Anne Freud National Cantrafor Children and Families

Trustees' annual report and financial statements for the year ended 31 August 2022





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To view the references for the findings cited in this report, $\underline{\textbf{please}}$ see our source list

Reference and administrative details

The Anna Freud Centre, operating as the Anna Freud National Centre for Children and Families, is a registered charity, number 1077106, and a company limited by guarantee, company number 03819888.

Board of Trustees

The Hon Michael Samuel MBE (Chair)
Ms Catherine Bedford
Ms Pamela Hutchinson OBE
Professor Linda Mayes MD
Mr Peter Oppenheimer
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Professor Stephen Pilling
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Dr Sarah Wood OBE
Ms Tori Cadogan (appointed 9 March 2023)
Ms Anner-Marie Huby (appointed 9 March 2023)
Ms Namrata Kamdar (appointed 9 March 2023)
Mr Andrew Evans (appointed 9 March 2023)

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Patron

Her Royal Highness, The Princess of Wales

Chief Executive

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Chief Operating Officer

Ros B dmead

Chief People Officer

Marjorie James FCIPD

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Welcome

A message from Professor Peter Fonagy OBE, Chief Executive and The Hon Michael Samuel MBE, Chair of the Board of Trustees.

In January 2022, we launched our new five-year strategy, Closing the Gap. In it, we articulate our mission to tackle the UK's mental health divide by closing the gaps in science, implementation and access to knowledge to support the mental health and wellbeing of children, young people and families.

Closing the Gap addresses the needs of the most marginalised children, young people and families and the impact the current economic climate has on their lives. It also outlines how we will tackle the corrosive inequities of racism and discrimination by working with and learning from diverse communities. It's a strategy designed to empower the communities we serve by working alongside them and involving them in everything we do, from research to practice. Our strategy describes how, by the end of 2026, we will have made significant progress in closing the gap between the children, young people and families who need mental health support and those who get it.

To achieve this ambition, we will need to empower millions of adults who impact on children's lives, including parents and carers, teachers, early years staff, mental health and other professionals. We'll need to work with charities and other organisations often not associated with mental health: the police, the judiciary, within the criminal justice system and beyond.

This means we need to be a more diverse organisation. We need to employ, collaborate with and learn from minoritised communities. In the last twelve months we have developed our equity, diversity and inclusion strategy, which underpins every aspect of our work, to enrich our understanding and to better serve all'communities.

This year we've made a bold start. We have worked alongside expert anti-racism groups to create new resources for schools on anti-racism and mental health. Projects like #BeeWell and HeadStart are already helping us understand how to transform child mental health across, whole communities.





We've developed new work in schools, colleges and early years, promoting whole-setting approaches to mental health that will benefit millions of children. We've been influential: our National Centre for Family Hubs is creating a template across government and local authorities for delivering services to vulnerable families.

Underwriting all our work is our absolute commitment to child-centred, evidence-based practice, and this year the UK's independent assessment body awarded our research 'world leading' status for its high societal impact.

The societal aspect is crucial, We want to be sour research and learning to deliver long term, sustainable and transformational change. There are however challenges, we need unrestricted funding to develop and enhance our infrastructure to help us wdrx with and support our expanding audiences. Securing this income will be a priority in the forthcoming year and beyond.

Our achievements in the last year, and the ambitions outlined in Closing the Gap are only possible because of those who resolutely support us; our genérous donors who share our vision; the extraordinary organisations we collaborate with and who share their knowledge with us; our incomparable staff and, of course, the children, young people and families whose experiences provide the basis for all our learn ng.

Closing the Gap is more than a five-year plan. It represents a new era for the Anna Freud Centre and the children, young people and families we serve and an opportunity for all children, young people and families, to get the support they need and deserve whatever their background or circumstances.

Professor Peter Fonagy OBE FMedSci FBA FACSS Chef Executive of the Anna Freud Centre Michael Samuel MBE Chair of the Board of

Welcome

A message from Nicola Whitehouse, Anna Freud Centre Parent Champion.

Being a parent champion at the Anna Freud Centre this year has been amazing. I've had the opportunity to speak out about issues that my family and I have experienced, and I've been at the heart of developing new creative projects which can change the lives of-children and young people and their families.

One of my favourites has been helping develop the Parent Platform, which will be launched later in 2023. As a parent, I know how intrimidating online discussion groups can be. When you reach out for support and are met with trolling, the impact can be devastating and can prevent you from seeking help again. Creating a space where you can get professional and peer support safely means parents can ask for help, share and offer support without fear or shame. It's also about recognising and valuing the skills that parents and carers have and empowering them.

I've also helped train therapists to understand the parent's perspective. I've role-played parents who are worried or shy so that trainees can learn practical communications skills and better understand the power imbalance that can prevent parents or carers from expressing their needs confidently.

Finally, it's been really exciting seeing the Anna Freud Centre's commitment to equity, diversity and inclusion (EDI). Our Clossing the Gap strategy has EDI written into it and puts the voices of children, young people and families at the heart of everything we do. These principles, together, will help make sure our services are accessible to all, for generations to come

All these elements have contributed to the thing that I'm most proud of, which is to help make menta health something that everyone can talk about. We all have mental health and. like our physical health, we need to take care of it. We can only do this if we feel empowered to speak out. I used to think the term 'mental health' was stigmatising. My work as a champion has changed this for me, and I hope this year I've helped change it for others.

Nicola Whitehouse, Parent Champion





Objectives and activities

The Anna Freud Centre is a world-leading mental health charity which focuses on supporting children, young people and families. We draw on the lived experience and expertise of everyone from children and young people themselves to teachers, academics, nursery workers and neuroscientists.

Our work seeks to understand challenges, unlock evidence-based solutions and unite people in action, combining our breadth of expertise in research, teaching, clinical practice and policymaking. The trustees confirm that they have complied with the duty in section 17 of the Charities Act 2011 to have due regard to the general guidance issued by the Charity Commission on public benefit.

Our principles

- We listen to and learn from children and young people to build better solutions and amplify their voices in conversations on mental health.
- ,We collaborate with those who bring up or work directly with children and young people, from parents to foster carers, teachers, social workers and mental health professionals, recognising that they know children best and know what
- We partner with national and local government. public bodies, philanthropists, trusts and other stakeholders to change the system.
- We work with families and communities to

CONTRACTION (COLOR)

Our vision is a world where all children and young people are able to achieve their full protential people and the state of the sta ndmeas(helmeads.

Our mission

Our mission is to close the gap from ental trailibent well rained by advancing, translating, dilivaring and sharing the best sectore and practice with every one who impects the live dilitien, young people and families.

Pulsweigh

1. Compassion We strive to empathise with the experiences and feelings of others, reflecting constantly and with

humility to honour the trust we are given.

2. Inclusivity

Children, young people and their families are at the heart of everything that we do. We listen to and learn from them and from those who support them in education, social care and health, and across statutory, voluntary and community services.

3. Collaboration

We maximise our impact by working in partnership with others, learning from them and sharing our knowledge, expertise and experience.

4. Creativity

We are imaginative in how we build new understanding, strengthen relationships and develop our skills as the foundation of excellent practice.

5. EquityWe strive for fairness and adjust our approach to support towards addressing the inequalities that exist in society today, recognising that not everyone starts in the same place

6. Courage

We experiment and p oneer, accepting that we will sometimes get things wrong and that is part of how

7. Integrity
We act with honesty and integrity, guided by evide while keeping in minc what science cannot tell us.



We believe that everyone has a responsibility for children and young people's mental health. Our five-year strategy. Closing the Gap, runs from 2022 to 2026 and has seven strategic goals. It outlines how we will help children and young people by empowering the adults who influence their lives including another care and professionals. including parents, carers and professionals.

Each goal includes a programme of transformation which will contribute to closing the gaps in children and young people's mental health and wellbeing. Our seventh goal is about transforming our organisation and the way we work to enable us to achieve our other goals.

1. Invent

We will use existing and emerging evidence bases to explore new methods of prevention and therapy and new models of support for children, young people, families and professionals.

2. Evidence

We will advance the understanding of mental health and wellbeing in children and young people, identifying risks and protective factors and evaluating what works for whom, why and in which

3. Implement

We will create a pipeline from development, to evidence, to wide-scale implementation, which supports service providers and commissioners to improve prevention and to $\ \, \text{deliver services within system partnerships}.$

4. Teach
Through training we will empower parents, carers and all those engaged in the care and support of children and young people. We will also develop and nurture the next generation of mental health practitioners and researchers.

5. Connect

We will foster relationships within and between communities and professionals to support them to share lived experience and knowledge, provide peerto-peer support and to sustain impact.

6. Influence

We will improve professional practice through the dissemination of evidence-informed guidance and we will influence service transformation and national and local policy.

7. Change ourselves

Our seventh goal is to transform our organisation so that we have all the conditions in place to deliver our strategy. This includes our digital transformation, so that we can deliver interventions at scale. It also includes our commitment to equity, diversity and inclusion (EDI) to shape us into an organisation enriched by diversity and better placed to meet the needs of those we aim to serve.



Strategic report



Achievements and performance

Invent

To close the gap in support for children and young people and adults, we need to use all available research and evidence to invent new ways of supporting all children, young people and families.

This means thinking differently about mental health. It means asking questions and learning from others so we can develop new ideas.

There's no richer source of insight and inspiration than the people who have lived experience of mental health problems and the conditions that create them. By working in collaboration with communities who have this expertise we can enrich our understanding and develop authoritative and authentic resources.

We want to ensure that interventions make the most of finite resources, particularly in times of financial hardship, so that we can help more people with less.

Developing interventions is only a part of the story. We will also ensure that our interventions are accessible and available to the millions of children and young people, and their families, who are currently unable to get support when they need it. This year we have developed digital approaches to provide high quality, low-cost, evidence-based support for professionals and the children, young people and

Working in collaboration with communities, funders, schools, practitioners, parents and carers and, of course, children and young people, allows us to draw on a community of experts. It increases our capacity to reach more people and enriches our understanding. It helps us create better solutions. It allows us to invent and to start to close the gap between children and young people's mental health needs and the support that is available.



A new approach:

anti-racism and mental health in schools

In collaboration with Black Learning Achievement and Mental Health UK (BLAM UKI, Hon. Stuart Lawrence and the National Association of Head Teachers (NAHT)

45% of young Black people say that a lack of curriculum diversity is one of the biggest barriers to young Black people achieving in schools.

70% of your g people who experienced racism at school said it affected their mental health.

88% of young people who responded to our survey said that racism affects mental health 'a great deal'.

56% of young people surveyed said that understanding the impact of racism on mental health was a problem.



For years, Black educators and students have spoken out about racism at school and the damage it causes to children and young people's mental health, their education and their life opportunities.

Although there are more resources on anti-racism for schools than ever before, until now there have been nore on the serious impact of racism on mental health. To address this, we created and launchec our Anti-racism and mental health suite of digital resources. From the start we collaborated with organisations and laaders with livec experience. Our chosen partners were BLAM UK and the Hon. Stuart Lawrence, campaigner, brother of Stephen Lawrence and a former seacher. The expertise of our collaborators informed and guided cur work throughout.

Our next step was to listen to students. Almost 9 in 10 told us that racism effected mental health 'a great deal' and only around a quarter said their teachers had a good understancing of the issue. Teachers said they wanted more support. From these findings we crafted our resources.

In January 2022 we launched a series of five podcasts to promote discussion and explore practical steps for schools to take.

In March we followed these up with our e-learning resources. These resources were designed to encourage whole-school approaches to antiracism and mental health by embedding anti-racist approaches in policy and practice. The e-learning includes guidance on involving students and gathering their views, and supporting students and staff who have experienced racism.

Backed by the NAHT we ran a promotional campaign, securing coverage in the education press, including Tes. Teaching unions and anti-racist organisations supported our social media campaign. We shared the resources through our learning networks and newslatters.

The results were emphatic. Our resources were downleaded 50,000 times. In total, almost 1,000 schools completed the whole e-learning suite, reaching around half a million children.

We will continue to promote this work next year to help schools prevent the harm to mental health caused by racism.

Impact of our anti-racism resources

Over50,000 resources downloaded.

OFFicery the resources have helped improve their knowledge and understanding of anti-resismend mental healthing shoots.

921 schools completed our externing on anti-radismend mental treat thin schools.

"The podes as will help professionals in dillicated young people stearing setting to gine better understanding of a pick and a pick as a pick and a pick a

Thre Hon Stuart Lawrence, anti-recism competigner and teacher

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"Finitestilecesources to thickney—dear condiscources y to share of this will make our side staff training." Teacher A public mental health approach for girls and young women: My Story and Me

In collaboration with the Centre for Mental Health, Gendered Intelligence, UCL, The University of Manchester, the University of Oxford and King's College London.

Wystoryand Madauntura. It combines the principles of mantalization, sophisticated deliveralization, sophisticated deliveralization of the combines of the comb

"Himbithediesofheringviteosis emering-beeresoftenenterviten formatsirespromymentelliesith journeysbresoresymetallica,you throxyoutesprenthsmeelestionend youtesenticalierpy," "Song persen No single group has experienced such an alarming rise in mental health problems as young women and girls. In 2017, one ir eight young women aged 17–19 experienced a mental health problem. By 2021 this figure had doubled to one in four.

In January 2022 we decided to explore a new project, My Story and Me, to take the first step towards developing a public mental health approach for young women and girls. Our aim was to encourage young women and girls to talk openly about their mental health and to seek support at an early stage. We started by investigating the data, which confirmed that young women and girls were experiencing a higher level of difficulty than young men and boys, as were those who identified as non-binary or questioning.

Using this data, we worked with the Centre for Mental Health and Gendered Intelligence to find young women and grist to tall their zwn stories about their experiences of menta health on video. The young women and grist recruited were from diverse backgrounds, including minoritised ethnic groups and the lesbian, gay, bisexual, trans non-binary, queer, intersex, asexual and other (LG3TQIA+) communities. Some of the young women and girls who took part were reurodivergent and some had multiple experiences of socal exclusion.

They told us about multiple :raumatic events in their lives, the pressure to conform to ideals about body shape and identity, and experiences of depression and anxiety. They asked for acceptance, support, empathy and understanding.

When we develop the fuller version cfMy Story and Me, we will share 'these videos with other young people and, after they have watched them, they will be able to record their own story based on three questions; who am I? What is my mental health story? How do I like my menta' health to be supported?

The participants we spoke to about the idea of My Story and Me described the project as "unique", "much needed", and "adding value to existing ir terventions". They praised the videos for showing a range of diverse experiences and helping to break down the stigma about mental health, which they said was the biquest barrier to getting help.



We believe M_J Story and Me has the potential to be a low-cost, sustainable, scalable and inclusive intervention. We will be developing and testing it further over the next two years.

95% of survey respondents liked the idea of the research.

93% would want to take part in the research, either as it is now or if changes were mace.

95% would recommend the study to other young women and offiles.

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Improving interventions, reducing costs: People's Cutcomes Database (POD)

The number of young people using POD has almost doubled this year to 47,697.

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Ga: hering information about interventions can be costly and time consuming. To help practitioners we have developed POD, our digital fool designed by and for mental health professionals.

It collects clinical feedback, such as responses to questionnaires about a client's mental health to help monitor their progress during treatment. The data is accessible in real time to both client and practitioner, nelping to create an equal partnership between them. The data is collated in a single database so that researchers can learn more from practice. POD comes at a fraction of the cost of other monitoring tods and offers greater control for clients and better monitoring for practitioners.

This year demanc for POD has almost doubled. It is now used by 3.338 staff workin a with almost 50,000 children and young pecple. It has been adopted by several NHS tr.Ests, local authorities, charities and other settings and is also being used to train the workforce. We will continue to expand this service naxt year.

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Adapting best international practice:

Depression: Online Therapy Study

Face-to-face therapy is unavailable to many young people with mental health problems. Digital alternatives can provide low-cost, flexible and accessible intervention. This year we continued our work with colleagues in Sweden to develop and test internet-based treatment and to conduct the Depression: Or line Therapy Study (D:OTS), evaluating this online, self-guided treatment for young people aged 16-13.

The treatment has been successfully trialled in Swecen. It includes text, videos and exercises on a website and access to a therapeutic support worker who provides feedback and online text-cnat for up to 30 mnutes every week.

This year we trained master's students to deliver the programme and published a feasibility study on adapting the intervention for the UK.

The findings were positive and although we haven't secured funding for a larger scale study, we will be making applications in early 2023 in order to fully test this promising intervention







Achievements and performance

Evidence

For our evidence to have a social impact it needs to be based in the real lives of people who experience the hardships and problems that we want to prevent. Our commitment to evidence isn't just about facts and figures – important as they are – it's also about working collaboratively with children and young people to co-produce, understand and validate, and to empower marginalised communities.

We need to be smarter about the evidence we have and use it to better effect. We need to understand more about the root causes of mental health problems and how they emerge. Our work with communities helps us identify both risks and protective factors and what works for whom, why, and in what contexts. It helps us to support all children, young people and their families more effectively and use budgets more wisely.

Some of our work this year focused on the highly technical aspects of data sharing. For example, in the UK there are range of databases on children's wellbeing, but they don't talk to one another. In isolation, these databases only give us a partial view of children and young people's experiences. We want to change that.

This year we have worked on ground-breaking programmes to put these principles into action. We have started joining up data from a range of sources which we hope will eventually help us understand what works and to translate evidence into best practice.



Using evidence to transform communities:

#BeeWell

In collaboration with the Greater Manchester Combined Authority and The University of Manchester.

What if we could work across a whole region in England to create a community approach to children and young people's mental health and wellbeing?

It sounds ambitious, but in September 2021 we launched #BeeWell to explore just that.

#BeeWell is the biggest project of its kind in the UK. It aims to put children's wellbeing at the heart of education and the community. The problem is that although we have good data on adult wellbeing in the UK, evidence on children and young people is drawn from smaller samples. Without evidence we can't understand the problems we want to solve. Without children and young people contributing their own experiences, we may not even be asking the right questions.

Co-production was essential, sc we worked with young people from 160 schools in the region to create a survey that captures what is important to them.

In September 2021 we published the results from our first survey based on responses from almost 40,000 children and young peop e. Over 90% of all mainstream schools in the Greater Manchester region contributed, including alternativa provision schools.

In January 2022 we broke down results for each individual school that took part, allowing them to explore findings by gender, free school meal eligibility, ethnicity, age and special educational needs or disability (SEND) status. We also offered support sessions to help schools interpret their data, evaluate their practice and develop new ir terventions.

In March we broke down the data by neighbourhoods and created dashboards which we shared with over 200 voluntary sector organisations, to help them

review practice as part of what is fast becoming a community-wide response to children and your g people's wellbeing.

We then anonymised the data and linked with other databases to help develop a deeper understanding of the factors that influence children and young people's wellbeing.

This is just the first year of #BzeWell. Our surveys will continue, capturing the changing hopes and needs of the population and a lowing schools and community groups to monitor ar cidevelop their work.

We are now looking at now we can extend this mode to other local authorities, with the ultimate goal of having wellbeing measurement in every school in the UK as part of a community approach to improving mental health and wellbeing

72% of all schools across the 10 Greater Manchester local authorities took part this year.

With a control of the control of the

Almost 40,000 children and young people took part in the survey.



"The level of engagement is amazing. We have schools and voluntary organisations, all looking at the findings to see how they develop – and to celebrate their strengths. The opportunities are huge. It shows how evidence can inspire change, if it's created and collected and shared in collaboration with young people and their communities. It feels that we are seeing the beginnings of a wellbeing movement in Greater Manchester."

Professor Jess Deighton, Director of Applied Research and Evaluation, Anna Freud Centre, and Professor of Child Wellbeing, UCL

- "We're big fans of the #BeeWell survey here because thanks to its carefully crafted questions we've been able to elicit data and results from our students like no survey that we've done before." Richard Foster, Assistant Principal of Eden Boys School, Bolton
- "Last year's inaugural survey received almost 40,000 responses from 160 schools. It is more than just a survey. It has inspired multiple new initiatives in schools and neighbourhoods across Greater Manchester. For example, last year the data told us that the life satisfaction average score for LGBTQ+young people was 5 out of 10. This has prompted over £400k youth-led investment looking further into the life inequality and life satisfaction for those young people and a youth-led social prescribing project."

 Andy Burnham. Mayor of Greater Manchester

Findings from the #BeeWell Me and My Feelings survey:

of young people responding to the Me and My Feelings survey

reported a high level of

emotional difficulties.

of non-binary you

of non-binary young people reported high levels of emotional or behavioural difficulties.

Young people who can always or often do the things they want to do in their spare time:

65% COlethory lb

GEACCOMMENCEPHS

alteronavorsk

GEACHAIDHEAN Manthirteachachtan

34% of pupils reach the recommended levels of physical activity. This percentage is lower for certain groups:

977201ginb

19%01**C**iliano 94913.

Joining up data to identify mental health problems: Timely

In collaboration with the University of Cambridge, the University of Birmingham, the University of Essex, Eastern Academic Health Science Network, Bitfount, Kaleidoscope, Information Governance Services and AIMES.

In the UK, we collect a lot of data on children and young people's mental health, but most only looks at one aspect of their lives – such as health, social care or education – in isolation.

single, anonymised database, we could build a better understanding of how and why children and young people develop mental health problems.

In January 2022, we won a grant to work with universities, data organisations and research bodies to explore how to bring together big data in a project we have called Timely.

Big data raises many ethical concerns, for example about how people feel about having their data joined up. To understand what their concerns were, we ran a series of workshops.

The findings were encouraging, with adults and children and young people strongly agreeing that linking data can benefit young people's mental health care provided it is done safely, transparently and in collaboration with young people themselves and their families.

The project will continue in 2023.

The results of our survey with the public showed confidence in developing a combined, single database (n=51).

Should multi-agency data be linked in a single database?

84,0/₀

ഞ്ഞ

Over 16s (including parents) Under 16s

How do you feel about the project overall?

90%

say more positive than negative Over 16s including parents) Under 16s

Do the benefits outweigh the risks?

86%

agree

7/7/% agræe

Over 16s (including parents) Under 16s

World-leading research:

HeadStart

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In April 2022 our HeadStart research was awarded the highest accolade and was assessed as 'world leading' for its 'high societal impact' by the Research Excellence Framework, the UK's body for assessing excellence in research in UK higher education providers.

The HeadStart evaluation is the first ever largescale, longitudinal investigation of a resilience-based approach in England. Started in 2016, HeadStart was a six-year, £67.4 million National Lottery funded programme set up by The National Lottery Community Fund.

It aimed to explore and test new ways to improve the mental health and wellbeing of young people aged 10–16 and prevent serious mental health issues from developing. The six HeadStart partnerships were based in Blackpool, Cornwall, Hull, Kent, Newham and Wolverhampton.

HeadStart has built up a database of over 65,000 children and young people and has already changed mental health policies in the local authorities it worked in, covering 300 schools across England. The final evaluation of HeadStart will be published in 2023.



Achievements and performance

Implement

On average it takes 17 years for research to be translated into practice. In the meantime, children and young people are unable to access the evidence-based support they need. Our ambition is to create a pipeline to speed up the process of implementing new interventions and reduce mental health problems.

We need to accomplish this to improve the experience of all children and young people, and their famil es, who receive an array of support from health, education and social care providers. This year we have explored how we can do so by co-designing and implementing new services in family hubs.

We also want to simplify the support that children in care receive to help them have a more stable home life. We know there's a lack of evidence about what works for foster carers, and we need to ensure that their vital work is supported by evidence that draws on their experiences.

In recent years we've seen a huge rise in moderate mental health problems which, if unsupportec, can escalate. Yet we know from research that digital support can be a lifeline. This year we have piloted a service in schools and FE colleges which can provide timely help and can be delivered at scale, across the country.

Research, training, testing and co-production are all part of our implementation process, and we can see emerging evidence of their impact.



Improving life chances of children in care: Reflective Fostering research

In collaboration with UCL, the University of Hertfordshire, the University of East Anglia, King's College London and Kent County Council.

45% of childrentin care have a diagnosable mental health problems

Halfofallteenage foster care placements

The National Institute for Health and Care Excellence (NICE) has identified a need for more evidence.

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There are over 80,000 children and young people over the ast decade. Many are among the most vu nerab e in society and may have experienced abuse, maltreatment and neglect before going into care. Around 45% have a diagnosable mental health disorder, often rooted in their early life experiences. -alf of all teenage placements break down before the age 18 increasing instability in these young people's a ready complex lives. As NICE has observed, the needs of foster carers are under-researched and there is a shortage of evidence to support practice.

In September we launched the Reflective Fostering Study, a randomised controlled trial in partnership with UCL and funded by the National Institute for out what works in supporting foster carers to look after the children and young people who are placed with them. With 720 participants, it is the largest ever UK study to evaluate a foster carer support programme. The study will test the Reflective Fostering Programme, a mentalization based intervarition developed by the Anna Freud Centre to help foster carers build stronger relationships with children and young people.

The current research builds on previous smaller scale studies which showed promise. They found that the programme reduced carer stress and improved the child-zere relationship and the child's wellbeing. In doing so, the programme helped provide stability in lives that have experienced so much disruption.

This year we recruited 360 of the 720 foster carers and ran our first national meeting for all those rvoived in the study, including funders, foster carers

We secured additional fund no for the programm to offer more opportunities for foster carers to become involved in our research. The funding will help make our research more inclusive and enrich our findings. The study will also give foster carers a more prominent role in developing evidence that meets their needs and will help recruit those foster carers and kinship carers whose views are under represented in our current research.

A transformative approach to children's services: co-designing with sector and local leaders

We have a shared mission with children's services to support the most yuherable children and families. This year, by bringing together our combined expertise and experience, we have taken a major step towards developing neweppreaches Comented health support based on collaboration ender-design. We have developed new partnerships, extended our reach, shared our treach, shared our trowledge and learned from otherses we continue our mission to tackle so dailinjustice. Andreaking Director of Cin Anna Freud Centre

The number of children and young people with emotional health needs is the highest ever recorded in the UK. Two thirds of them don't get access to the help they need. There are record numbers of children in care and the cost of supporting them is rising. Children's services are caught in a vicious cycle of having to divert spending from preventative to crisis

It's against this backdrop that we began working with local children's services leaders.

With the Local Government Association and the Association of Directors of Children's Services, we developed an offer for local children's services that met the needs of children (including infants), young people and families, working across social care, health and education services.

Almost immediately after launching our offer, we received a round 70 requests from a range of voluntary and statutory organisations asking for our support to co-design services, develop local strategies and provide training.

By the end of August 2022, we had trained all lead members for thi dren's services in the emotional health needs of children. We now offer support to almost every director of children's services.

Tass year organisations from the voluntary sector, including /MCA, Centrepoint and StreetGames, approached us for training and strategy support. Education Business Partnership, which supports young people preparing for employment, asked us to hap with their mentoring schemes for young people

We developed our services further, running workshops for senior leaders on integrated care systems (ICSs) - the new framework for mental Health, social care and physical health integrat on. From these workshops we received requests to build and zo-design ICSs to bring together mental health, physical health and social care systems to help support the most vulnerable children and young people and their families.

Co-ces gning with sector leaders has brought us to a new audience of strategic children's services leaders. These alliances will allow us to develop and re.p implement new strategies, based on evidence-based interventions, for families on a scale we couldn't have imagined last year.

We will expand this work next year to further develop our work with physical health services, and in year three we will focus on criminal justice.

Support offered to directors of children's services cross75% of the country.

100% of all lead members for children's services trained.

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In our pilot we:

- worked with 42 schools supported 1/453 parents and curars
- reached over 1,500 children and young people.

The pandemic had a huge impact on children and young people. A survey by Mind found that 63% of young people said their mantal health got worse dur ng lockdown. One in four said they did not access mer tal realth support because they did not think they deserved it, and a quarter tried to access support, but cc Jldn't.

These figures and other research identified a major gap ir support for young people with mild to moderate mental health problems. Without help these problems could escalate, causing harm to millions of young people.

Our response was to develop the Schools and Colleges Early Support Service (SCESS). The service provides free and accessible online support for yourgpeople. One-to-one group and peer support are available. The SCESS is a whole-school approach and includes support for school and college staff and parents and carers. It offers confidential teacher wellbeing sessions, while parents and carers can take part in wellbaing check-ins and group sessions offer ng strategies and tools to support young

This year we successfully piloted the service, working in 42 schools with over 1,500 young people, parents and carers and school staff. We trained parents and carers and school staff. We trained up teaching assistants to deliver our peer support services, reaching thousands more students

We tested face-to-face support for parents and carers and ran a series of webinars for them. We covered topics such as self-harm, anxiety and adolescence, school transitions and supporting young people through exam stress. The webinars were attended by 1,453 parents and carers and were overwhelmingly well received.

Following a successful evaluation, we manualised SCESS practice to ensure that delivery of the service is consistent and of the highest quality as we roll it out.

In the second half of the year, we worked with Mind to expand the service for the 2022–2023 academic year. Our aim is to reach an additional 200 schools by March

SCESS is a scalable model which can be rolled out to all schools across the UK. It can play a huge role in reducing children and young people's mental health problems, improving family relationships and supporting schools and colleges.

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- absolution and a substantial constraint of the constraint of thepositive path to direct our parents. Deputy head

Factorarys: The Knowledge and Uncersitanding Framework

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People with a diagnosis of 'personality disorder' (the term 'personality disorder' is widely understood, but is also recognised to be deeply stigmatising by many) are among those most neglected by mental health services. Without support they are at high risk of suicide, substance misuse and risky and offending behaviour. Yet with evidence-based treatment, recovery is possible.

The Knowledge and Understanding Framework (KUF) is a programme for professionals working across health, social care, criminal justice and the voluntary sector to support people with a diagnosis of 'personality disorder'. KUF is produced and delivered by trainers with lived experience and clinical expertise using a trauma-informed approach

The training aims to improve staff confidence and competence. This year, having already carried out a training needs analysis, we have been evaluating the training which has been delivered to 6,000 professionals in its first year.

We have also started to develop e-learning resources for GPs and primary care staff. The training will be free and accessibe to all working in primary care to support people with complex emotional needs.

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and Paining, Anna Fraud Centre



What delegates said

"The cast on weather estingend positive, lovely to death willing ness of professionals to work together to make things better?"

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"Thishasbeene hugelyimportant pieceofwork, and hashelped!"

This year was the final year of our Link Programme. The programme brought together professionals from health, local government and education settings to improve joint working at a local and regional level across England. It a timed to prevent mental health problems escalating by improving understanding across a lagencies and giving children and young people the support they needed when they needed it.

Teachers, school leaders, mental health professionals and commissioners of services joined workshops over two days to identify priorities in children and young people's mental health. They then agreed a plan and set up processes and systeme to implement their plan.

This year the programme worked across 50 local authorities, with 2,416 participants attending 202 separate sessions. The fee aback from participants was very positive with 99.6% finding the sessions he pful and 96.3% reporting that the sessions had increased joint working.



Achievements and performance

Teach

We believe that children and young people's mental health is everyone's business. Not everyone needs to be an expert, but we want to empower all those engaged with children and young people to have the skills and confidence to signpost and support.

This means providing training for early years workers, teachers, senior mental health leads, school leaders and governors. We need to trainleaders in local authorities and ICSs to develop systems change and encourage joined-up thinking.

We also need to train tomorrow's practitioners and researchers if we are to make a lasting impact and transform children and young people's mental health. We already deliver postgraduate courses with UCL, one of the UK's leading universities for psychology, and we partner with others. Over the next few years, our aim is to create the leading portfolio of postgraduate child mental health programmes in the UK.

The best practice is informed by a diverse workforce and this year we have offered bursaries and scholarships to students from underrepresented groups. We have also continued to work with experts by experience to make sure our training reflects their lives.

Over the next five years we aim to empower parents, carers and others who impact the lives of children and young people, and to train the next generation of mental health practitioners and researchers to close the gap in support.



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Transforming the workforce: expanding our postgraduate programmes

In collaboration with UCL, Health Education England and NHS England.

Over the last year we have been contributing to the national curriculum group (NCG), as part of our drive to offer training and qualifications that best meet the mental hea th needs of child en and young people.

We have already helped establish the education mental health practitioner (EMHP) role. This new role is a central part of the Qevernment strategy designed to reach children and young people with low to moderate mental health problems, such as mild depression or anxiety, who don't meet the threshold for child and adolescent mental health services (CAMHS). EMHPs play a key part in preventative mental health by providing timely support in educational settings. In 2022, 44 students graduated from our EMHP programme, one third of them from minoritised ethnic groups.

We also converted the child wellbeing practitioner (CWP) programme to a postgraduate diploma this year, to put it on a par with the EMHP qualification. This means that both qualifications are now fully recognised as psychological professions.

Once qualified, EMHPs and CWPs will build better links within the community and will work with schools and colleges to promote whole-setting approaches to mental heelth and wellbeing. They will provide low-intensity, guided self-help practice for children and young people, informed by cognitive behavioural therapy.

Through the NCG, we have also been developing the national curricu um for the senior wellbeing practitioner programme to help expand and train the mental health workforce.

This new programme will offer qualified EMHPs and CWFs an apport unity to develop their career. We hope that it will support staff retention too. The senior wellbeing practit oner programme will welcome its first student intake in January 2023.

We are well aware that we need a more diverse work-force, and this year our postgraduate services have offered a series of bursaries and scholarships to er courage students from underrepresented backgrounds to apply. Where people from minoritised groups don't meet the usual eligibility criteria but have experience in mental health and can demonstrate aptitude, we have agreed to make a case to suspend the usual regulations, to open up access to students from more diverse backgrounds.

Our teaching programme is expanding. We now run eight postgraduate programmes and three research programmes. Student numbers have risen this year to cver 350 anc we are aiming to increase student numbers by over 25% over the next year, when we will be launching a new online Postgraduate Diploma in Child and Adolescent Psychology in Neuroscience in Practice.



Supporting
services to
help people
with multiple
needs: adaptive
mentalization
based integrative
treatment

Evaluations of the impact of adaptive mentalization based integrative treatment (AMBIT) on services have found:

60% reduction in the number of psychiatric hospital days.

40% saving in treatment costs.

62% of young people remained with their families, showed improved family relationships and reduced behavioural difficulties.

56% of clients had significant improvements in their overall life functioning.



AMBIT is an approach we have developed to support teams to offer help for people who have multiple needs and who, for a range of reasons, find professional help hard to trust.

The AMBIT programme provides consultation, training and supervision to teams or whole systems working with a range of age groups, in a range of settings: health, social care, youth provision, education and justice.

We developed AMBIT because young people with multiple and complex needs were underserved in existing services. Designed for professionals working with young people at risk, AMBIT balances four elements: the perspective and experiences of the young person, how the team works together, working with wider networks and sharing learning. AMBIT includes a manual where practitioners can share and adapt their own learning.

This year we were commissioned to deliver 43 AMBIT training sessions for 1,108 participants, including training funded by Health Education England for the children and young people's crisis workforce. This training was attended by hundreds of practitioners from professional backgrounds including paediatric staff, CAMHS staff, crisis call handlers and paramedics. The Health Education England training was oversubscribed, with a waiting list of 804 people.

We also offered ongoing supervision for NHS and social care partnerships wanting to improve risk support for young people in Greater Manchester, and for the pan-London 'personality disorder' pathway, a partnership between the NHS, the National Probation Service and the voluntary sector working with people in the justice system.

We supported Barnardo's in their work with young people affected by gang involvement and criminal and sexual exploitation, and we worked with Catch-22 on supporting women whose children have been removed or are at risk of being removed from their care.

At present there is a six-month wait for our services. Over the next financial year, we will be exploring how we can invest further in AMBIT to meet this demand and offer improved support to teams from health, education, justice settings, the voluntary sector and soc al care systems nationally and internationally. Since we created AMBIT in 2008, evaluations have found improvements in people's lives and reductions in the need for intensive and expensive treatments. However, we need to develop a more robust evaluation strategy and we will-focus on this over the next financial year.

Alleviating trauma: UK Trauma Council training

In collaboration with leading experts across the UK.

One in three children in the UK experience a potential y traumatic event. The UK Trauma Council (UKTC) is a UK-wide project of the Anna Freud Centre which aims to radically improve the help children and young people receive.

The impact of trauma on children's lives can be devastating, altering brain function and increasing the risk of later mental health problems, yet the signs can be easily missed or misinterpreted, even by experts. This is true both of single traumatic events and complex trauma caused by events that happen over time, such as abuse, domestic violence or neglect.

As part of our commitment to supporting all those working with young pecole, we have developed a portfolio of training courses. This year we delivered 11 courses to 305 professionals in health, social care and school settings. We were also commissioned to run a practitioner course for Barnet Integrated Clinical Services, as well as training for Child Bereavement UK



Systems change in schools: Senior Mental Health Lead training

166training events delivered.

1,157 senior mental health leads trained. 🥳

99% approval rating from attendees.

The Senior Mental Health Lead (SMHL) role emerged from discussions between the Anna Freu d Centre and the government several years ago, and in September 2021 we launched our accredited training for SMHLs. We fast became one of the most popular providers of SMHL training in the country. Altogether we rer 166 events, training 1.157 SMHLs to great approvel: 99% of delegates said they would recommend the training.

The training has provided SMHLs with the practical skills to identify and support students' menta. I realth needs, to measure pupil wellbeing and cr work in partnership with local mental health services. The aim is to give SMHLs the understancing and skills to develop a whole-school approach to mental health and wellbeing and create lasting, sustainable, long-term change in schools and colleges.

Next year we will continue to develop our training offer to reach more education professionals. We will also develop a new SMHL training offer with in-person training options.

What delegates said

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Preventing exclusions: All or Board training

In collaboration with Pears Family School (founded by and supported by the Anna Freud Centre).

Half of all children permanently excluded from school have diagno sed mental health problems, and only in 100 acnieve five good GCSE grades. They are more likely to be receiving free school meals and to be from a minoritised ethnic packground.

Pears Family School, founded and supported by the Anna Teud Centre, has an extraordinary record of helping children and young people return to mainstreem education. Within four terms, 60% of pupis from Pears Family School return to their previous school and 95% of them remain there.

The Alt on Board programme aims to share learning from Pears "amily School to reduce exclusion and the lifelor grisks it can cause Developed to meet the recommendations of the Timpson-review of school exclusion, the All on Board training supports staff to deve cp partnerships with parents and carers and to adopt systemic approaches to improve outcomes for children and young people. "This year the programme delivered training to 420 ma nastream and alternative provision professionals across the country.

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98% said they would be 'very likely' or 'likely' to recommend the training.

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88% agreed that as a result of the training they have reflected more on the skills needed to engage parents and carers effectively.

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Achievements and performance

Connect

The change we want to see in children and young people's mental health will only be possible if we connect people. For many years we have been building learning networks of professionals across social care, early years, schools and FE colleges and mental health, all of which have grown this year. Through these networks we share learning, offer training and develop resources.

These connections allow us to learn more about how to support the mental health needs of children and young people and their families. Our collaborations with statutory services, voluntary services, schools and FE colleges, and communities help us build and share our knowledge of evidence-led practice. We are also building connections with minoritised ethnic communities, enriching our learning and extending our understanding of mental health needs across different cultures, and ensuring that a diverse range of voices are at the heart of our own learning processes.

This year we launched our National Centre for Family Hubs, a programme of work which connects local authorities, professionals across all agencies, community-based partners, the voluntary sector and local communities themselves to co-produce support and services to meet local eneds.

Transforming mental health requires us to make connections with all those engaged in children and young people's lives, in order to deepen understanding and reimagine services. It allows us to move beyond professional perspectives and include the input needed to provide services that our communities really want and need, and can own and access.



A new national network:

National Centre for Family Hubs

In collaboration with 75 local authorities, the Department of Health and Social Care and the Early Intervention Foundation.

In October 2021 we launched the National Centre for Family Hubs (NCFH), a flagship Department of Health and Social Care funded programme designed to ensure all children, young people and families can access a network of local services across the whole of England.

The NCFH is practice-led, evidence-based and, most importantly, informed by the needs and lived experience of children (including infants), young people and families

In November 2021, we launched the NCFH at a conference where the Children's Minister, Will Quince, gave the keynote speech. We published a new website which includes a resource library and provides toolkits that offer evidence-based guidance. We also set up a team of expert consultants to support local authorities and created the NCFH learning network, connecting professionals across the country.

The NCFH has evolved into a dynamic resource, coordinating, updating and sharing new evidence and experiences and connecting professionals from health, education and social care.

The growth of the NCHF has exceeded all targets and we are well on the way to laying the foundations for a national network of family hubs across the country. Family hubs are already active in 8 out of 10 local authorities. Professionals from every single local authority in the country have attended our conference and events.

Between April 2021 and September 2022, we launched over 22 regional events for practitioners and commissioners to share information and learning.

Engagement in the NCFH has also surpassed expectations. We were expected to deliver 2 national events each year to 100 attendees but ran 13, reaching almost 3,000 people from over three quarters of all local authorities. Since the launch of the NCFH we have regularly added to our toolkits and online resource library.

Our free NCFH network, which shares learning updates, news about new developments and information about events, has grown and now includes 2,200 members from almost every local authority.

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AndrewKing, Discretor of Clinical Services. Annis Previol Centire

Will Quiners, Children's Minister, November 202

Continued growth of family hubs

In the 12 months ending in August 2022, enquiries rose by 271%.

Reached 80% of local authorities within 12 months. Our target was to reach 33%.

600% forcesse in the NCFH network, from 200-0,200.

The family working Westminsterines cally developed with the integration of youth the beautiful family integration what we've been seeing now beyout his basing owner can by force of approach?

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International network on mentalization

This year we have worked with researchers around the world to test and develop our understanding of mentalization.

We have worked with partners in Portugal and the United States on using mentalization based treatment (MBT) as an intervention for children with a parent who has a diagnosis of 'borderline personality disorder.' We have collaborated with colleagues at the University of Copenhagen in Denmark who are running an evaluation into MBT for children in foster care. We also worked with Istanbul Bligl University in Turkey, providing training for therapists as part of a study on MBT with children.

The international demand for AMBIT support has grown consistently in recent years and we expect this trend to continue. We have trained practitioners and teams from Europe, North America and Australia. In the last year we have been in discussion with Spanish colleagues to open a Centre of Excellence in Barcelona.

We also created an international network for researchers investigating MBT in children and we regularly meet with colleagues in the UK, the Netherlands. Spain and Chile.

Peer support for parents and carers: Parent

Platform

Peer support is increasingly recognised as an essential tool in supporting the mental health of children and young people and their families, including families with infants. However, parents have told us that although they would like to talk to others with similar experiences, there are few opportunities open to them.

Our Parent Platform is a major piece of work, developed with our Parent Champions, to create a digital space where parents and carers can learn from each other, share experiences and build a supportive network. This year we tested various formats of the platform, focusing on infant attachment and targeting parents and carers who are not engaged with our services. However, after completing our market research we decided to expand our audience and work on designing a platform open to all parents and carers.

The Parent Platform aims to shift power from the hands of professionals into the hands of experts by experience. It will allow parents and carers to triage and search content to meet their needs. Our next step is to test this model, with parents and carers acting as volunteer peer moderators. We will be launching a pilot of the platform in 2023.

Expanding our networks

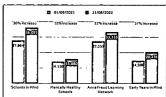
Our digital expansion has helped us connect to an increasing number of professionals in the UK and across the world. Compared to the previous year, this year we more than doubled the number of free training events we delivered to 37.

Our most popular was a webinar – Childhood Trauma, the Brain, and the Social World – which 4,500 people registered for. We have also run themed events to expand our reach and encourage debate on mental health. The 50 What? seminar series was relaunched in January 2022 to explore the implications of research findings. Our Transformation Seminar series continued with contributions from Professor Sir Michael Marmot on inequality and Sir Louis Appleby on suicide and self-harm.

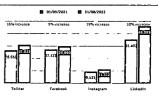
Our learning networks have continued to grow and now reach over 150,000 professionals in early years, education, mental health and beyond. The networks share information, research and resources.

We have a highly engaged social media audience. Our platforms provide an important channel for engaging with professionals, publicising our events and distributing our resources and research findings. Promoting our work in the media has also increased the profile of the Anna Freud Centre and interest in our work. Our audiences continue to grow.

Year-on-year increase from 1 September 2021 to 31 August 2022 in our newsletters and digital networks



Year-on-year increase for social media platforms



Achievements and performance

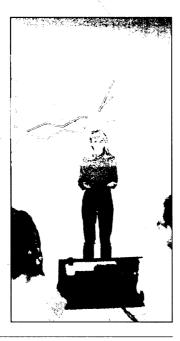
Influence

To close the gap in mental health, we need to speak cut and influence those in power.

Our model of influence is a collaborative one. We work with people to create change, whether we are operating in the heart of government, co-designing services with local authorities or directly supporting schools, colleges and voluntary sector organisations We work within systems to help create strategic change for all children and young people. When we fight for social justice, we do so using evidence and unfilnching determination.

We share our research and evidence with national and local governments, health authorities, schools and colleges and the organisations that work with them. We amplify the voices of children and young people from all backgrounds, and their families, so that they are heard by legislators, policymakers and commissioners of services and so that practice and policy is informed by their experience.

We strive to make sure that our scientific evidence is available and accessible to all who have contributed to it and all whose lives are impacted by it, including practitioners, parents and carers and children and young people.



Working at the heart of Westminster: pan-governmental working group

Our success with the NCFH has opened up opportunities to steer national stratagy.

Although only in its first year, the NCFH is now operating at the heart of government policy. Our teams attend fortnightly planning and coordinating discussions with the Department for Education and the Department of Health and Social Care. The Anna Freud Centre chairs a new pan-governmental working group of 64 leaders across 12 government departments and 34 different programmes.

The working group meets quarterly to promote integrettion across government departments. This is a key national programme with the potential to transform services for children and families across the UK. mouding families with infants. We are now in a strong position to coordinate and drive integrated working practices.

One of our most significant achievements was securing an increase in investment in family hubs in the spending review. The additional funds enabled us to expand nurreach and local authorities to develop additional services for children and young people and their families.

We have also been successful in influenting at a local and regiona level, supporting local leaders to codesign nawhelp with local communities. Our clinical director was invited to speak to the Local Government Association about family hubs and presented our approach to lead members of chitdren's services and deputy less eres of councils.

We have now presented our work at three local governmen: conferences and we have been invited to take part in saveral other regional events.

We nave also shared our experiences of family hubswith ICS leaders, to encourage collaboration across health and social care and to halp them develop preventative systems to protect children and young people.

In June we attended a faith sector leader summit held in the House of Lords which has led to further rivitations to share our work in the next financial year. We have also been invited to chair and lead a NCFH working group for faith sector leaders.

Supporting mental health and wellbeing in schools and colleges in Jersey

In November 2021, our schools division and our Child Outcomes and Research Consortium (CORC) were commissioned by the Government of Jersey to review mental health and wellbeing support in all schools on the island. The team interviewed staff, ran focus groups, surveyed education staff and reviewed schools mental health and wellbeing policies.

Following the research process, our team provided training workshops and individual school development sessions to promote a whole-school approach to mental health and well being. Our evaluations showed that 95% of those who attended found these sessions' extremely' or 'very' he pful.

Our review included recommendations on now to better support children and young people's in ental health and wellbeing and a suggested schedule and framework for training. The successful completion of the contract has led the Government of Jersey to commission further training for all schools on the island in the 2022–2023 academic year.

Defining trauma: our response to the independent review of children's social care

Promoting better understanding about the impact of trauma is a key role of the UK Trauma Council (UKTC) This year the UKTC contributed to the independent review of children's social care in Engiand.

The review focused on improving the child protect on system, supporting families to care for children and providing the best possible help for children who cannot stay with their parents.

As part of the review, we submitted nine evidencebased principles for working with children and young people with complex trauma, which we defined as those who have experienced multiple events involving interpersonal threats during childhook or a Jolescence. We also provided evidence on why and how complex trauma emerges and what makes some children more susceptible to trauma than others.

The review's final report, which was published in May 2022, included the UKTC's definition of complex trauma alongside a link to the UKTC briefing on complex trauma policy principles. The UKTC's brefing lias been downloaded more than 3,900 times.

UKTC's nine principles of complex trauma, included in the independent review:

- Establishing a common deficition of complex trauma.
- Promoting and stabilising trusted relationships.
- 3. Cultivating supportive interactions.
- 4. Actively enabling young people's agency.
- Recognising adaptations and building social connections.
- 6. Holistically responding to multiple needs.
- 7. Providing evidence-based interventions.
- Tackling contextuality and systemic factors.
- 9. Supporting the workforce.



Reducing the impact of parental conflict on children

Parental conflict can have devastating consequences on children's lives. Tackling this issue is a government priority, and for the last four years we have been working with the Department of Work and Pensions (DWP) to share our clinical expertise.

Our No Kids in the Middle programme, an Intensive face-to-face programme aimed at reducing the impact of parental conflict on children, was paused because of Cov d. However, following discussions with the DWP, we adapted the programme and designed, delivered and evaluated an online treatment pack age for parents. The work was completed in February 2022 and proved to be highly successful, with both parents and children reporting significantly improved wellbeing.

In March we la_nched a new training course aimed at providing front ine staff with sk. Is to support families in conflict by helping them develoo child-centred goals. In May we were invited by the DWP to the House of Lords as a mark of our contribution to their successful Reducing Parental Conflict programme.

Over the next twelve months we will re-aunch No Kids in the MicJle work and continue to disseminate our expertise. We will also explore opportunities to build the evicence base for intervertions that reduce the impact of

What parents said about Family Ties online help for parents in conflict:

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Achievements and performance

Changing ourselves

Our final strategic goal is to change ourselves by improving the way we work.

EDI must be embedded in everything we do. We know that unless we live our values and deliver for all / children, young people and families, including those from minoritised and underrepresented groups, we will fall in our ambitions.

We need to create more opportunities for people to engage with our work, whether it's as a potential member of staff, a paid intern, a professional or a member of the public. Our training offer must take into account that not everyone can afford to pay. Our research needs to be accessible to all who participate in it

We want our organisation to develop, learn more about activism and engage in the issues that affect the lives of the people we work with. This year we have launched a programme for staff to campaign in support of the local community around our head office.

Participation and co-production are central to our work and children, young people and families are at the heart of everything we do. This means creating opportunities for children, young people, parents, carers and their communities to take a leading role in our work.



Promoting diversity at work:

Researcher Internsnip Scheme

What our interns said

The internship is amazing in giving people experience that they otherwise would have had difficulty getting, especially due to its flexibility. One important thing that came from the internship is the mentorship – having meetings to discuss further education and work experience. Also expanding your professional network."

'As a Black woman who has continuously sought out research opportunities, words cannot express my gratitude for this internship. I really do hope the Researcher Internship Scheme continues for years to come, providing others with the same amazing opportunity I was given."

"It's been such an amazing experience where you can contribute to meaningful work whilst learning as you go along. The people here are so passionate about what they do so finding out more about the range of projects running at the Centre was always an illuminating experience."



Psychology and academia are two professions in which minoritised ethnic groups are underrapresented. We need a more diverse workforce not only for reasons of equity, but also because we can only become an effective organisation with a workforce that better represents those that we wish to serv.

One of the ways we have tried to address this is through our internship programme. This year we continued to offer paid internships in recognition of the financial barriers that can prevent people from taking up internship opportunities.

Waidertified six young people whose experience would enhance the research community but who may not otherwise have an opportunity to take the rext step in their careers. This year the scheme was open to those from minoritised ethnic groups and those with experience of mental health problems.

The interns were all welcomed, supervised and given coportunities to contribute to meaningfur projects. This included a literature review for the Department of Health and Social Care and supporting the Emotional Regulation in Children (ERIC) research project. Interns carried cut research and co lated resources on anxiety and low mood for 16–25-year-ods. During their internship they learned technical skills, for example how to use survey platforms. Finally, we invited those who were comfortable, to present to Anna Freud Centre colleagues about their experiences of their internship.

When we evaluated the scheme our interns, without exception, said that they valued their experience at the Arma Freud Centre, just as we valued theirs. They found the Centre welcoming and spoke of the experience improving their confidence and skills. They saic they felt well supported and that they had a safe space to speak about their experience.

We believe that we have made a start in encouraging more young people from diverse and marginalised communities to contribute their professional skills and lived experiences to improve our work.

Promoting active citizenship:

Citizens UK training programme

In collaboration with Citizen LK and Hackney and Islington community groups.

The Anna Freud Centre's head office is based in innercity Loncon, an an area that has some of the highest rates of deprivation in England. We feel that as an organisation that values social justice, we need to be engaged in supporting the communities in which we work.

This year we oined Citizens UK, a char'ty describing itse fes a people power alliance which specialises in prometring community activism. Five members of our staff jedined as part-time community organisers, fundad by the Centre, to learn about community eacership and to join local campaigns affer taking part in an intial Citizens UK training course on activism.

After the course, our organisers set about working with local incividuals and crganisations, campaigning on issues incuding supporting local asylum seekers, supporting the Loncon Living Wage, anti-racism and improving education for children with SEND. We learned how people weren't able to find work because of discrimination and how local pusinesses could support them. The programme randuring oca elections and our staff learned about representing campaign goals to local politicians.

Throughout their work, our organisers shared their experiences with co leagues at the Centre to inform our work as an organisation and to help us all understand what it takes to be a good citizen. Community organising a described as a way of bringing people together to find out what they care about and acting on it together to achieve change for the comman good, and is something that we want to encourage all our staff to be involved in.

Ultimately, we want to cultivate a culture at the Centre based on ergaging and building trust with our different communities as we explore participative and inclusive ways of improving our research and practice and understanding and generating change.

We have renewed our partnership with Citizens JK and will continue to promote activism next year



Supporting our people

A fairer deal for staff

This year we announced a new pay policy to continue to attract, retain, develop and reward the talented people who finake up our workforce, and reviewed our pay bands to create a transparent salary scale.

Until this year, many of our staff have been employed on fixed-term contracts which can make it difficult to faccess services or buy a home. In November 2021 we reviewed all of our 230 fixed-term contracts / and by September 2022 we made over 110 of them permanent to give staff more financial security. The remaining fixed-term contracts are mainly for those who choose zero-hour contracts or are for maternity cover for people in very short-term roles.

We are signed up to the London Living Wage, but we wanted to do better. This year we increased our minimum salary to £24,500 for full time staff, giving a significant wage increase to our lower-paid members of staff.

Shaping our future

We want all staff to have an active role in shaping the Centre's future. This year we expanded our bimonthly EDI surveys to explore new ways of working, staff wellbeing and responses to our Closing the Gap

The surveys, which are run by an independent organisation, are anonymised and go out to all staff. Results are shared, unfiltered, throughout the organisation as part of our commitment to transparency. All managers receive a presentation of the findings to discuss with their teams and to help them review their own ways of working.

Promoting wellbeing

We feel a particular responsibility to promote wellbeing in the workplace. This year we have continued our invitation to all staff to spend one Wednesday afternoon a month taking part in a wellbeing activity unrelated to work. We have also continued to end our working week at 3pm on Fridays.

We regularly run breakfasts for all staff to help them get to know each other, We also provide themed lunches accompanied by a short presentation to highlight cultural events, such as Eld/or significant times of the year such as Black History Month, as part of our commitment to inclusivity.

We offer an employee assistance programme (EAP), providing free counselling and advice to all staff. The service is provided by an external company to ensure confidentiality for staff. This year EAP services were accessed over 60 times. We also have nine trained mental health first aiders available to support staff.



Sustainability

We recognise that anxiety around climate change can have major implications for the mental health of children and young people, and therefore take our responsibility to reduce our carbon footprint very seriously. Our national centre, which opened in 2019, was built to meet the highest standards using sustainable materials, windows that generate heat, recycled water and natural light and airflow systems.

Streamlined Energy and Carbon Reporting

The Anna Freud Centre is reporting for the first time under the Streamlined Energy and Carbon Reporting regulations which require an annual report on greenhouse gas emissions from Scope one and two. Electricity, Gas and Transport. Our report has been prepared in line with the March 2019 BEIS 'Environmental Reporting Guidelines: including streamlined energy and carbon reporting guidance'. We have included measured emissions from activities which the Anna Freud Centre has financial-control over as required under The Companies (Directors' Report) and Limited Liability Partnerships (Energy and Carbon Report) Regulations 2018, unless otherwise stated in the exclusions statement.

Our staff-led Green Group has always taken a leading role in our sustainability drive, raising awareness, developing new green initiatives, encouraging others to participate in promoting and improving our sustainability and greening our centre. However, the Gréen Group's activity was nalted during the coronavirus pandemic, and they will resume theif work in late 2022. We have continued to share information about our commitment to the environment through our internal communications, including our staff newsletter.

Consumption (kWh) and Greenhouse Gas emission (tCO2e) total

This is the first year of our reporting on the consumption and associated emissions for our operations.

Scope one consumption and emissions relate to direct greenhouse gas emissions that occur from sources that are controlled or owned by the Anna 'Freud Centre (e.g., fuel combustion in boilers, furnaces, vehicles).

Scope two consumption and emissions relate to indirect greenhouse ga's emissions associated with the purchase of electricity, steam, heat and cooling (gas and electricity use in buildings).

Scope three consumption and emissions related to emissions resulting from sources not within scope one and two, including business travel (vehicle, air and rail), disposal and treatment of waste generated in operations.

Totals

The total consumption (kWh) figures for energy supplies reportable by the Anna Freud Centre are:

Cilliy andscope	2022consumption (kWh)
Gaseous and other fuels / (Scope one)	439.797
Grid-supplied electricity (Scope two)	172.859
Transportation (Scope three)	34.320
Total /	/ 646,976

The total emission (tCO2e) figures for reportable energy supplies are (conversion factors utilised in 'these calculations are detailed in the appendix): '

Willyardscope	2022consumption (tCO2e)
Gaseous and other fuels (Scope one)	, 80.55
Grid-supplied electricity (Scope two)	36.70
Transportation (Scope three)	0.95
Total /	118.20

An intensity metrix of tCO2e per FTE has been applied for our annual total emissions. The methodology of the intesity metric calculations are détailed in the appéndix, and the results of this analysis is:

,	Intensitymetric	2022(Intensity metric
į	tCO2e/FTE	0.47

Energy efficiency improvements

We have worked on a carbon reduction plan this year and expect to implement it towards the end of 2022, setting out our strategy over the next few years for ongoing energy efficiencies.

Measures ongoing and undertaken through 2022

This year, in August 2022, we published our sustainability policy. It outlines how we will minimise our energy, waste and emissions, and how we will maximise our use of recyclable goods and services to help reduce our carbon footprint.

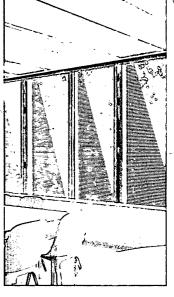
Our policies include a commitment to preventing pollution, developing ethical purchasing and procurement guidelines, integrating environmental considerations into all our business processes, and adopting an effective waste management system, in keeping with best practice.

Appendix

Scope one, two and three consumption and CO2e emissions data has been talculated in line with the 2019 UK Government environmental reporting guidance. Emissions factor Database 2021 has been used, utilising the published kWh gross calorific value ICV) and KGCO2e emissions factor's relevant for the apporting period 01 September 2021 to 31 August 2022.

Estimations undertaken to cover missing billing periods equate to 9% of reported consumption and relates to scope two emissions.

intensity metrics have been calculated using total %2026 figures and the selected parformance indicator for the relevant reporting period: Full time equivalents (FTE) 250.



Financial review

Financial position of the charity

The financial statements for the Anna Freud National Centre for Children and Families for the year to 31 August 2022 are shown on page 62 onwards. For the year to 31 August 2022, the Centre generated a surplus of £2 million (2021: £0.1 million) before investment losses of £0.2 m (2021: £0.2 m investment gain). It should be noted that a significant proportion of the surplus is due to the timing of incoming funds and relates to expenditure which will be incurred in 2022/23.

Income

Our income for the year was £21.9 million (2021: £16.9 million) an increase of 30% in line with our income strategy to grow, develop and maintain a diverse funding mix thereby mittigating against overreliance on any specific funding source type. Our short, courses and conferences activity saw significant growth as did our research activity, generating £6.2m (2021: £3.5m) and £2.5m (2021: £1.6m) respectively.

Expenditure

Our expenditure for the year was £19.9m (2021: £16.7m) of which charitable expenditure was £19.4m (2021: £16.3m). The increase in expenditure occurred across all areas of our activities where we invested in bolstering resource capacity reflecting the Centre's commitment towards progressing our ability to deliver on the objectives set out in our Closing the Gap strategy.

Reserves

Total funds held at 31 August 2022 were £33.7 million (2021: £32.0 million) of which £27.9m were primarily designated for the Fixed Asset Fund (2021: £28.1m) and £5.2 million (2021: £2.9 million) were free and unrestricted.

This planned increase in free reserves of £2.3m is in line with our reserves policy target of holding a minimum of 3 months operating expenditure as free reserves and is comparable to leve-s held by charities of a similar size.

The Centre holds financial reserves to ensure that we can continue to fund ongoing work in the event of any significant disruption to incr me or economic downturn. Reserves also provide working capital ensuring that during the year we can meet upfront expenditure prior to income being "eceived. The trustees have reviewed the free reserves and consider the level of free reserves held to be reasonable.



Investment performance

Our investment policy is reviewed by the Board on an annual basis, with interim reviews of performance at Finance committee meetings. The overall objective is for investment funds to achieve income and capital growth over and above inflation in the medium to long term.

As of 31 August 2022, the funds under investment were £2.5 million (2021: £2.7 million) reflecting an investment loss in the year of £0.2m (2021: £0.2m investment gain). Income derived from investments to 31 August 2022 was £69,792 (2021: £61,184).

The trustees having reviewed the investment portfolio concluded that the existing investment strategy remains appropriate, providing a balanced opportunity for both capital growth and income.

Going concern

The Board of Trustees having reviewed the financial position and financial forecasts of the Centre, have concluded that the Centre has sufficient resources to continue in operational existence for the foreseeable future, being a period of at least 12 months from the approval of the financial statements.

Trustees are satisfied that the Centre continues to have a robust risk management framework including a strong system of financial controls which is sufficient and appropriate for effective management of all known strategic, operational, and financial risks.

The Board therefore continues to support the going concern basis of accounting in preparing the annual accounts.

Financial review

Fundraising

Our fundraising strategy has been developed to make sure that our income is generated from a range of sources – trusts and foundations, statutory bodies, individuals, corporates and community streams – to ensure financial stability and maximise income.

Despite the ongoing global economic uncertainty, our fundraising income (excluding tendered contracts) has continued to grow this year. We set a target of raising £4 million in voluntary income and exceeded it by over 17%.

This year we have also successfully focused our efforts on securing unrestricted funds and supporting our Closing the Gap strategy. This core funding remains vital to our ability to respond rapidly and

effectively to the increasing needs of children, young people and families. We are delighted to have doubled our unrestricted target for this financial year.

Despite this success, most of our fundrailsed income is contract and project based. Securing unrestricted income remains both's challenge and a priority as we aim to implement our new strategy and build on the Centre's ability to innovate and pioneer effective mental health approaches.



DONATE



Trusts and foundations

Once again, this year we received invaluable support from major trusts and foundations, some of which are new to the Centra. This funcing has enabled us to expanc our audierces and reach thousands more people including young people, parents, carers and school staff through key projects such as our SCESS (see page 24) and our work around school exclusions.

Our relationships with trusts and foundations are at the heart of our strategic commitment to colaborative and partnership working. We bring together the beliefs and values of these trusts and foundations with our own and with the aspirations of the children, young people and families we serve.

Major denors

We are very fortunate to work with a network of highly committed and passionate individuals and family trusts and foundations who share our ambition for improving the mental health and wellbeing of children and young people. Their strong understancing of the importance of funding preventative work and research, and of training and upskilling I rusted adults in mental hea th support, has helped up sprovide children and you ng people with the help they need, when they need it.



Corporate partnerships

We partner with an incredible group of UK businesses who support our work by generating income through a variety of imaginative initiatives. Some businesses have contributed shares of their product sales or donated products themselves.

Others have chosen us as their charity of the year, and their staff have shown themselves to be indefatigable fundraisers. Staff from corporate partners have volunteered with us and promoted our work through their networks. Each contribution is critical to our work, and we have been delighted to see the Centre's corporate income grow as a result of this support.

This year we have recruited a decicated corporate partrerships manager, focused on supporting this income stream and building our relationships with the corporate sector.

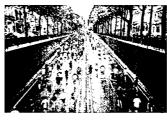
Public sector

As a brusted public sector provider, we work with local and national government departments and agencies to carry out research and deliver a suite of high-quality, evidence-based projects across the UK.

Work ng with the public sector, we provide children, young people and families with improved access to mental health services and better quality care. Our research – described as 'wor'd leading' by the Research Excellence Framework – has been commissioned to better unders: and and support the mental health needs of children young people and famil as.

These crucial, wide-scale and high impact grants help us achieve our mission and goals as an organisation.





Community and events

We want to thank everyone who has taken part in awe-inspiring chal enge events or baked cakes, held quizzes, donated their birthdays, played the drums or held a collectior for the Centre over the past year. We are so grateful to each and every one of you no amount is too small and we love hearing your fundraising stories!

Fundraising approach

We communicate and plan our fundraising activity with our supporters via our wabsite, through emails and direct contact at meetings and events, managed and mon tored centrally at our head office. We are registered with the Fundraising Regulator in line with the Code of fundraising practice and operate a fundraising and denations policy which all volunteers, employees and friere fundraisers must adhere to. We are committed to ensuring that we are completely open and transparent about our fundraising and spending.

As members of the Fundraising Regulator's selfregulatory scheme, we comply with its principles in all our fundraising:

- We will commit to high standards.
- We will be clear, hones: and open.
- We will be respectful.We will be fair and reasonable
- We will be fair and reasonable.
 We will be accountable and responsible

When we benefit from commercial companies raising funds on our benaff through the sale of products, we operate within a written commercial part cipator agreement to ensure that their activities are not harmful to the Centre, our beneficiarias or our supporters.



We monitor the activities carried out on behalf of the charity for the purpose of fundraising in donor gift agreements and through a donor database, recording relevant communications, transactions and agreements.

To protect vulnerable people and other members of the public during fundraising we:

- co not undertake any general solicitations by telephone or door-to-door
- ensure communications to the public in the course of carrying out fundraising act vities are truthful and non-deceptive
- keep confidential any and all personal information collected for fundra sing ourposes. We do not share this cata outside the Centre unless there is an overriding legal reason to do so.

We received no complaints about our fundraising activity in 2022 (2021: nil).

Thank you

We are incred bly grateful to everyone who has supported us over the past 12 months as we continue to raise funds to meet the high cemand for our services and increase our reach and impact across the UK and globally. Without the support of charitable trusts and foundations, companies, organisations and individuals, we would not be able to continue our vital work with the children, young people and families who need our help. Thank you

Financial review

Principal risks and uncertainties

Approach to risk management

The Board of Trustees is responsible for ensuring that the Centre has a robust risk management framework in place for identifying, mitigating, and managing risks across all our activities.

The Board is supported by its sub-committees in reviewing and monitoring risks ensuring that the risk management framework is adequate and effective.

The Board's sub-committees provide critical oversight to the Executive ensuring that the risk management approach is embedded across the organisation, integrated into our annual business planning and reporting cycle and spans all our activities.



Financial review

Summary of potential risks the board has identified

Strategic

Closing the Gap is an ambitious strategy which will require ongoing investment in resource capacity and digital infrastructure. A collaborative approach to implementation and ongoing monitoring will be required within the Centre and externally with stakeholders, to ensure that the desired progress is being achieved.

Fundraising

The economic downturn in the UK has contributed to a challenging funding landscape for many charities, including the Centre, leading to increased competition for finite funding pools.

We continue to work collaboratively with existing major donors, trusts and foundations, whilst also seeking to broaden our funding base so we can increase unrestricted grants and donations.

Potential changes to government funding models, with a shift away from centralised toward local commissioning, further vinderscores the importance of the Centre pursuing a diverse revenue mix strategy, to minimise the risk of being over reliant on particular revenue streams.

Operational delivery

The Centre's business continuity plans are regularly reviewed, risk assessed and updated to ensure that should unforeseen circumstances such as a public health emergency (e.g. covid) or other adverse event occur, we are able to maintain our services (wherever possible) with minimal disruption to our stakeholders.

IT systems and information governance

Data security and the need to protect sensitive information, remains an ongoing priority for the Centre. All staff undertake the same data security training including annual refresher/training focused on any emerging risks. Identified risks, including cyber-attacks and unauthorised access to or loss of personal data, continue to be monitored and regularly reviewed with turther mitigation through staff training and guidance. Annual security testing is undertaken of our websites and internal systems to ensure that our infrastructure is securely configured.



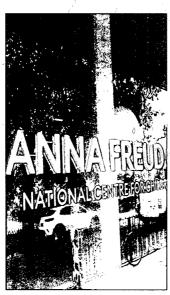
Structure, governance and management

The Anna Freud Centre operating as the Anna Freud-National Centre for Children and Families, is a registered charity, number 1077106. It is set up under its Memorandum and Articles of Association as a company limited by guarantee, number 03819888.

The Board of Trustees comprises the charity's trustees and the legal directors of the company. Trustee's serve a four-year term, after which they are eligible for reappointment. New trustees are selected through open recruitment. Emphasis is placed on ensuring representation from key stakeholders and any identified skills gap within the board at the time of recruiting.

On appointment, trustees are provided with copies of relevant documents, including the Charity Commission guidance note CC3. The essential trustee: what you need to know, what you need to on. New trustees undergo an induction programme that comprises meetings with senior management to understand the objectives and operational delivery of the Centre, and training in safeguarding, information governance and the role and responsibilities of trustees. Trustees are encouraged to keep abreast of their duties and responsibilities by reading Charity Commission updates and other updates, and by attending appropriate training courses.

The Board of Trustees sets and reviews strategy, monitoring operational matters supported by sub-committees that report directly to the Board. The performance of individual trustees and the Board is assessed annually. The Board of Trustees met nine times in the year.



The Finance, Auditand Risk Sub-Committee

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The Quality Sub-Committee

The sub-committee has oversight of the Clinical Governance Leadership Board, the Safeguarding Oversight Group, any clinical risks, operations, health and safety, and research activity. This sub-committee meets termly.

Its remit is to:

- ensure the Board of Trustees is properly informed about the quality of clinical services provided by the Centre
- provide assurance to the Board that the standards of clinical services fully comply with all professional and regulatory standards
- provide oversight of the clinical quality assurance systems for the Centre
 ensure that the Centre has effective mechanisms for managing clinical risk, learning from incidents and taking action to reduce risks and improve quality.

The Difficiend Technology SubCommittee

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The Nombettons and Succession Flaming Sub-Committee

The cib-committee transponsibility for the direct transport and an incident processes for trust cappoint ments conduction processes for trust cappoint ments conduction melly or executive the trust cappoint ments of the structure, also are position fine during the structure, also are position fine during the structure, also are presented from the structure and a structure of the structure of the

The Equity, Diversity and Inclusion Sub-Committee

The sub-committee provides support, guidance and oversight of the EDI agenda and implementation of the EDI strategy and plan. It is responsible for monitoring the progress of the EDI plan, determining priorities, implementing the EDI strategy and providing robust scrutiny and challenge pertaining to EDI across the Centre. The sub-committee is a visible and proactive point of contact between the Centre's divisions and departments and the Board.

The People and Culture Sub-Committee

The sub-committee is respons ble for overseeing the organisational pay and reward, performance and continuous professional development policies and procedures; it regularly reviews people statistics, including staff turnover, sat sfaction, disciplinaries and grievances, to make recommendations for improvements across the Centre's divisional and departmental teams. It is also responsible for reporting on the Centre's gender pay gap and working with the EDI Sub-Corr mittee to increase staff civersity, inclusion and equitable opportunity.

The Fundraising Sub-Committee

The sub-committee supports the Centre's voluntary income streams, particularly from philanthropists, major donors and corporates. The sub-committee is responsible for identifying, engaging and introducing prospective donors as well as suggesting and supporting engagement events and activities.

Key management personnel

Trustees who served during the year

The Hon Michael Samuel MBE, Chair Ms Catherine Bedford Ms Sally Cairns (resigned 12 September 2022) Ms Pamela Hutchinson OBE Dr Moshe Kantor (resigned 16 March 2022) Professor Linda Mayes MD Mr Peter Oppenheimer Mr Daniel Peltz OBE, Treasurer Professor Stephen Pilling Mr Dominic Shorthouse, Deputy Chair

Executive

Dr Sarah Wood OBE

Professor Peter Fonagy, CEO
Ms Ros Bidmead, Chief Operating Officer
Mr David Fowler, Chief Financial Officer

Mrs Christine Kanu, Chief Financial Officer (from 28.02.22)

Mr Jonathan Robinson, Consultant Strategist

Mr Peter Fuggle, Clinical Director (to 28.09.21)

Ms Andrea King, Clinical Director (from 29.09.21)

Professor Jessica Deighton, Applied Research

Professor Jessica Deighton, Applied Research and Evaluation Director

Ms Jaime Smith, Schools Director

Professor Eamon McCrory, Education and Training Director (on sabbatical from April 2022)

Ms Claire Evans, Acting Director - Education and

Dr Dickon Bevington, Medical Director

For key management remuneration, <u>please see</u> note 5. Staff costs and numbers on page 75.

Plans for the future

Next year

Our plans for the next five years are laid out in our Closing the Gap strategy. Over the next twelve months we will focus on reaching out to the millions of adults who impact on children and young people's mental health and wellbeing. We will continue to prioritise our support for the most at-risk children and their families and ensure that we learn from and work with minoritised ethnic communities. We will also support our own workforce, develop and implement our EDI strategy and ensure that the voices of children, young people and their families are embedded in all our work. These goals will be supported by a fundraising plan to generate unrestricted income to allow us to develop the creative and innovative responses Closing the Gap demands.

Schools

Schools and colleges will be a key focus of our work, enabling us to reach millions of children and young people. In 2022-2023 we will grow our Schools and Colleges Early Support Service, working with Mind to provide online mental health and wellbeing support for students, parents and carers and staff. We will extend our reach into schools and colleges, supporting them to adopt whole-setting approaches to mental health.





Early years

Early years work remains a priority We will expand our National Centre for Family H_Ls working with government, local authorities, and infants, children and young people, and their families to co-design services to meet the needs of our most vulnerable families. We will develop our work engaging and supporting fathers of babies and infants, and share and develop preventative mental health interventions with early years professionals.

Communications

In 2023 we will launch our brand re-f-esh which will capture our mission, encouraging new and larger audiences to engage with our work. We will expand our digital reach to support the militions of adults – parents, carers and professionals - who impact on the lives of children and young pacp e. We will do this by developing our digital networks, our training offer and cur digital platforms.

UK Trauma Council

We will continue our mission to develop support for vulnerable and marginalised communities. We will create new trauma resources for unaccompanied asylum-seekers and promote greater understanding of trauma among professionals, parents and carers.

Participation

In 2023, we will launch our participation strategy to further embed the voices of children, young people and families in every aspect of our work people and families in every aspect of our work.
Our strategy will ensure that our services are rights-based, address the needs of those we aim to support, are designed and delivered to reach those in greatest need and continue to be innovative and effective in meeting the needs of children, young people and families.

Empowering communities

We will continue to develop area-wide approaches to improving children and young people's mental health. With the University of Manchester, we will expanc #BeeWell (see page 16) to local authorities beyond the Greater Manchester region. We will also publish the full evaluation of the National Lottery Community Fund's HeadStart project, based on six years of trying and testing new approaches to promoting resilience in disadvantaged areas.

We will launch our EDI strategy by the end of 2022. It will build on the extensive work we have already put in place to become a more inclusive organisation. Our EDI strategy will outline how our workforce will become more representative of the communities we serve. We will develop an inclusive leadership approach for line managers supported by a commitment to continuous learning.





Supporting staff

We will implement a new policy which offers improved career development and progression pathways to reward and retain our staff. We will promote wellbeing for our staff and the wider community of professionals that support children and young people, and their families. Our commitment to supporting our staff will also be underwritten by our EDI strategy.

Fundraising

Our fundraising is critical to Closing the Gap. In 2023 we aim to move beyond project-based funding and identify new sources of unrestricted income.

These funds will allow us to develop new, creative and scalable forms of mental health support to extend our reach and translate our research into practice. Unrestricted funding is essential to give us the space to develop new platforms to empower parents and carers and to develop new resources to provide our rapidly growing audiences with the pport they need to promote mental health and ellbeing for all children and young people.

Trustees and auditors

Trustees' responsibilities

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

financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that

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

- select suitable accounting policies and then apply them consistently observe the methods and principles in the Charities Statement of Recommended Practice (SORP)
- make judgements and estimates that are reasonable and prudent state whether applicable UK Accounting
- Standards, comprising FRS 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

In so far as we are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware the trustees have taken all steps that they should have taken to make themselves aware of
- any relevant audit information and to establish that the auditor is aware of that information

Section 172 Companies Act 2006

The trustees, acting in accordance with Section 172 of The Companies Act 2006 consider that they have complied with their duties with regards to promoting the Charity's success in achieving its charitable purpose to advicate and advance for outline hears. purpose to advocate and advance for public benefit of the awareness, prevention, relief and education of ntal illness and/or disorde

Trustees have worked closely with the senior leadership team providing critical oversight on the development and implementation of our five year strategy, Closing the Gap with a strong focus on delivering transformational and sustainable char

Long term consequences of decisions

The Coronavirus pandemic necessitated an evolution in our ways of working which accelerated a key element of Closing the Gap, widening access and increasing participation through the expansion of digital networks and platforms providing crucial high quality evidence based support flexibly

Interest of employees

choice and is committed to ensuring that we foster a strong culture of wellbeing for all our employees ensuring that everyone is fairly remunerated for their work. More information on how we support ou people can be found on page 43 of this report

Business relationships with suppliers. customers and others; and reputation for high standards of business conduct

Throughout the year, trustees and the senior leadership team have ensured proactive engagemen with all our stakeholder groups demonstrating our ongoing commitment to cultivate and maintain positive and constructive relationships.

The Anna Freud Centre is a member of the Fundraising Regulator. Trustees work closely with the senior leadership team ensuring that the Charity's fundraising activities remain fully compliant with relevant fundraising regulations and emerging best

Impact in the community and environment Impact in the community and environme Trustee's remain committed to ensuring that all the Charity's activities carefully consider impact in communities and on the environment. Our carbon performance is included on page 43- and we have developed a carbon reduction plan which will be signed off later in the year and put on our website

Acting fairly between members
The Anna Freud Centre actively promotes a collure where our organisational values underpin everything that we strive to do with our key stakeholders including members, strategic partners, and

The auditors, Haysmacintyre LLP, will be proposed for reappointment in accordance with Section 485 of the Companies Act 2006. The Trustees' report, incorporating the Strategic report, was approved by the Trustees on 9 March 2023 and signed on their behalf by:



The Hon Michael Samuel MBE Chair of the Board of Trustees Date: 9 March 2023



Independent auditor's report to the members of The Anna Freud Centre

We have audited the financial statements of The Anna Freud Centre for the year ended 31 August 2022 which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and notes to the financial statements including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 August 2022 and of the charitable company's net movement in funds, including the 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 charity in accordance with the of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion

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

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charitable company'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 in the relevant sections of this report!

Other information

The trustees are responsible for the other information. The other information comprises the information included in the Trustees' Annual Company of the Information included in the Trustees' Annual Company of the Information included in the Information included in the Information included in the Information in the In Report and the Chair's statement. 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.

In connection with our audit of the financial statements, our responsibility is to read the of information and, in doing so, consider whether the other information is materially inconsisten with the financial statements or our knowledge obtained in the audit or otherwise appears materially misstated. If we identify such mat-inconsistencies or apparent material missta-we are required to determine whether there material misstatement in the financial stat material misstatement in the financial state a material misstatement of the other income of the state misstatement of the other income of the work we have performed we or that there is a material misstatement of this information, we are required to report that have nothing to report in this regard.

Opinions on other matter sprescrib the Companies/Act 2006 Infour.opinion.based on the work undertake course of the audit:

the information given in the Trust Report (which includes the strate and the directors' report prepared urposes of company law) for the fin ear for which the financial statements ar repared is consistent with the financial: ents; and

Matters on which we are required to re by exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees Annual Report (which incorporates the strategic report and the directors' report).

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

- adequate accounting records have not been kept by the charitable company; or
- the charitable company 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

Responsibilities of trustees for the financial statements

As explained more fully in the t statement (set out on page 57) are also the directors of the cha he purposes of company law) he preparation of the financial and for icial

In preparing the financial st stees are nsible for assessing ability to continue as a go as applicable, matters relate using the going concern the trustees either int alternative but to d

Auditor's responsibilities the financial statements

ements obtain reasonable assur nancial statements as a w rial misstatement, wheth or, and to issue an auditor's rep our opinion. Reasonable assura l of assurance, but is not a quarantee ducted in accordance with ISAs (ys detect a material misstatement w lisstatements can arise from fraudo considered material if individually or

influence the economic decisions of users tal the basis of these financial statements:

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

Based on our understanding of the charitable company and the environment in which it operates, we identified that the principal risks of non-compliance with laws and regulations related to regulatory requirements of the Charity Commission Care Quality Commission (CQC), for GDPR and safeguarding regulations, and we considered the

extent to which non-compliance might have a material effect on the financial statements.

We also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as the Companies Act 2006, the Charities Act 2011, FRS102, Charities Statement of Recommended Practice (SOFP), payroll tax and sales tax.

We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls) and determined that the principal risks were related to posting inappropriate journal entries to revenue and management bias in accounting estimates. Audit procedures performed by the engagement team included:

- Inspecting correspondence with regulators and tax authorities;
- Discussions with management including consideration of known or suspected instances of non-compliance with law regulation and fraud:
- Evaluating management's control prevent and detect irregularities;
- Identifying and testing journals in ca iournal entries posted with unus combinations, postings by un

vill not detec ding to a material m th a law or regulation is ind transactions reflected in ts, as we will be less likely to be es of non-compliance. The risk garding irregularities occurring than error, as fraud involves

A further description of course audit of the financial statements is locate Financial Reporting Council swebsite at www.frc.org.uk/auditors responsibilities description forms part of our auditor

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.

Date: /19th April 2023 10 Queen Street Place

EC4R 1AG

Statement of financial activities, incorporating an income and expenditure account

Year ended 31 August 2022

Registered charity number 1077106, registered company number 03819888

	Notes	Unrestricted funds 2022	Restricted funds 2022	Total funds 2022	Total funds 2021
Income from:		£	£	£	E
Grants, donations and legacies	2	1,242,522	3,445.863	4.688,385	3.765,335
Investments	3	69.792	-	69,792	61,184
Charitable activities					
Clinical and preventative services		847,128	49,954	897.082	966.233
Education and training	L	4,921,454	-	4.921,454	4,587,433
Research		1,345,348	1,154,472	2,499,820	1,619,151
Conference and study events		6,166,001	71.371	6.237,372	3,558,462
Schools		1,714.586	-	1,714,586	1,953,939
		14.994,517	1,275,797	16.270,314	12,685,217
Other		553,821		553.821	374,026
Gains on acquisition of business	3a	405.822	-	405,822	-
Total income		17.266,474	4,721,660	21.988.134	16,885,763
Expenditure on:					
Raising funds					
Fundraising and publicity	4	511.192		511,192	383,241
Investment and management fees		-		-	235
Legal fees		42,067	-1	42.067	-
		553,259	-1	553,259	383,476

Table continued on next page.

Statement of financial activities, incorporating ar income and expenditure account

	Notes	Unrestricted funds 2022	Restricted funds 2022	Total funds 2022	Total funds 2021
		£	E	€ E	£
Charitable activities	<u> </u>				
Clinical and preventative services		2.795.035	689,862	3,484,897	3,140,321
Applied research		992,543	761.459	1,754,002	1,932,414
Education and training		4,065,294	65.705	4,130,999	3,725,979
Research and policy development		3,428,307	2,269,247	5,697.554	4,086,478
Schools		2,513,971	1,183,426	3,697.397	3,145,659
User participation, library and dissemination		617,521	35,000	652,521	332.779
Campus real estate development		-	5 1 4 2		3.593
	1	14,412,671	5,004.699	.9,417,370	16,367,522
Total expenditure	4 1	14,965,930	5.004.699	19,970.629	16,750.598
	<u> </u>			L	
Net income/(expenditure) before investment gains		2,300,544	(283,039)	2.017.505	134,764
Net investment gains		(233.799)		(233,799)	225 710
Net income / (expenditure)		2,066,745	(283,039)	1,783,706	350 475
Transfer between funds	12				3 -
Net movement in funds		2,066,745	(283,039)	1,783,706	360 475
Funds balance carried forward at 1 September	12	31,061.787	916,702	31,978,489	31,618,014
Funds balance carried forward at 31 August	12	33,128,532	633,663	33,762,195	31,978,489

There were no recognised gains or losses other than as disclosed in the statement of financial activities. All income and expenditure relates to continuing activities.

The accompanying notes form an integral part of these financial statements

Full comparatives are shown in note 17.

Balance sheet

Year ended 31 August 2022

Registered charity number 1077106, registered company number 03819888

	Notes 20		2	202	1
		£]	€ [_	Ē.	£
Fixed assets		1		T.	
Tangible assets	6		35,258.018		35,946,205
Investments	7	I	2,499.445		2,663,453
	1 1		37,757,463		38,609,657
Current assets		1			
Debtors	8	2,950,738		1,169.315	
Cash at bank and in hand		6,791,710		5.241,221	
		9,742,448		6.410.536	
Creditors: amounts falling due within one year	9	(7.437,740)		(6,673,654)	
Net current assets			2,304,707		(263.118)
Creditors: amounts falling due after more than one year	10		(6,299,975)		(6.368.051)
Total assets less total liabilities			33.762.195		31.978,489
Funds	12				
General funds		[5.355,398	1	2,940,799
Designated funds			27.773.134][28.120.988
Restricted funds			633,663	1	916.702
Total funds		- Disease	33.762,195		31,978,489

The accompanying notes form an integral part of these financial statements.

The financial statements were approved and authorised for issue by the Board on 9 March 2023 and were signed below on its behalf by:

2

Daniel Peltz

The Hon Michael Samuel MBE Chair of the Board of Trustees Daniel Peltz OBE Treasurer

Statement of cash flow

Year ended 31 August 2022

Registered charity number 1077106, registered company number 03819888

	2022	2021
Reconciliation of movement in funds to net cash flow	E	E
Net movement in funds	1,783,707	360,475
Depreciation charges	693,628	695.885
Income from investments	(69,792)	(61,184)
Unrealised investment (gains)	233,799	(225,710)
(Increase)/decrease in debtors	(1,755.633)	234,289
Increase/(decrease) in creditors	557,038	(246,882)
Gains on acquisition of business	(405.822)]	-
Net cash flow provided by operating activities	1,555,930	756.871
Cash flows from investing activities		
Investment income	69,792	61,184
Purchase of tangible fixed assets	(5,441)	-
Disposal of tangible fixed assets	49,478	-
Depreciation charges on disposal of tangible fixed assets	(49,478)	-
Purchase of investments	(69,792)	(561,184)
Disposal of investments	-][46,982
Cash receipts on acquisition of business	519.006	-
Increase/(decrease) in cash	(5,441)	(453,018)
Cash flows from financing activities		
Increase in cash and cash equivalents in the period	1,550,489	303,852
Cash and cash equivalents at the beginning of the period	5,241,221	4,937,369
Cash and cash equivalents at the end of the period	6,791,710	5,241,221
Analysis of cash and cash equivalents	6,791,710	5,241,221

Notes to the financial statements

Accounting policies

a) Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK (FRS 102) (effective 1 January 2015) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK (FRS 102) and the Companies Act 2006.

The Anna Fraud Centre meets the cefinition of a public benefit entity under FRS 102. Assets and liabilities are: nit ally recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

Preparation of accounts on a going concern basis

The trustees consider there are no material uncertainties about the Charity's ability to continue as a going concern. The review of our financial position, reserves levels and future plans gives Trustees confidence the Charity remains a going occern for the foreseeable future

Charity information

The Anna Freud Centre (known as Anna Freud National Centre for Children and Families) is a company limited by guarantee (registered number 03819888) and a public benefit entity and registered charity in England and Wales (charity number 1077106). The address of the registered office is 4-8 Rodney Street, London, N1 9JH

b) Depreciation

All assets costing more than £1,000 and with an expected useful life exceeding one year are capitalised.

Depreciation is provided on all tangible fixed assets other than reehold land, at rates calculated to write off the cost or valuation, less estimated residual value, of each asset on a straight-line basis over its expected useful life, as follows:

Freehold properties: 1.33% per annum Furrishings and equipment: 25% per arnum

c) Investments

Investments are included in the balance sheet at market value. It is the charity's policy to keep valuations up to date such that when investments valuations up to date such unit when he weathering to previous years. As a result, the statement of financial activities does not distinguish between the valuation ad ustments relating to sales and those relating to continued holdings as they are together treated as changes in the value of the investment portfolio throughout the year.

di Income

All income is recognised once the charity has entitlement to income, it is probable that income will be received and the amount of income receivable can be measured reliably. With grants and donations once ar, award or pledge has been made in writing and if there are no restrictions or constraints on receivin the conat on then this will be recognised in full once entitlement is established. All other incomes are recognised based on the matching principle, and so are related to the activity, otherwise they remain repayable and so deferred.

Grant income includes the Government's Co-onavirus Job Retention Grant (CJEG) and is recognised under the accruals basis in line with staff costs. in the year to 31 August 2020 the amount caimed s £0.2m (2019; nil).

e) Translation of foreign currencies j) Financial instruments

Bank balances in foreign currencies are translated into stering at the rate of exchange ruling at the year enc and any exchange differences together with exchange differences arising from the conversion of grants received in foreign currencies into sterling during the year are included in the statement of financial activities.

f) VAT

Where appropriate, expenditure includes irrecoverable value added tax.

g) Expenditure

Direct costs have been charged to the relevant project it has arisen for. Overheads are apportioned across the organisation based on a percentage of airect costs. Governance costs include costs incurred in meeting constitutional and statutory

h) Employee benefits

Pension costs

The organisation offers employees a 6% contribution towards their pension based on their gross salary. Employees who do not opt out of the scheme are members of a group personal pension contributor system with Royal London, administered by The Anna Freud Centre.

Short term benefits

Short term benefits including holicay pay are recognised as an expense in the period in which the service is received.

Employee termination benefits

basis and in line with FRS 102.

i) Fund accounting

General funds consist of amounts available to the trus.ess to be appied at their discretion within the objects of the charity. Designated funds comprise unrestricted funds which have been set aside at the discretion of the trustees for specific purposes.

special trusts with nithe objects of the charity either imposed by the conor or by the terms of the appeal.

All income and expenditure is shown in the statement of financial act vities.

The charitable company only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

k) Cash at bank and in hand

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity.

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

m) Creditors and provisions

Credito s and provisions are recognised where the charity has a present obligat on 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 sextlement amount after allowing for any trade discourts due.

n) Critical judgements and

In the application of the accounting policies, the Trustees are required to make judgement, estimates, and assumptions about the carrying value of 3 ssets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates,

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affected current and future periods.

It has been decided to degreciate the Kings Cross Property over 75 years to reflect its useful economic life.

2. Grants, donations and legacies

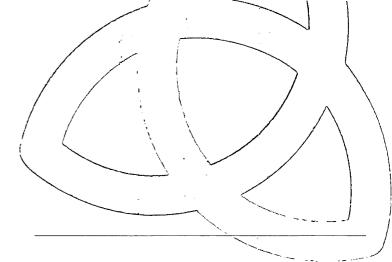
المعاولية والمنافية المنافعين والمنافع والمنافع والمنافع والمنافع والمنافع والمنافع والمنافع والمنافع والمنافع	2022	2021	
	£	E	
Unrestricted funds			
Unrestricted general	1.237,605	374,398	
HMRC Job Retention Scheme furlough payments	4.917	67,719	
Unrestricted total	1,242,522	442,117	
Restricted funds			
Campus project (formerly Development Fund)			
Mr L Polisano	[10,000]	-	
The Clore Duffield Foundation	25,000	25,000	
Clinical			
Child pychotherapy services			
The Anna Freud Foundation	3.903	5,419	
The Chesser Trust	16.000	8,000	
Anonymous donor	31.981	31,981	
Sundry donors	4.350	4.575	
Kailo project			
University College London	47,662	-	
Early years core funding			
The Sylvia Adams Charitable Trust	-][-	53,543	
Sundry donors	675	-	
Family Ties			
Department for Work and Pensions	26,520	15,912	
BBC Children in Need	20,769	41.538	
Reflective Fostering collaboration			
KPMG Foundation	50,000	-	
Segelman Trust	-	80,000	
National Institute of Health Research	21,834	74,090	
Colyer-Fergusson Charitable Trust	32,800	36,350	
University College London	46,514	8.482	
Barts Health NHS Trust	13,100	-	
Parent Infant Psychotherapy			
The Chesser Trust		8.000	
Sundry donors	3,675	4,575	

	2022	2021	
	. E	£	
AMBIT Peer Mentoring			
The Berkeley Foundation	64.564	64,565	
Mind the Dad	1 -		
Berry Street Foundation	23,143	24,129	
NHS South West London CCG	33.500		
Integrated Early Years Pathway			
Department of Health and Social Care	29.696	72,558	
London Borough of Camden	25,598	42,878	
London Borough of Wandsworth	34.385	65,500	
Reflective Parenting -			
Anonymo us donor	8.019	8.019	
Other	1 - 1	778	
Applied research and evaluation			
Schools eva uation			
The Mercers' Company	50.000	100,000	
MeeTwo evaluation			
Innovate UK	28.858	50,000	
Mee Too Education Ltd	60.807		
Prevent-Protect-Repair Lewisham evaluation			
What Works for Children's Social Care	11.967	67,816	
Violence Recuction Unit			
Ir stitute for Fiscal Studies	68.900		
BESST			
National Institute of Health Research		29,207	
South London & Maudaley NHS Trust	52,718		
Education and training		*****	
Scholarships			
The Chesser Trust	9.000	9,000	
CAH Private Philantlaropy		23,000	
L FePsychology Ltd	20,000	20,000	
Anonymous donors	21.962	20,000	
	21.502		
#RESET Mental Health	- 		
Nominet Trust	39.890	4,920	
	<u> </u>	 	
CEO projects	~		
Alternative provision innovation			
Department for Education	<u> </u>	49.984	
Esmee Fairpairn Foundation	- (60,000	
The UK Trauma Council			
The ORP Foundation:	10.000		
The Prudence Trust	10.000		
National Lottery Community Fund	199,755	239,508	
Sundry donors		6,701	

0 Anna Freud National Centre for Children and Familles			
		2022	2021
		€ 1	£
University College London collaborations			
Anonymous donor	, ,	35,000	53,750
Psychoanalytic Electronic Publishing		53,334	76.042
Virginia Tech Carillion School of Medicine		61,674	115,743
Postnatal depression and oxytocin study			
International Psychoanalytical Association		7,135	
Addressing extremism in youth conference			
Anonymous donor		37,500	
		9	
ChAPTRe			
BERRI evaluation			
Innovate UK		53,117	19.34
Lighthouse Parenting Programme evaluation	·		
What Works for Children's Social Care		54,197	112.71
Impact of adoption study			
Sir Halley Stewart Trust		20,098	6,69
	تستبي ويستساد أتهم مسووات		
Closing the Gap acceleration			
The Fidelity UK Foundation	1 1 1 1 1 1	250,000	250.00
Pears Foundation		390,000	
The Kavli Foundation		73,129	
Safer London		12,500	
University of Cambridge		20,000	
Other			1,000
Mental Health Academy			
The Royal Foundation			71.762
Pears Foundation			640.000
Schools			
Inclusion & specialist help in schools			
The Family School			
Anonymous donor		100,000	100,000
Barclays Bank Plc			75,00
Alternative provision roll out			
Esmee Fairbairn Foundation		60,000	
Porticus ÚK		74.993	
Technology and innovation			
Rugged Interactive		, 525	
Clinical help in schools			
Schools outreach service			
St Giles-in-the-Fields and William Shelton Educa	ational Charity	14.300	28.60
Mrs E Meyer			3,750
Westminster Almshouses Foundation			12,02
Strand Parishes Trust			7,150
Sundry donors			5,000

Table continued on next page.

		2022	2021
		€	£
Schools support service	4.75		
Garrield Weston Foundation.		200,000	
The Prudence Trust		240,000	
Westminster Foundation		100,000	
Barclays Bank Pic			100,00
The Foyle Foundation			50,00
Nat onal Emergencies Trus:			92,53
Knowledge dissemination in schools			
Schools in Mind			
Jc Malone London		106.834	
Sundry donors		177	
Mentally Healthy Schools 😘 💮			
Jo Malone London		47,075	107,88
Goldman Sachs Gives (UK) 💢 🕫		185,568	
Anonymous donor		50,000	
Paul Hamlyn Foundation		40,000	
Drum Clinic		561	
The Royal Foundation			48,19
The Danson Foundation	n:		10,00
Restricted total		3,445.863	3.323,21
Grand total		4,688,385	3,765,33



3. Investment income

	2022	2021
	É	E
Income from listed investments	69,792	61,184

3a. Income arising from the acquisition of a business

On 1 September 2021, The Anna Freud Centre (AFC) agreed to take over the ownership, control and management of CORC Ltd (Company No 06585227, www.corc.uk.net).

The Child Outcomes Research Conscrtium (CORC) brings together organisations and individuals committed to using and improving evidence to improve children and young people's mental health and wellbeing. CORC provides leading expertise in measuring mental health outcomes.

This is a company that has worked very closley with AFC and has been managed by staff employed by AFC, but seconded to CORC and who worked in the AFC offices over the years.

The transactions have been accounted for in accordance with acquisition accounting principles.

As the transfer of control of CORC Ltd by The Anna Freud Centre was for nil consideration, the fair value of the assets aquired has been recognised as income in the year on the dates the assets and liabilities were transferred to AFC

The fair value of the assets and liabilities transferred to AFC as at the date of acquisition and the gain therefore recognised is summarised as follows:

	Bcok value immediately Fair value before acquisition adjustments		Fair value at the date of acquisition	
/		E	€	£
Fixed assets		-1		-
Debtors	1	25,789	-	25.789
Cash at bank and in hand		519,006		519,006
Creditors amounts falling due within one year		-138,973	-	(138,973)
		405.822	-	405 822

4. Total expenditure

Total expenditure year ended 31 August 2022

						\	
	Salaries	Consultants	PG grants	Other expense	Support costs	Total 2022	Total 2021
	E	£	£	E	£	E	£
Cost of raising funds							
Fundraising and publicity	469,370	18,600	-	23,222	-	511,192	383,241
Investment management fees	-	-	-	-	-	-	235
Legal fees	-	-	-	42,067	-	42.067	-
	469.370	18,600	-	65,289	-	553,259	383.476
Charitable expenditure							
Clinical	2,323,260	69,687	35.980	178,960	877,010	3.484,897	3,140,321
Applied research and evaluation	993.315	291,071	-	105.650	363,966	1,754,002	1,932,414
Education and training	2.744.525	257,677	45.305	123.108	960,384	4.130.999	3,725,979
Research and policy development	1,997,169	1.087,714	221,680	1.041,974	1.349.017	5,697,554	4.086,478
Schools	2.540,411	52,160	100,000	132,479	872.347	3.697,397	3.145.659
User participation, library and dissemination	453,752	18.709	35,386	144,674	-	652,521	332,779
Campus real estate development	-	-	-	-	-	-	3.893
	11.052.432	1,777,018	438,351	1,726,845	4,422,724	19,417,370	16,367,522
Total expenditure	11,521,802	1,795,618	438,351	1,792,134	4,422,724	19,970,629	16,750,998

Table continued on next page.

4. Total expenditure

Total expenditure year ended 31 August 2021

	Salaries	Consultants	PG grants	Other expense	Support costs	Total 2021
	£	£	£	£	£	£
Cost of raising funds		and and and				
Fundraising and publicity	334,981	21,000	-	27,261	-	383,241
Investment management fees	-	-	-	235	-	235
Legal fees	-	-	-	-	-	-]
	334,981	21.000	-	27.495	-	383.476
Charitable expenditure						
Clinical	2,095.221	210,478	35.331	121,643	677.380	3,140,321
Applied research and evaluation	972.864	401.262	-	213,201	345,086	1,932,414
Education and training	2,512,120	106,851	45.305	140,575	919.127	3,725,979
Research and policy development	1,374.107	859,790	168.268	731,931	952.383	4.086.478
Schools	2,132,814	84.310	130.000	104,598	693.937	3.145.659
User participation, library and dissemination	197,110	38,771	35,386	61.511	-	332,779
Campus real estate development	-	-	-	3.893	-	3,893
	9,286,235	1.701.463	414,290	1,377.621	3,587,913	16,367,522
Total expenditure	9,621,216	1,722,463	414,290	1,405,116	3,587,913	16,750,998

5. Staff costs and numbers

		3
	2022	2021
a) Staff costs	£	E
Wages and salaries	11,183,356	9,354,232
Social security costs	1,102,457	856,721
Pension costs	557.919	457,740
	12,843,732	10,668,693

Staff costs include seconded staff costs amounting to £425,489 (2021: £421.165).
Staff costs also includes staff redundancy payments amounting to £16,944 (2021: £54,344).

	2022	2021
Emoluments over £60,000	No.	. No.
£60,001 - £70,000	14	15
E70,001 - E80,000) 9	4
E80,001 - E90,000	1	2
E90,001 - E100,000	2 :	4
£100,001 - £110,000	_ [4	1

Pension contributions of £106,546 were made to those receiving emoluments over £60,000 (2021: £85,007).

The total renumeration paid to key management personnel in the period was £606,398 (2021: £587,609).

2022	2021
No.	No.
82	65
114	96
99	84
22	18
64	63
2 .	2
383	328
	No. 82 114 99 22 64 2

b) Trustees

No trustee received remuneration for their services during the year (2C22: £nil). Reimbursed expenses were £nil (2021: £nil).

6. Tangible fixed assets

	Freehold land	Freehold properties	Furnishings and equipment	Total
شسرے	E	£	£	£
Cost				
At 1 September 2021	8.110,690	28,112,281	1.318.730	37,541,701
Additions	-		5.441	5,441
Disposals	-	-	(49.478)	(49,478)
Transfers	-	-	-	-
At 31 August 2022	8,110,690	28.112.281	1,274,693	37,497,664
Depreciation				
At 1 September 2021	-	843.369	752.127	1,595,496
Charge for the year	-	374,830	318,798	693.628
Disposals	-	-	(49,478)	(49,478)
At 31 August 2022	-	1.218,199	1,021,447	2,239,646
Net book value				
At 31 August 2022	8,110,690	26,894,082	253,246	35,258,018
At 31 August 2021	8,110,690	27,268,912	566,603	35.946.205

7. Investments

	2022	2021
	E	É
Market value at 1 September 2021	2,663,453	1,923,540
Additions	69,792	561,184
Disposal proceeds	-	(46,982)
Net investment gains (losses)	(233,799)	225,710
Market value at 31 August 2022	2,499,445	2,663,453
Historical cost at 31 August	2,181,217	2,093.816
Listed investments (market value)		
UK fixed interest	225,610	262,444
UK equity shares	469,766	526,916
Overseas equities	1,126,750	1,413,935
Property	152.017	104,765
Alternative assets	360.008	244.282
Market value of listed investments	2,334.151	2.552,342
Cash	165,294	111,111
Total	2,499,445	2,663,453

The investment managers, Sarasin, invest in a wide range of investments and the Trustees regularly review performance. The investment managers are remunerated by a percentage of the value of the fund and the charge for 2022 was £0 nil (2021: £235).

8. Debtors

/ /	\)
//	2022	2021
\mathcal{L}^{*}	E	Ě
Trade debtors	1,940,966	478,837
Prepayments and accrued income	1,027,761	642,251
Other debtors	(17,989)	48,227
	2,950,738	1,169,315
	_	l
	2022	2021
Debtors: amounts falling due within one year	[E [£
Trade debtors	1.940.966	478.837
Prepayments and accrued income	781.903	469.193
Other debtors	(17.989)	48,227
	2,704,880	996,257
		\
	2021	2020
Debtors: amounts falling due after one year	E	£
Trade debtors	-1	-
Prepayments and accrued income	245,858	173.058
Other debtors	-	-
	245 858	177.058

9. Creditors: amounts falling due within one year

	2022	2021
	€	£
Trade and other creditors	748,951	772,318
Taxation and social security costs	324,410	256,430
Accruals and deferred income	6,364,379	5,644,906
_	7,437,740	6,673,654

Analysis of accruals and deferred income	2022	2021
	£ [£
Other deferred income at the start of the period	5.644.906	5,898,252
Amounts released to income in the year	(5,066,836)	(5.022,625)
Amounts deferred in the year	5,786,310	4,769,279
Other deferred income at the end of the period	6,364,380	5,644,906

Deferred income relates to service level agreements and short course and training income that relates to future periods.

10. Creditors: amounts falling due after more than one year

	2022	2021
	£	£
Bank Loans	4.893.084	4,893,084
DfE Family School Contribution	1.406.891	1,474,967
	6,299,975	6,368,051

The analysis of bank loans is as follows:	2022	2021
	E	£
Due in 1 - 2 years		-
Due in 3 - 5 years	4.893.084	4.893,084
Due beyond 5 years		-
	4,893,084	4,893,084

A loan of £4.9m was agreed on the 27th September 2019 for a period of 5 years on a fixed rate basis of 2.87%. This is a fixed rate loan secured against the freehold land at Rodney Street N1 9JH.

The analysis of the DfE's contribution is as follows:	2022	2021
Income	E	£
Recognised in 1 - 2 years	68,075	68,075
Recognised in 3 - 5 years	204,226	204.226
Recognised beyond 5 years	1,134,590	1,202,665
*,	1.406.891	1.474.967

The DfE have contributed £1,701,885 to the construction of the Family School which was received in full in December 2019 and is recognised over the course of the 25 year lease which commenced in May 2019.

11. Operating lease commitments

	2022	2021
	<u>E</u>	<u>£</u>
Operating leases	25,541	39.684
	25,541	39,684

	2022	2021
	£	£
Due in less than 1 year	14,143	14.143
Due in 1-2 years	11,398	14,143
Due in 3-5 years	-	11.398
	25.541	39.684

12. Statement of funds

	1 September 2021	Income	Expenditure	Investment gains and revaluations	Transfers	31 August 2022
	£	£	£	£	£	£
General funds	2,940.799	16,858,970	(14,210,572)	(233,799)	-	5.355.398
Designated funds						
Fixed asset fund	27,686,526	-	(692,962)	-	-	26,993,564
EBPU	434,462	1,682	(62.396)	-	-	373.748
CORC	-	405,822	-	-	-	405.822
Total Designated funds	28,120,988	407,504	(755,358)	-	-	27,773,134
Restricted funds						
Clinical projects	240,172	588,643	(689,862)	-	-	138,953
Applied research	57,959	848.492	(761,459)	-1	-	144,992
Education and training	21,828	90,852	(65,705)	-	-	46,975
Research and policy development	564,609	1,938,040	(2,269,247)	-1	_ {	233,402
Schools	32,134	1,220,633	(1.183.426)	-	-	69.341
Central support services	-	35,000	(35,000)	-	-	-
Total restricted funds	916,702	4,721,660	(5,004,699)	-	-	633,663
Total funds	31,978,489	21,988,134	(19,970,629)	(233,799)	•	33,762,195

Details of designated funds

Fixed asset fund

Fixed asset fund matches reserves with fixed assets held and used directly for charity purposes.

EBPU - Evidence Based Practice Unit

Service Development and Evaluation has been growing for the last few years and to enable further growth funds have been designated from self-generated surpluses and used to innovate in Applied Research & Evaluation.

CORC - The Child Outcomes Research Consortium

CORC collects and uses evidence to enable more effective child-centred support, services and systems to improve children and young people's mential health and wellbeing. As a result of the merger of CORC into the Anna Freud Center in Sept 2021 there were reserves transferred which are being held to continue to invest in this work.

12. Statement of funds

Details of restricted funds

Clinical projects

Include Reflective Fostering, Family Ties, and Ambit Peer Support.

Applied Research projects

Include Violence Reduction Unit, Kids Time & Nested Evaluation projects.

Education and Training

Includes funds for Scholarhip awards and Choosing Treatments projects.

Research and Policy Development

Include funding for The UK Trauma Council, Bereavement Evaluation, Supporting Parents and ERiC Study.

Schools

Includes the Mentally Healthy Schools Website and Alternative Provision schooling models such as the Family School roll out and dissemination.

Central Support Services

Is funding connected to the Campus build and ongoing development.

Statement of funds (2021 comparative)

San	1 September 2020	Income	Expenditure	Investment gains and revaluations	Transfers	31 August 2021
	£	£	€	£	£	£
General funds	1,252,342	12,493,250	(11,038,206)	225,710	7.702	2,940,799
Designated funds						
Fixed asset fund	28,381.900	-	(695,374)	-	-	27.686.526
EBPU	473,444	810	(34.792)	-	(5,000)	434.462
Total Designated funds	28,855,343	810	(730,166)	-	(5,000)	28,120,988
Restricted funds						
Clinical projects	346,298	932.927	(1,039,053)	-	-	240,172
Applied research	91,901	844,760	(878,703)	-	-	57,959
Education and training	21,828	52,000	(52,000)	-	-	21,828
Research and policy development	953,596	1.786.894	(1,878,443)	-	(297,438)	564,609
Pears Family School	9,594	-	-	-	(9,594)	-
Schools	87,111	750,122	(1,109,428)	-	304,330	32.135
Central support services		25,000	(25,000)	-	-	-
Total restricted funds	1,510,328	4,391,703	(4,982,627)	- }	(2,702)	916,702
Total funds	31,618,014	16,885,763	(16,750,998)	225,710	· -	31,978,489

13. Related parties and related party transaction

Trustees and related parties made donations totalling £77,610 in the year to the Anna Freud Centre (2021: £65,000).

14. Pension commitments

The organisation makes contributions to personal pension schemes on behalf of some of its employees. Contributions in the year totalled £557,919 (2021: £457,740). Amounts owing to the scheme at 31 August 2021 were £328 (2021: £386).

15. Analysis of net assets between funds

Fund balances at 31 August 2022 are represented by:

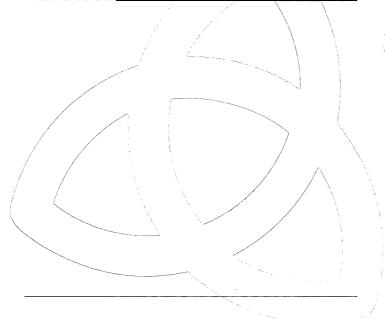
	General funds	Designated funds	Restricted funds	Total funds
	E	£	€	€
Tangible fixed assets	8.264.454	26.993,564	-	35,258,018
Investments	2,499,445	-	-	2,499,445
Long term creditors	(6.299.975)	-		(6,299,975)
Net current assets	752,641	918,403	633,663	2,304,707
	5.216.565	27.911.967	633,663	33.762.195

Fund balances at 31 August 2021 were represented by:

1	General funds	Designated funds	Restricted funds	Total funds
<u></u>	€	€]	£	£
Tangible fixed assets	8,259,679	27,686,526		35,946.205
Investments	2,663,453	-	-	2,663,453
Long term creditors	(6,368,051)	- [-	(6.368.051)
Net current assets	(1.614.282)	434.462	916,702	(263,118)
	2,940,799	28,120,988	916,702	31,978,489

16. Analysis of changes in debt

	At 1 September 2021	Cash flows	Other non-cash changes	At 31 August 2022
	E	£	£	£
Cash and cash equivalents				
Čash	5,241,221	1,550,489	-	6.791.710
Overdrafts	-[-)	-	-
Cash equivalents	-1	-]	-	-
	5,241,221	1,550,489	-)	6,791,710
Borrowings				
Debt due within one year	-][-	-]	-	
Debt due after one year	(4.893.084)	-		(4,893,084)
	(4.893.084)	-]	-	(4.893.084)
Total	348.138	1.550.489	-]	1,898,626



17. Comparative statement of financial activities (2021)

Year ended 31 August 2021

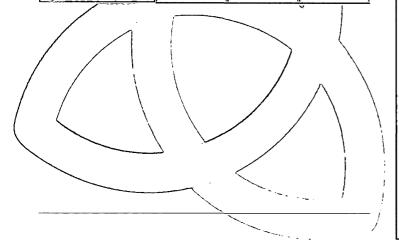
		· · · · · · · · · · · · · · · · · · ·	1 1
	Unrestricted funds 2021	Restricted funds 2021	Total funds 2021
Income from:	£	£	£ .
Donations and legacies	442,117	3.323.218	3,765,335
Investments	61,184	· l	61.184
Charitable activities			
Clinical and preventative services	684.197	282,036	966,233
Education and training	4,587,433	-]	4.587.433
Research	891.644	727.506	1,619,151
Conference and study events	3,499.520	58,942	3.558,462
Campus	-	-]	-1
Schools	1,953,939	-1	1.953.939
	11,616,733	1,068,484	12,685,217
Other	374,026	-	374,026
Total income	12,494,060	4,391,703	16,885,763
Expenditure on:			
Raising funds			
Fundraising and publicity	383,241	- [383,241
Investment and management fees	235	-]	235
Legal fees	-	-	-
	383,476	-	383,476

Table continued on next page.

88 Anna Freud National Centre for Children and Families

17. Comparative statement of financial activities (2021)

	Unrestricted funds 2021	Restricted funds 2021	Total funds 2021
Charitable activities	. É	£	£
Clinical & preventative services	2,101,268	1,039,053	3,140,321
Applied Research	1,053,711	878.703	1,932,414
Education & Training	3.673.979	52,000	3.725,979
Research & Policy Development	2,208.035	1,878.443	4.086,478
The Family School		-	-
Schools	2,036,231	1,109,428	3.145,659
User Participation, Library & Dissemination	307,779	25,000	332,779
Campus Real Estate Development	3.893	-	3,893
	11.384.895	4,982,627	16,367,522
Total expenditure	11,768,371	4,982,627	16,750,998
Net income / (expenditure) before investment gains	725.689	(590.924)	134,764
Net investment gains	225,710		225.710
Net income / (expenditure)	951.399	(590,924)	360.475
Transfer between funds	2,702	(2.702)	-
Revaluation of assets held for sale			
Net movement in funds	954,101	(593,626)	360.475
Funds balance carried forward at 1 September	30,107,686	1,510,328	31,618,014
Funds balance carried forward at 31	31,061,787	916,702	31,978,489





Registered address; Anna Freud Centre 4:6 Rodney Street/London/NT 97H Tel:02077942313 Northern hub address: Anna Freud Centre, Huckletree Ancoats, The Express Building, 9 Great Ancoats Street, Manchester M4 SAD

annafreud.org

Our Patron: Her Royal Highness The Princess of Wales

Annel Fraud National Centre for Children and Families is a company limited by guaranteer company number 03619888, and a registered charloy number 1077108.

88 Anna Freud National Centre for Children and Families

17. Comparative statement of financial activities (2021)

	Unrestricted funds 2021	Restricted funds 2021	Total funds 2021
Charitable activities	É	£	£
Clinical & preventative services	2.101,268	1,039,053	3,140,321
Applied Research	1,053,711	878.703	1.932.414
Education & Training	3,673,979	52.000	3,725,979
Research & Policy Development	2,208,035	1,878.443	4,086,478
The Family School	-1	-1	-
Schools	2.036.231	1,109,428	3,145.659
User Participation, Library & Dissemination	307,779	25,000	332,779
Campus Real Estate Development	3,893	-	3.893
	11.384,895	4,982,627	16,367,522
Total expenditure	11,768,371	4,982,627	16,750,998
Net income / (expenditure) before investment gains	725,689	(590.924)	134,764
Net investment gains	225,710		225,710
Net income / (expenditure)	951.399	(590.924)	360,475
Transfer between funds	2,702	(2.702)	
Revaluation of assets held for sale			
Net movement in funds	954,101	(593.626)	360,475
Funds balance carried forward at 1 September	30.107,686	1,510,328	31,618,014
Funds balance carried forward at 31 August	31,061,787	916,702	31,978,489

