	991	499

The aggregate of the assets, liabilities and funds:

Assets	991	-
Liabilities	-	-
Funds	991	-

22. Related parties

Transactions with subsidiary companies and connected companies are disclosed in Note 19. Trustees' emoluments are disclosed in Note 7. There are no other related party transactions to disclose.

23. Connected Entities

Mental Health UK a Charitable Incorporated Organisation (CIO) charity number 1170815

Registered Address

15th Floor
89 Albert Embankment
London
SE1 7TP

Rethink Mental Illness is connected with Mental Health UK a Charitable Incorporated Organisation (CIO). Rethink Mental Illness, Hafal in Wales, MindWise in Northern Ireland, and Support In Mind Scotland are all members of Mental Health UK. Mental Health UK is not considered part of the Rethink Mental Illness Group and has not been consolidated in the financial statements.

24. Reconciliation of net incoming resources to net cash inflow from operating activities

	2021	2020
	£000	£000
Net incoming resources before transfers	4,222	(654)
(Gains) / losses on investments	(1,622)	703
Investment Income	(186)	(244)
Depreciation	477	643
(Profit) / Loss on disposal of fixed assets	9	1
Decrease/(increase) in stock	3	1
Decrease/(increase) in debtors	(1,402)	(57)
(Decrease) / Increase in creditors	5,282	1,274
Increase in provisions for liabilities	84	(50)
(Decrease)/increase in pension	(678)	(633)
Net cash outflow from operating activities	6,189	984

25. Analysis of changes in net funds

	At 1 April 2020 £000	Cash flows £000	At 31 March 2021 £000
Balance Sheet Cash at bank and in hand	4,033	6,189	10,442
Cash for Cash Flow Statement	4,033	6,189	10,442

26. Financial Instruments

At the balance sheet date, the group held financial assets at fair value of £8,745,000 (2020 £7,165,000).

Thank you for your Support

Sport England

The Stone Family Foundation

The City Bridge Trust

The National Lottery Community Fund

Rayne Foundation

Janssen Cilag Ltd



**Leading the way to a better
quality of life for everyone
severely affected by mental illness.**

For further information

Telephone 0121 522 7007

Email info@rethink.org

rethink.org