

The Anna Freud Centre

Charity number 1077106, company number 03819888

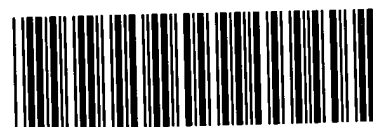


**The Anna Freud Centre**

Charity number 1077106, company number 03819888

**Trustees' annual report and financial statements for the  
year ended 31 August 2020**

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## 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.

<b>Board of Trustees</b>	The Hon Michael Samuel MBE (Chair) Ms Catherine Bedford (appointed 12.11.19) Ms Sally Cairns Professor John Cape (resigned 20.05.20) Ms Melanie Chatfield Ms Pamela Hutchinson (appointed 08.12.20) Dr Moshe Kantor Ms Nicola Loftus Professor Linda Mayes MD Mr Peter Oppenheimer Mr Daniel Peltz OBE (Treasurer) Professor Stephen Pilling (appointed 01.07.20) Mr Dominic Shorthouse (Deputy Chair) Ms Sarah Wood OBE (appointed 08.02.21)
<b>Auditors</b>	Haysmacintyre LLP, 10 Queen Street Place, London, EC4R 1AG
<b>Bankers</b>	Barclays Bank plc, St John's Wood Branch, PO Box 2784, London, NW3 6JD
<b>Investment Managers</b>	Sarasin Asset Management Limited, Juxon House, 100 St Paul's Churchyard, London, EC4M 8BU Ruffer LLP, 80 Victoria Street, London, SW1E 5JL
<b>Life President</b>	Dr Moshe Kantor
<b>Patron</b>	Her Royal Highness The Duchess of Cambridge
<b>Chief Executive</b>	Professor Peter Fonagy OBE FMedSci, FBA, FBPSA, PhD, DipPsy
<b>Chief Operating Officer</b>	Ros Bidmead
<b>Finance Director and Company Secretary</b>	David Fowler
<b>Registered address</b>	Kantor Centre of Excellence, 4-8 Rodney Street, London, N1 9JH

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## Introductions

### **Dr Moshe Kantor, Life President**

As the impacts of the coronavirus pandemic continue to be felt around the world, it is with great pride I reflect on the Anna Freud Centre's response. Improving and protecting the mental health of children, young people and their families is an urgent and vital task – now more than ever. The evidence that the coronavirus pandemic is harming the wellbeing and mental health of children and young continues to grow. More help is desperately needed, particularly for those with existing mental health disorders and instability in their family and social environments.

The anxiety, stress, losses, isolation and worry children and young people have been experiencing will have lasting impacts on their lives. We must not lose sight of this. Children, young people and their families need us to prioritise their emotional wellbeing and resilience now to protect the future of a whole generation.

### **The Hon Michael Samuel MBE, Chair of the Board of Trustees**

Even before the coronavirus pandemic we knew there was an increasing demand for mental health care and a need for a collective responsibility for each other's emotional wellbeing. It is only by engaging the professionals and communities who impact on children's lives that we can rise to the scale of the need. And with increased isolation and social distancing come considerable risks in further breakdown of these support networks and the growing gulf between what we know works and what we do day to day.

The vital role of the communities around individuals has been demonstrated during the coronavirus pandemic. And at the Anna Freud Centre, we have accelerated areas of work so that we can maintain that energy, compassion and connection, through innovative and digitally powered means.

I too am proud to see the Centre emerging as an even stronger organisation than before; better placed than ever to support children and families in the challenging times to come.

### **Professor Peter Fonagy, Chief Executive**

It will come as no surprise that this year we report differently on our achievements and performance. In September 2019, we once again embarked on a new academic year with ambition and momentum from the previous year's successes. But – as for so many of us – the coronavirus pandemic disrupted our plans and demanded nothing short of a heroic response from all.

One of the Anna Freud Centre's greatest strengths has always been its ability to change, adapt and evolve. And this is only so because of the truly exceptional people who come to work at and with the Centre. This year, that resilience was truly put to the test. Across the Centre project teams have learnt quickly and adapted delivery plans with patience, innovation and compassion, so that babies, children, young people, parents, carers, teachers and all those working with children can continue to receive vital support through new means. Our teams have also rapidly developed a range of resources to provide information for vulnerable groups and accelerated

investment into digital, virtual and remote technologies to continue to provide our vital services.

And of course, this has only been possible with the continued extraordinary support of generous donors and collaborators. Their quick response and genuine understanding of the barriers we've needed help in overcoming has been, and continues to be, a lifeline.

We recognise this has been – and continues to be – an exceptionally challenging time. But we also recognise, celebrate and are thankful for the exceptional resilience of our staff, our students, our champions, our supporters, and most importantly the children, young people and families we work with.

## Objectives and activities

Anna Freud National Centre for Children and Families (the Centre) has been pioneering mental health care for 68 years. The Centre promotes the relief of mental illness or disorder and the protection and preservation of mental and emotional health for the public benefit. 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.

### Aim

To transform mental health provision for children and young people in the United Kingdom by improving the quality, accessibility and effectiveness of treatment. We believe that every child and their family should be at the heart of the care they receive, working in partnership with professionals.

### Mission

To further the charity's purposes for the public benefit, we:

- > Carry out research to improve understanding of mental health and resilience and to evaluate and improve the treatments and services children and families are offered.
- > Develop new approaches, tools and services that aim to support children, young people and families in distress.
- > Teach and train a new generation of clinicians and researchers the latest skills and tools to improve mental health globally.
- > Take a leading role in the development of policy and practice in the UK and beyond to ensure that it is built on science, tested experience and has the input of children, young people and their families.
- > Creatively collaborate nationally and internationally in partnerships, which jointly develop a step-change in child mental health and wellbeing.

### Vision

A world where children and families are effectively supported to build on their strengths and to achieve their goals in life.

### Values

- > Collaboration
- > Creativity
- > Inclusivity
- > Honesty

### Principles

1. Children, young people and families are at the heart of everything we do.
2. We maximise impact by working with others, recognising their leadership and expertise.

3. No preconceptions; we are informed by the science and an awareness of what the science cannot tell us.
4. The Kantor Centre of Excellence is a special place with no special places. We use fluid, flexible and collaborative structures to help us break down the silos: no one group holds the answer.
5. We support staff to develop their potential by working together to achieve the Centre's objectives.
6. We are rigorous and critically monitor the effectiveness of what we do.
7. We are willing to experiment and accept failure.
8. We recognise the leadership and expertise of others to deliver our impact at scale.
9. Diversity and justice are values of fundamental importance to us and we are committed to investing our efforts into ensuring we are better able to work alongside and learn from Black, minority ethnic communities and other minoritised communities.

## Achievements and performance

### Responding to COVID-19

This year the Centre's plans were disrupted by the coronavirus pandemic and resulting social restrictions. The pandemic necessitated teams across the Centre to respond rapidly to protect and support the wellbeing of staff and the families we help. All Centre sites were closed on 16 March and all staff began operating remotely, quickly learning to adapt delivery plans so that mental health care, research, training and postgraduate studies could continue to be prioritised against a backdrop of considerable uncertainty.

### Providing help

Our clinical team successfully moved many of their services online and continued to directly support over 150 vulnerable young people and their families, including babies, infants, parents, looked after children, children with traumatic histories and adolescents with multiple, complex needs. Trying to be helpful to very troubled young people – who feel desperate – and doing it from home is a different process to what most Centre teams have done before. We have therefore also been learning and across clinical teams (Early Years, Specialist Trauma and Maltreatment, Adolescents and Psychotherapy, and Workforce Development):

- a working group has been established to capture the learning for working in this way with troubled young people and families;
- short courses have been translated into digital and online formats, testing and improving as quickly and effectively as we can; and
- a remote resilience support service has been developed to offer a choice of interventions through an online platform for young people and parents through their secondary schools.

### Supporting schools and colleges

Most vitally our Schools Outreach Team continued to provide direct therapeutic support to families and school staff virtually, through phone and video calls as well as messaging. This continued engagement with school communities and surveys of our Schools in Mind network provided us with crucial information to understand and respond to the developing needs of schools and colleges and their pupils. During the spring 2020 lockdown our teams began to think of how best to support the return to schools for the next academic year and ensure newly developed resources were based in both research evidence and clinical practice, as well as being easily implementable for schools across the UK. We tailored these resources to the common concerns raised by teachers and school and college leaders, which demonstrated a need to prioritise help for the most vulnerable, manage abrupt endings and transitions, and address anticipated increased levels of anxiety amongst children and young people. We also delivered a series of Facebook Live webinars (with over 30,000 views) to answer FAQs and connect with hundreds of education professionals across the country.

In addition to finding ways to deliver existing schemes online, the team worked closely with MindEd, Health Education England and the Department for Education to develop and deliver a new programme of training and support for schools, Wellbeing for Education Return, delivered from September 2020 to boost pupil and teacher wellbeing in light of the coronavirus pandemic.



## **Improving understanding**

For the Centre's Innovation, Evaluation and Dissemination programme, activity such as research field work and data capture were maintained as far as possible. Teams worked hard with funders and partners to ensure we were able to deliver as much as we had planned as possible. However, a considerable amount of adaptation was needed – both in terms of our teams being responsive and being able to capture the impact of the pandemic on children and young people's mental health. This led to some new activity of evidence synthesis – resulting in the Evidence Based Practice Unit's Emerging Evidence series – and reconfiguration of evaluations. The Centre has continued to work with a range of partners, including our academic partner UCL, and CORC (the Child Outcomes Research Consortium), to bring to light data and information that might hold some answers to protect child mental health over the coming years.

## **Sharing what we know**

Students taking part in postgraduate study at the Centre have been, for the most part, able to continue their studies virtually, losing only one week of teaching since the disruption and first national lockdown started in March. Our Postgraduate Studies team learned at pace to live stream lectures, reschedule small group teaching, and ensure coordination with UCL and placement sites. All assessments that would have exams or necessitated face-to-face contact were rethought to assess students in a valid way remotely and all students remained on track with their studies.

A priority for the team was to support the wellbeing of over 350 students – many of whom are young people – and may have been experiencing significant disruption and challenges in their lives. We provided additional personal tutor support to help manage stress and anxiety caused by the pandemic.

Within the year, our short course training, conferences, and events team also successfully met income targets, despite the disruption caused by the coronavirus pandemic. In the year we trained over 12,400 delegates through internal and external courses, as well as reaching over 10,400 delegates through conferences and learning events, and average training satisfaction was maintained at 4.5 out of 5. This is a 180% increase in training and event delegates from 2018-19 and is testament to the exceptional agility of our teams and tutors in moving to remote delivery.

## **Collaborating creatively**

In the first months of the pandemic, we saw a surge in visits to [annafreud.org](https://annafreud.org). Across the Centre we worked quickly to provide evidence-based support and guidance to children, young people, parents, carers and professionals working with families, including new booklets, leaflets, blogs, videos and webpages. Between 1 March and 31 August 2020 these resources helped thousands of people:

- Over 14,300 downloads of booklets, including 'Managing the transition back to school' and '8 ways a parent or carer can help children manage the transition back to nursery'
- Over 122,600 unique visitors to our coronavirus support webpages
- Over 23,600 views of our coronavirus support videos
- Over 12,400 unique visitors to our blogs focusing on the most vulnerable.

We also joined our partners and collaborators to strengthen our response to the pandemic. In April Peter Fonagy joined a mental health roundtable call chaired by The Duke and Duchess of Cambridge alongside the Heads Together CEOs of Mind, CALM, Best Beginnings, Contact Group, YoungMinds, The Mix, Action on Addiction, Mental Health Innovations and Place2Be. They agreed that the sector must continue to work together to ensure people are equipped to support their family and friends, and to have conversations about their mental health both during and after the pandemic. The Duke and Duchess of Cambridge also showed their support for Public Health England's Every Mind Matters platform, which launched a campaign focussed on children, young people and parents and carers in September 2020 with resources developed in partnership with the Centre, YoungMinds, The Mix and Place2Be.

In May 2020 the Centre joined 30 charities in calling on government to take action to limit the long-term impact of the pandemic on children and young people's mental health, and in June with 50 voluntary and social sector organisations to ask that mental health be put at the heart of the nation's recovery plan.

To mark Mental Health Awareness Week (18-24 May 2020), and in recognition of the kindness being shown across communities in response to the coronavirus pandemic, the Centre held a series of free seminars chaired by Peter Fonagy on the theme *From Crisis to Kindness*. The seminars asked how we could bring together what we have learned and embed it in our future work, inviting presentations and discussion from expert collaborators. The three webinars on the following subjects were positively received by over 4,600 participants:

- > Perinatal care and early years with Michelle Cree and Dr Camilla Rosan
- > The pandemic, mental health and education with Margaret Mulholland, Dr Julie Greer and Jaime Smith
- > The pandemic, mental health and young people with multiple problems with Dr Dickon Bevington.

The Centre also joined Company Three in encouraging children and young people to participate in the Coronavirus Time Capsule to capture young people's experience of the pandemic and lockdowns. The project brings together young people's videos of their everyday experiences, resulting in a funny and moving record of 2020 through the stories and minds of young people.

## **Equality, diversity and inclusion**

The Centre is an equal opportunity employer and ensures that all applicants and employees are treated consistently. We are committed to ensuring equality and opportunity through the creation of an environment in which individuals are treated on the sole basis of their relevant merits and abilities. All members of staff and Trustees share this commitment.

The killing of George Floyd, the Black Lives Matter movement and impact of the coronavirus pandemic on Black and minority ethnic communities around the world has been a stark and harrowing reminder to the Centre that equality, diversity and inclusion must be prioritised in service of our mission. We have been working on what it means to say Black Lives Matter in the work we do and made a commitment to tackling racism in August.

This also led to the initiative of:

- > A Centre-wide EDI steering group, chaired by a Trustee

- > Appointment of an external consultant to deliver and audit and support development of a comprehensive EDI strategy
- > Baseline EDI training delivered to all Centre staff
- > Forming of an Anti-Racism Working Group in September 2020, with additional groups to follow that focus on the needs of oppressed and minoritised people
- > Partnership working with Body & Soul to co-design services and trainings to support minoritised groups.

The Centre endeavours to be a model of good equal opportunities practice to meet its obligations under the Equality Act 2010 and other prevailing legislation. It is committed to providing services, employment and training in an environment in which the rights and dignity of its service users, students, staff and volunteers are respected, and which is free from discrimination, abuse, and harassment or bullying. This includes a policy to recruit disabled people for those vacancies that they are able to fill, providing all the necessary assistance with initial training and ongoing career development to ensure suitable opportunities for each disabled person. Arrangements are made, wherever possible, for retraining employees who become disabled to enable them to perform work identified as appropriate to their aptitudes and abilities.

Effective communication with employees is of vital importance and the Centre has established methods to provide information to and consult with employees on a regular basis on financial and other matters that affect them. Mechanisms include:

- > regular all staff meetings, to which all staff are invited (currently held monthly online)
- > digital staff suggestion box
- > regular staff wellbeing survey
- > monthly EDI survey, with results published immediately
- > regular updates from the Executive team
- > promoting activities and flexible working to support staff wellbeing.

## Create a hub of innovation

Last year we committed to address the complex challenge of giving the whole community a role in children's mental health by creating a hub of innovation to: build multidisciplinary practice and research agendas; strengthen and expand our strategic partnerships; extend the range of services we interface with beyond health, education and social care; and develop ways to connect diverse stakeholders to achieve a common purpose. Progress against the 2019-20 goals set under this strategic objective is included here.

- > **Launch '5 Steps to Mental Health and Wellbeing', an approach for schools and colleges that brings together our learning from across the Mental Health and Wellbeing in Schools programme, including Peer Support, Staff Wellbeing and Schools in Mind resources.**

Due to the coronavirus pandemic, we launched our 5 Steps to Mental Health and Wellbeing Framework on 29 September 2020, sending 24,000 emails to all schools in England, as well as promoting through our now 20,000+ Schools in Mind network members, the Anna Freud Learning Network, and colleagues of the Child Outcomes Research Consortium (CORC). In addition to receiving excellent feedback from 5 Steps users and across our social media platforms, we also received positive support and agreement to promote the framework from organisations including the National Association of Headteachers (NAHT), National Education Union (NEU) and Association of School and College Leaders (ASCL).

- > **Launch two new animations: an all-staff introduction to mental health for schools, 'Taking CARE to promote mental health in schools and colleges', and a guide to the '5 Steps'.**

With support from Jo Malone London, we launched our 'Taking CARE to promote mental health in schools and colleges' in January 2020. The animation has been viewed over 30,000 times across social media platforms and our webpages as a universal guide for school communities.

"Love the short animation for staff training."  
– Learning Support Lead

The second video, a short promotional animation which describes 5 Steps, was launched with the platform on 29 September and has been viewed approximately 14,000 times across our social platforms to end of October 2020.

- > **Continue to work closely with Pears Family School to share resources and learning, including jointly hosting internal and external events to engage diverse communities in the two organisation's work.**

Although no joint events were hosted with Pears Family School in the year, partly due to social restrictions, the Centre has continued to share and promote learning from the School. As Pears Family School is an alternative provision (AP) specialist school, they have remained open during the crisis and we published their practical guide for alternative provision schools continuing to operate during lockdown. The guide offers an example of how to assess which students can be safely cared for at home; how to support vulnerable children and

families; and how to work with families and deliver a balanced curriculum, structure and routine at home.

- > **Complete the Parent Coaching for Pupil Progress innovation project, funded by the Department for Education's Alternative Provision Innovation Fund, across three hubs and engaging 120 parents.**

The Department for Education (DfE) funded Parenting Coaching for Pupil Progress innovation project with three AP schools was completed within the year. Each of the three hubs in London, Leeds and Cornwall completed the four, 10-week parent engagement programme. One hub has started to disseminate the training themselves to reach a wider network of parents. Data collection has been completed and is being analysed by independent evaluators.

- > **Build the impact of our Specialist Trauma and Maltreatment Services' Post-adoption and special guardianship project by partnering with Regional Adoption Agencies, improving links across early years and adolescent teams, developing group work, and continuing to champion the voices of young people who have been Looked After.**

Our Specialist Trauma and Maltreatment Services team (STAMS) has continued to work closely with regional adoption agencies and social workers supporting looked after children. Building on our relationship with Adopt London South, we have also delivered a package of support for parents in response to the coronavirus pandemic and resulting lockdown. Ten families have been supported through clinical consultation to address the needs that have arisen during lockdown and to provide space for reflection, psychoeducation and signposting. We have also piloted an adapted version of the Centre's Reflection Parenting group sessions for adoptive parents to five families remotely while they await further assessment or intervention.

In addition, Katherine Mautner, a Senior Clinician within the team, codeveloped and co-delivered training on 'Therapeutic principles of working with adoptive families with children under five' with Dr Sarah Peter from the Centre's Early Years Programme to 150 adoption social workers across London and the South East, and we delivered a webinar about Reflective Parenting to the peer support group commissioned by the London RAAS, called We are Family.

- > **Continue to support sites taking part in the Department for Education-funded Looked After Children Mental Health Assessment Pilots, preparing for the final learning and evaluation phase ending in December 2020.**

In June 2020, the DfE confirmed a six-month extension to pilot delivery, offering sites the opportunity to continue implementation until March 2021. The aims of the extension are: to build on good practice already emerging from the pilot, to allow further embedding of the assessment model (mitigating disruptions related to COVID-19), and to enable further development of the Virtual Mental Health Lead (VMHL) role. Of the nine original pilot sites, five have confirmed that they are able to extend pilot delivery. The consortium is providing ongoing support to these five sites until March 2021, preparing for a learning and evaluation phase now ending in July 2021. Support with project close-off, local evaluation and

sustainability planning is being provided to the four sites who have not been able to extend.

- > **Build the evidence base for the Reflective Fostering Programme in collaboration with the Centre and UCL's Child Attachment and Psychological Therapies Research Unit (ChAPTRe) through Local Authority trials nationwide.**

The Reflective Fostering Programme has been successfully developed and evaluated through a pilot study, in collaboration with Kent County Council and ChAPTRe. Foster carers and social care staff in Kent were trained in the delivery of the programme, and successfully delivered the programme to 38 foster carers over the course of five groups, with high attendance and 100% completion rate. Evaluation of the programme has yielded positive results, particularly in relation to the child's wellbeing and foster carer parenting skills and qualitative feedback from the programme was overwhelmingly positive. Full results are currently being reviewed for publication, contributing to the evidence base.

Over the next year, the Reflective Fostering Programme will be evaluated further through a full randomised control trial. The trial, funded by National Institute of Health Research (NIHR), will provide a full evaluation of the programme, including cost-effectiveness and process evaluation. The Centre will lead on the clinical delivery of the programme, funded in part by KPMG Foundation and Segelman Trust.

- > **Launch the new UCL-AFC Centre for Developmental Neuroscience and Mental Health, a partnership facilitating cross-disciplinary research to increase our understanding of how cognitive, social and brain development impact on mental health across childhood and adolescence.**

Plans for this initiative have been significantly impacted by the pandemic. However, a collaborative team between UCL and the Centre submitted a joint grant application for an innovative school prevention programme in September 2020 and are supporting the new Yale-UCL PhD programme. A lead for the partnership will be appointed later in 2020.

- > **Establish an AMBIT International Study group to support evaluation of AMBIT.**

AMBIT is a whole-team approach designed for services who work with clients presenting with multiple and complex problems, including mental health difficulties. It is based around the core theory and practices of Mentalization. AMBIT supports teams to develop systems of care adapted to their own context, and to what is experienced as helpful by their clients, applying mentalization as the guiding framework across four areas of practice: face to face work with clients; between team-members; across networks; and in fostering a team culture of learning.

In September 2019, the AMBIT team began work on developing an international study group and appointed two joint leads for the group based in London and Barcelona. The AMBIT study group is an international collaboration of representatives from AMBIT-influenced teams. The overall goal of the group is to

build collaboration and learning across the AMBIT community and develop the emerging evidence-base around the model. One focus of the group is to understand the effectiveness of AMBIT trained teams in their work with clients, and members of the study group are using the AMBIT integrative measure (AIM) within their services to investigate client outcomes.

The group will bring its outcome data together, so that over time we can gain a more robust picture of client outcomes across AMBIT trained services. The group is sharing experiences of using the AIM measure within their services as a way of developing a framework for outcomes across the AMBIT community. Together the group aims to contribute towards research and publications around areas of AMBIT practice.

The group has representatives from 15 AMBIT-influenced services around the world including Spain, Austria, Denmark, Germany, USA, Australia and the UK. The first meeting of the AMBIT study group took place on 27 March 2020. During the meeting the group looked at the outcomes framework, sharing some client data and supporting each other with this work. This work was disrupted by the coronavirus pandemic due to reduced staff capacity, but we continue to have strong links with the members of the group.

- > **To build a digital strategy which includes continuing to develop and expand the role of Wikis in supporting training, and to gain the perspective of young people and their supporters on the important questions around how the digital environment impacts on young people's mental health.**

In light of the move to supporting larger numbers of children, young people and families online, the digital strategy and Wikis activities have adapted to focus on consolidating the rich collective knowledge across the Centre about how to support families online into practical guidance. This work has been most rewarding and will serve as a useful resource for the Centre's activities as well as the field more broadly. Digital research on the views of children, young people, parents, carers and teachers on the role of screen use and young people's mental health, and young people's views of digital self-care as part of the Centre's Self-care Summer campaign, have progressed well despite the changing context and are set to produce interesting findings by the end of 2020.

- > **Continue to develop the functionality and usage of POD (People's Outcomes Data) across children's emotional wellbeing and mental health services to increase our understanding of what is helpful and encourage collaborative working.**

POD has continued in its development over the past year: it has been an integral part of the Child Wellbeing Practitioner (CWP) and Education and Mental Health Practitioner (EMHP) training programmes and has helped to enable the first national data report on the efficacy of the EMHP programme. There has been increased interest and buy in from children and young people's mental health services (CYPMHS) across London and the South East and the POD team have increased functionality to respond to this demand. Progress has also been made in matching POD outcome data with patient record data to enable data flow to the NHS Mental Health Service Data Set (MHSDS).

- > **Complete the next stage of planning to further develop IT solutions that will securely support internal and external collaboration and begin implementation.**

The next phase of adoption of cloud collaboration tools, and particularly Microsoft Teams has been driven by the need for remote working and dramatically increased during 2020. This has resulted in a much more digitally capable organisation with a focus on being able to deliver training and services remotely. A priority has been ensuring adequate security controls and processes are in place to migrate this data into online repositories. As the immediate needs of responding to the pandemic have been met, the options available for cloud management of sensitive data are currently being assessed.

- > **Monitor the use and further development of Information Governance planning processes for project managers and deliver additional training for all staff on data rights.**

All staff now receive in-person information governance (IG) data security training annually, which includes data rights guidance. The induction session for new staff covers IG and data rights requests. Clinical staff receive regular refresher training, updates and support to recognise and respond to data rights requests, including distinguishing them from third party requests.

The IG planning processes are under constant review and the establishment of a Centre wide Data Security and Protection group will provide a new channel for feedback to ensure processes are appropriate and beneficial to staff and our stakeholders as well as compliant with legislation.

- > **Shift our organisational culture to implement a Centre-wide 'digital first' approach, prioritising digital channels to maximise our impact.**

The impacts of the COVID-19 have driven this dramatic shift for the Centre in many aspects of our work. Remote working and online delivery of traditionally face to face services has accelerated the development and implementation of the Centre's 'Closing the Gap' strategy to reach and mobilise whole communities around children and young people. The 'Closing the Gap' initiative will see the development of a suite of platforms and tools to embed a digital first approach and activate diverse communities in the delivery of mental health support for children and families.

- > **Increase capacity within the Fundraising team to achieve growth across income streams, with a particular focus on Trusts and Foundations and corporate supporters.**

The Fundraising Team has grown by two members to a team of six. During the year we welcomed a new Trusts and Foundation's Manager and Fundraising Assistant. We have already seen the benefits of these hires, having grown grants and donations by 33% over the financial year.

- > **Secure strategic partners to raise £450,000 in unrestricted and core funding within the year.**



During the financial year we secured over £450,000 in unrestricted and core funding from key strategic partners as well as committed givers and community fundraising activities. The Centre also benefited from the UK Government's Job Retention Scheme, with a number of staff being placed on furlough during the year.

> **Maximise our income opportunities from the Kantor Centre of Excellence and the Northern Hub to deliver an efficient operation.**

We created a plan to market the Kantor Centre of Excellence as a training and conference centre, to take advantage of periods of lower use. The pandemic has meant this activity is paused and will be relaunched when the economic position improves.

We are also progressing plans to use the Kantor Centre of Excellence as a community hub and will develop this during 2021.

> **Build a strategy for our Northern Hub and plan activity for a formal launch in autumn 2020 to set out how we will grow and strengthen national activity and collaborations to address unmet need throughout Manchester and the north of England.**

In the year, our cross-Centre working group for the Northern Hub was convened and planning for both the launch and the extension of activity in the North commenced. With the Northern Hub ambition very much about increasing our presence and collaborations in the North of England, we have adapted and delayed our launch programme so that we can begin with engagement events and consultations to build to what we hope will be a face-to-face event in September 2021.

> **Continue our internal programme of events and activities for staff, building our creative, inclusive and collaborative learning culture.**

In the first half of the year, our programme of bi-monthly talks to staff continued. Between September and February, we held 11 lunchtime and evening talks with an average attendance of 50 students and staff. The talks were paused due to the coronavirus pandemic and closing of Centre sites. However, they resumed online in July and cancelled sessions are being rescheduled for the coming months. Attendance at online events have averaged 80 staff. In addition, since the move to remote working in March, we increased the frequency of all staff meetings with the aim of helping to keep staff connected. These staff meetings have seen record levels of attendance, with 248 attendees at our meeting in June. We have also been using an online community to share quizzes, wellbeing activities as well as anti-racism resources for learning and reflection.

> **Contribute to creating a safer future for all by auditing and improving our working practices to take action against the climate crisis in all areas of the Centre's work.**

The Centre's Green Group has continued to improve sustainable working practices across the organisation. Less activity has taken place since the building closed in March 2020, due to the coronavirus pandemic. Nonetheless, the

following important steps were taken, and will remain on goals for the year 2020-21:

- An Eco-Audit, through the City Bridge Trust's scheme, was completed in March 2020 with consultants Sustainability Quality, identifying areas of good practice as well as measures to improve the Centre's sustainable performance. These measures are being implemented, with a view to completing the process in early 2021.
- Gas and electricity were switched to green suppliers.
- Collaborative working with colleagues at UCL who have pioneered sustainable practices in their department and across the wider university has allowed for sharing ideas and best practice, and joint initiatives will be planned in the future.
- Regular communication to the Centre staff group, via weekly newsletters and all staff meetings, have highlighted sustainability issues and how individuals can improve their own working spaces and practices.
- Attendance at Global Climate Strike in September 2019 by some staff members which was approved and supported by the Senior Executive.
- Final BREEAM certification (the leading sustainability assessment method for buildings) is to be issued and expected to receive a rating of Excellent, but this has been delayed due to building shutdown.

## Focus on complex problems

We are committed to focus on complex problems: to develop our practice of working at the interfaces between diverse actors and intervening simultaneously on a number of risk levels; embracing complexity and amplifying our capacity to systematise, evaluate, deepen and expand our breakthrough 'ecosystem' interventions'; draw inspiration and learning from front-line clinical encounters with high need client groups; continue our focus on early intervention – early years and early in the unfolding of mental disorder; and create a community focus and engage with the problems of social disadvantage. Progress against the 2019-20 goals set under this strategic objective is included here.

- > **Test multi-disciplinary ways of working that integrate support for families in the early years from both health and social care and across a spectrum of need within universal, targeted and specialist settings.**

During 2019/20, the Early Years programme was restructured, moving away from specialist modality teams to a multi-disciplinary staff team who provide clinical expertise to universal, targeted and specialist levels of needs. This stands us in good stead for the emergent clinical needs that have become apparent during the coronavirus pandemic and lockdown.

- > **Develop and test a training and supervision programme in collaboration with local authority Early Help teams that encourage a shared language around infant mental health in universal services.**

After 12 months of testing our 'Think Baby' training and supervision programme with Early Help teams in Camden and Wandsworth, we have developed a Wiki manual of the approach to support scale-up to other local authorities across the country.

- > **Develop, test and start to scale a model of collaborative working with specialist perinatal mental health teams that supports the mental health partners of women with complex and severe mental illness.**

We have established the 'Mind the Dad' project, which works with NHS specialist perinatal mental health teams to support fathers with their mental health and parenting needs by delivering a suite of evidence-based interventions. We have piloted the project successfully in south west London's perinatal mental health team, which allowed us to apply for further funding from the National Lottery Community Fund and KPMG Foundation. With this additional funding we have started scaling the model up remotely into the perinatal mental health teams in south east and north central London, Cheshire and Merseyside, and Northampton.

- > **Adapt and test the Centre's psychoanalytic parent-toddler group intervention for adoption families with one to three-year-olds.**

A pilot of the Centre's psychoanalytic parent-toddler group intervention for adoptive families with one to three-year-olds was delivered and evaluated. A summary report of the project is available at [annafreud.org](http://annafreud.org). We have also now adapted the work to be delivered remotely and are expanding to different Regional Adoption Agencies across the country.

- > **Launch a new strategy for the Specialist Trauma and Maltreatment Service (STAMS) in early 2020, unifying our universal (primary prevention), targeted interventions for vulnerable groups (secondary prevention) and specialist interventions (assessment and treatment) under a shared model for understanding developmental trauma and stabilising relationships.**

The STAMS strategy was delivered to the Executive team for approval within the year, however the launch of this strategy was interrupted by COVID-19. Work will continue in the coming year.

- > **Support the training and delivery of Reflective Parenting groups to more targeted populations, such as new fathers and newly adopting families.**

Two Reflective Parenting groups were run within STAMS and with the Early Years Programme.

- > **To continue to deliver the national evaluations of Community Forensic Child and Adolescent Mental Health Services and a Framework for Integrated Care, including two publications by the end of 2020.**

The team has adapted the national evaluations of F:CAMHS and Secure Stairs to the delivery challenges of the pandemic incredibly responsively. Two publications have been prepared and an additional four publications are in preparation. Feedback from sites taking part in the evaluations, from NHS England and from NHS Improvement, continue to indicate the evaluations are being well received. With the projects ending in March 2021, we are keen to explore opportunities to continue to build on this work to better support the most vulnerable children and young people who experience high levels of risk, harm and vulnerability.

- > **Set up evaluation projects to evaluate impact of AMBIT-influenced teams.**

Within the year the AMBIT Evaluation Project – a pilot project to help AMBIT-influenced teams measure client outcomes in their work – was set up. The following teams have been taking part in the project: The Winch, The Hive and The AMASS team, all based in London, and the Paedakoop service in Austria. These teams were provided with training and support from a trainee clinical psychologist in the AMBIT team around measuring outcomes and using the AIM measure, and were invited to share anonymised data with the AMBIT team using POD to contribute to the wider analysis of the impact of AMBIT. The AMBIT Evaluation Project is also enabling the team to find out whether the AIM is a useful measure for capturing the impact of AMBIT-influenced work on client's functioning. The Winch team, for example, received an analysis of their client data in 2019, highlighting that two thirds of the young people seen by their service showed improved functioning in relation to scores on the AIM.

- > **Develop a strategic research proposal from the Evidence Based Practice Unit which will include broadening our understanding of factors that put young people at increased risk of mental health problems, how they interconnect and therefore where the greatest levels of mental health inequality reside.**

The Evidence Based Practice Unit, a partnership between the Centre and UCL, successfully secured seed corn funding from the Nuffield Foundation to develop a strategic proposal refining the relationships between various risk factors. The development project, iRisk, enabled a multi-disciplinary expert advisory group to be brought together, and a literature review and extensive stakeholder consultation to be delivered. Interpersonal connections in a variety of domains, from family cohesion, parental relationships, peer relationships (or social groups), and interpersonal (including attachment style, loneliness and isolation, and relationship difficulties), were identified as a common, unifying experience of risk for mental health problems in young people.

With the emergence of the current global coronavirus pandemic during the project, social interconnections have been affected in an unprecedented way. The need for social distancing and the closure of schools, community groups and public gatherings means that examining the role of social interconnections in tackling risks to mental health for children and young people has unexpectedly become more pertinent and the team continue to seek funding to progress research in this area.

- > **Continue to collaborate in the delivery of the Mentalization for Offending Adult Males (MOAM) study with colleagues at Her Majesty's Prison and Probation Service (HMPPS), NHS England and User Voice, to maintain data collection rates, include researchers with lived experience as data collectors and complete analysis in the next year.**

The MOAM trial is approaching the end of the data collection phase and despite the challenges the team have faced due to COVID-19 since March 2020 the study is moving forwards. Over the last 12 months the research team have collaborated with colleagues at HMPPS, NHS England and User Voice to collect data in each of the 13 sites from 313 participants randomised into the trial. The team are now concentrating on completing the final follow ups with the last group of participants, entering, and cleaning the data ready for analysis in early 2021. We have received a funded extension from the NIHR due to the delays caused by COVID-19 and the trial has been included in a [NIHR case study report](#) as an example of good practice of involving patients and members of the public in health research.

## Strengthen our influence

We committed to inspire others and strengthen our influence reaching new audiences and widening our engagement to achieve impact throughout the systems around children, young people and families. To maximise our impact, we are: increasing our capacity to disseminate knowledge and skills to influence the practice of diverse actors; maintaining our world-leader status as a provider of training; and extending our role as a thought-partner for all those interested in children's mental health.

### > **Develop and deliver a UK-wide training offer to schools, colleges and Local Authorities with a focus on running training from the Northern Hub.**

We have developed five new training courses as part of our offer to schools, colleges and local authorities to develop the skills and confidence needed to support children's and young people's mental health and emotional wellbeing.

The offer includes:

- > A whole school approach to mental health and wellbeing' (primary and secondary versions)
- > Engaging parents and carers
- > School staff wellbeing
- > Supporting schools to manage the impact of unexpected change on mental health

During the year, 31 training engagements were delivered to 3,684 staff, including teachers, Special Educational Needs Coordinators (SENCOs), school governors, and senior leaders from over 442 secondary, 607 primary, 47 all-through schools, and three special schools. Due to government advice regarding coronavirus in March 2020, there were no in-person trainings delivered from the Northern hub: all trainings were delivered remotely online to locations across the UK and internationally.

In February 2020, two training sessions were also delivered to the International School of Geneva on 'Talking to children and young people about their mental health'. During the summer break a package of training modules were delivered remotely to the NEU to 1,597 delegates. The training was exceptionally well received with over 99% of respondents indicating they would recommend the course.

"Absolutely excellent throughout. Very engaging speakers who imparted so much advice over the six weeks. One of the best courses I have ever attended."

– NEU training

### > **Deliver on the roll out of the Department for Education Link Programme, collaborating with cross-sector partners to ensure the programme is made available to all 22,000 schools and colleges over the four-year contract.**

In the year, 101 Link Programme workshops were delivered in Clinical Commissioning Groups (CCGs) across England. These workshops were attended by 1,113 education professionals from 953 schools/colleges and 862 mental health professionals. Attendees have continued to give positive feedback on the

workshops and, including the pilot and second phase of the programme, 2,434 schools and colleges across England have taken part. In this first year of the national rollout, the Centre has partnered with 12 local and national, public and voluntary sector organisations to deliver the programme.

Workshop delivery was suspended in mid-March as a result of the lockdown measures. During the summer term, a new programme was developed, piloted and delivered: the Interim Approach to Joint Working. This comprised of up to two free online sessions to bring together education and mental health professionals to identify challenges within the local area as a result of COVID-19. The programme was piloted in three CCGs in May and rolled out to a further 23 sites in June and July. In total 45 sessions were delivered to 273 mental health professionals and 152 education professionals from 145 schools and colleges. 93.1% of attendees at session 1 and 86% of attendees at session 2 said the sessions were extremely or somewhat helpful in improving joint working to address the MH needs of CYP during the COVID-19 pandemic.

> **Complete delivery of the Department of Health and Social Care (DHSC) Mental Health Awareness Training for secondary schools, making the training available to up to 1,977 eligible schools in England.**

The Centre delivered Mental Health Awareness Training to 1,155 individuals from 643 secondary schools, sixth form colleges, PRUs and free schools. Extensive communications were undertaken to reach the eligible 1,977 schools in England, including letters, emails, telephone calls, social media posts and liaising with unions and local authorities. There were 139 training sessions booked in 28 locations between 1 September 2019 and 31 March 2020, but due to the coronavirus pandemic some live sessions were replaced with online sessions. In total we delivered 116 face-to-face trainings and four online sessions.

The training was extremely well received with over 99% of respondents indicating they would recommend the programme and reporting significant increases in knowledge of mental health, confidence in supporting students, and staff wellbeing.

'An incredibly informative, strategy-led course that has allowed us to develop and shape the way we focus on supporting the mental health of our staff and students. Couldn't recommend it highly enough'.

– School leader, MHAT for secondary schools

> **Deliver training and support programme across 10 AP and 200 mainstream schools to give settings the tools and knowledge to understand the complex system that may lie behind young people's challenging behaviours.**

We are close to completing the first part of this goal, reaching 10 AP and 30 mainstream schools as part of our five-day systemic training for inclusion. In the year, we also secured funding for the programme to reach a further 200 schools across the country over the next two years.

> **Continue to provide direct dissemination from Pears Family School across 11 boroughs and 70 schools.**

The Pears Family School has now worked with schools across 12 London boroughs and over 90 schools. Over the next three months we will be launching the Pears Family School's new Family School Model webpages which aim to manualise the model, enabling professionals to understand the core principals of our approach.

> **Develop and deliver training manuals and digital guidance to support AP and mainstream schools engage parents in their child's education to promote inclusion and reintegration following exclusion.**

We have set our sights on delivering six different training offers for schools. Four of these are already in place: All on Board training, Parent Coaching for Pupil Progress programme, SmartGym and 1:1 Consultation. Two additional offers are being developed including a parent engagement audit and policy development and an online short course for teachers and school-based professionals in parent and carer engagement.

> **Establish an early years digital learning network that engages a new audience of nursery nurses and their managers who are working in frontline early years settings such as nurseries and children centres to "think baby".**

The Early Years in Mind digital learning network went live in June 2020, during infant mental health awareness week. By the end of August 2020, membership had reached 4,000 members.

> **Run a high-profile early years conference that showcases the Early Years Programme's latest innovations as well as cutting edge research and practice from international early years experts.**

On 29 of January 2020 the Anna Freud Centre partnered with the Parent Infant Foundation to host the 2020 Parent-Infant Conference in London for 300 practitioners working in the early years across the UK.

The event sold out and brought a range of high-profile research, policy, and practice speakers in the field of infant and early years mental health. There were 19 speakers overall (16 external and three from the Centre). External speakers included Professor Lenneke Alink, Emily Frith, Jessica James, Dr Joann Wilkinson, Ailsa Swarbrick, Professor Jane Barlow, Dr Nicola Cosgrave, Professor Helen Minnis, Jennifer Savage, Dr Trudi Seneviratne, Dr Bridget Tiernan, Roberta Marshall, Sally Hogg, Dr Anne McFayden and Olya Homonchuk, Professor Paul Ramchandani and Professor Chandra Ghosh Ippen. Internal speakers included: Nicola Labuschagne, Jessica James and Professor Pasco Fearon. It offered them a platform to shine a light on some incredibly important issues in the early years, including poverty, trauma and unstable housing.



- > **Establish the PPIP Society as the professional association of graduates of the BPC-accredited specialist training in Psychoanalytic Parent Infant Psychotherapy (PPIP) and invited members.**

The PPIP Society and training programme were paused during the year for review, with a plan to re-establish in 2021.

- > **Deliver a national launch of the UK Trauma Council by spring 2020, with previews of the first portfolio of resources.**

The coronavirus pandemic delayed the launch of the UK Trauma Council (UKTC) to September 2020. During the year, a new bespoke website was built as an accessible portal to showcase new resources, guidance and policy advice. The UKTC also developed coronavirus specific resources and our first policy briefing focussing on trauma in the context of the pandemic, released as part of the launch.

- > **Publish the 'Neuroscience of Childhood Trauma Portfolio' (created in collaboration with the UKTC) by summer 2020, comprising multimedia educational materials explaining the neuroscience of early childhood adversity and resilience for foster carers, adoptive parents, social workers and teachers.**

The full set of Childhood Trauma and the Brain resources were released at the launch of UKTC in September 2020, including an animation, guidebook, and science-to-practice videos. These resources have been widely shared and viewed already. Across all platforms the animation alone has already been viewed 80,000 times. This represents an important first step in the UKTC becoming the 'go-to' source of reliable, evidence-based information and guidance for professionals around childhood trauma.

- > **Deliver the second national HeadStart Learning Conference in February 2020 and continue to produce and publish qualitative and quantitative evidence briefings summarising ongoing learning from the programme.**

Our February HeadStart conference was a great success with strong engagement of key stakeholders from across the sector including many young people from the HeadStart partnerships and other participation organisations (YoungMinds, McPin, National Children's Bureau), senior civil servants from DHSC, DfE and Public Health England, mental health professionals, funders and school staff. The event was co-delivered and co-hosted with young people and received extremely positive feedback. We have also produced three policy briefings and three evidence briefings, with several more planned before the end of 2020. In addition, we have worked with our colleagues at CORC to develop emerging evidence briefings about the impact of coronavirus on children's mental health.

- > **Increase On My Mind page views by 100,000 to 350,000, delivering the launch of Shared Decision Making guidance, Understanding Treatments pages, developing additional resources for vulnerable groups.**

Within the year, views of the On My Mind pages at annafreud.org totalled 507,271 (45% above target) as well as 4,605 views of the newly developed coronavirus support page for young people. This increased traffic to the site, and popularity of the self-care pages, may demonstrate some of the impacts of the coronavirus pandemic and increased concern for protecting wellbeing during this crisis.

The Shared Decision-Making guidance went live in October 2019 while the Understanding Treatments pages remain under development with UCL colleagues. New pages for the AFC Crisis Messenger Service, help with dealing with loss and bereavement, and several new self-care tiles created by our Young Champions were also added to On My Mind in the year.

- > **To repeat the On My Mind self-care survey in summer 2020 to contribute to our research around making best use of self and community approaches to improve mental health, and to engage the sector in this work through the Anna Freud Learning Network.**

The On My Mind Self-care Summer campaign was repeated in 2020 and digital research on the views of children, young people, parents, carers and teachers on the role of digital self-care is ongoing. Our teams have benefitted immensely from hearing from young people on how best to capitalise on the role of digital in self-care activities, as well as on the role of screen use more broadly in mental health, particularly during a time when digital means are being relied upon even more heavily to keep networks connected.

- > **Introduce blended learning into several Postgraduate programmes by creating online resources for the Pg Cert in Child and Young Person's Psychological Wellbeing Practice and Pg Dip for Educational Mental Health Practitioner, ready for implementation in September 2020.**

Pilot work on the blended learning Postgraduate programme, including development of online resources, was delivered in the year, although superseded by the rapid move to fully remote teaching and assessment for all programmes in March 2020. The pilot work already completed helpfully informed and guided our response to digital-only education and a blended model has been adopted wherever possible, within the prevailing governmental guidelines.

- > **Develop, propose and formally approve via UCL, the launch of a new Postgraduate Certificate in Supervision: Children and Young People's Mental Health and Wellbeing Services, by summer 2020.**

This Postgraduate Certificate in Supervision has now been approved by UCL and a Programme Director has been appointed to drive forward course planning. The first cohort is expected to be recruited and enrolled in 2021. This programme is a critical addition to our portfolio as it provides training to the clinicians who are the on-site supervisors of junior trainees on our other workforce programmes.

- > **Work towards delivering on our newly formulated Postgraduate Alumni strategy to: refresh the PGS web pages at annafreud.org; improve PGS**

**presence on Centre social media accounts; improve communications with alumni through the AFLN newsletter.**

Dr Vanessa Puetz was appointed as the Senior Course Tutor across PGS and the alumni lead. She has developed a new PGS Alumni Strategy and has made significant improvements to our web pages and social media engagement and is leading (along with a newly appointed Science Communication and Media Writer) in the production of regular newsletter content aimed at engaging our alumni.

- > **Continue to work with Health Education England to deliver high quality training as part of the children and young people's increasing access to psychological therapies (CYP IAPT) programme to ensure children and young people have access to evidence based, feedback-informed interventions.**

In the past year, we have been commissioned to deliver two cohorts of the EMHP training (62 trainees), two cohorts of the CWP training (60 trainees), one intake of Recruit to Train trainings (41 trainees), further Tier 4 training (70 trainees) and a range of short course continuing professional development trainings. All of these trainings have successfully been moved online to ensure we continue to deliver high quality trainings and provide development opportunities for mental health professionals across the country in collaboration with HEE.

- > **Develop a new online training platform to be available to trainees by spring 2020 to accommodate our growing portfolio of online trainings.**

Since Centre sites closed in March 2020, our scheduled programme of in-person short course trainings was temporarily paused due to the pandemic and associated restrictions on social gatherings and travel. Almost immediately where possible, trainings were delivered online. The re-organisation of our mode of operation meant that the original online training platform was finished slightly later than planned in July 2020. Given the complexity of all trainings now needing to move to an online format, the Centre has been reviewing various, more comprehensive, online training platforms to host some of our larger, income-generating trainings. From September 2020, training, conference and events will be delivered using a combination of online platforms and learning management systems to meet an increased level of programme activity when compared to previous years.

- > **Increase the availability of our training courses in locations across the UK, particularly using the Northern Hub to increase our reach across the four nations.**

Some trainings advertised to take place in Manchester were cancelled due to the pandemic and associated restrictions on social gatherings and travel. However, since March, the training programme pivoted from face-to-face delivery to online delivery, facilitating a wider reach than previously possible without travel time and costs.

"[It] was great to be able to attend remotely as travel often adds too much to expense of training. Also great to attend with such a variety of delegates from other countries."

"I enjoyed connecting with people from different countries, to share experiences, reflect and think together."

- > **To produce resources and training to strengthen the knowledge, confidence and ability of referrers in primary care to draw on digital resources to support children and young people with their mental health (pending support from specialist mental health services) by March 2020.**

In response to the rapid evolution of provision in this area, and in consultation with funders (UCLP), this work has focused on working with stakeholders. This is helping us to understand more fully the key challenges and opportunities in increasing the uptake and impact of digital resources at the point of referral. We have gathered feedback from referrers, mental health service providers, young people, and parents and carers through surveys and interviews, and have reviewed service delivery and transformation plans in eight CYPMHS services. This forms the basis of our comprehensive report that sets out key considerations in any efforts to maximise the impact of new interventions in this area of work. The report, which has been shared with stakeholders including NHS England, will also inform our own digital strategy and closing the gap work.

- > **Review our brand with the aim of refreshing how we communicate our identity to support our impact.**

A brand audit was approved by the Executive in January 2020, based on findings of an internal questionnaire and workshop involving 69 staff, Young Champions and Parent Champions. A research and discovery phase was delivered up to mid-March 2020, including a survey of views and perceptions amongst external stakeholders (243 respondents), interviews with senior staff members (22 interviews), and interviews with key collaborators (15 interviews). In mid-March the brand review was paused due to the coronavirus pandemic and a need to prioritise business continuity. The ambition is to return to brand refresh plans within the year 2020-21 as an integral part of renewed organisational strategic priorities and business planning.

- > **To increase membership of the Anna Freud Learning Network to 13,000 from 9,000, in part by integrating with CYP IAPT and Postgraduate alumni networks, recruitment of GPs to launch the Understanding Treatment pages, and launching the Interpersonal Psychotherapy Training (IPT) pages for international delegates.**

Once again, the membership of the Anna Freud Learning Network has increased more than anticipated. At the end of the year, AFLN membership totalled 15,069 (67% above target) and overall increase of 5,863 members. Schools in Mind network membership totalled 19,097 (64% above target of 15,000) and an increase of 7,418 members; and the newly launched Early Years in Mind network launched in June had 4,114 members against a target of 600 by the end of the August 2020. An IPT World Map went live in September.

## Plans for the future

### Strategic five-year objectives

The Anna Freud National Centre for Children and Families set out the following strategic objectives for 2019-2023. Our response to the coronavirus pandemic and the evolving needs of children, young people and families has accelerated plans under our strategic initiative, 'Closing the Gap', to dramatically enhance our reach and leverage to improve child mental health. As such strategic objectives are under review for 2021-2024.

The strategic plan outlines our threefold approach:

#### 1. Create a hub of innovation

- a. Build an innovative multi-disciplinary portfolio of practice and research agendas.
- b. Strengthen and expand our strategic partnerships with those who influence and provide care.
- c. Extend the range of services we interface with, going beyond health, education and social care to engage diverse actors and resources not traditionally linked to mental health.
- d. Develop ways to connect diverse stakeholders to achieve a common purpose, powered by shared protocols and tools.

#### 2. Focus on complex problems

- a. Embrace complexity, amplifying our capacity to systematise, evaluate, deepen and expand our 'ecosystem' interventions.
- b. Develop our practice of working at the interfaces between diverse actors and intervening simultaneously on a number of risk levels.
- c. Draw inspiration and learning from frontline clinical encounters with high need client groups.
- d. Continue our focus on early intervention; early years and early in the unfolding of a mental disorder for long term benefit.
- e. Engage with the problems of social disadvantage, devising strategies that reflect the importance of social networks in determining mental health outcomes.

#### 3. Strengthen our influence

- a. Increase our capacity to disseminate knowledge and skills to maximise our impact on diverse actors, including health, education and social care professionals.
- b. Maintain our world-leader status as a provider of training, reviewing and refreshing our portfolio of postgraduate and short courses so they are aligned with training and workforce development needs.
- c. Extend our role as a thought-partner for all those interested in mental health, such as policy makers, charities, public bodies, funders and community organisations.

### Short-term goals for 2020-21

- > Expand the Mentally Healthy Schools website to cover support, information, and resources for teachers of secondary-age pupils.
- > Continue to develop our 5 Steps framework and increase registered membership to 2,500 schools.

- > Promote and facilitate local and regional joint working between schools, colleges and children and young people's mental health services.
- > Increase the reach of our training, widening our offer for non-traditional actors and ensuring accessibility to meet the needs of diverse stakeholders.
- > Develop content for a series of short courses in applied research and evaluation.
- > Continue making a valuable contribution in training a skilled and more diverse workforce for children and young people's services.
- > Further develop parent engagement training for teachers and school-based professionals.
- > Strengthen our training offer to educational professionals through the development of a self-guided online platform that can be accessed by whole school communities.
- > Expand the Early Years in Mind digital learning network.
- > Develop and test a training and supervision programme for the voluntary and peer support workforce that builds capacity for parents in the perinatal period struggling with their mental health and parenting to access evidence-based interventions.
- > Produce training, supervision and network offer for Virtual Mental Health Leads for looked after children.
- > Publish bereavement resources to provide information and support for those helping children manage traumatic events.
- > Develop web-based communities of practice for practitioners, professionals and carers who are supporting young people.
- > Continue to build our direct clinical offer to schools and colleges through our work in the Schools Outreach Team and Brent Wellbeing team.
- > Establish TriSpace, the Anna Freud Centre's resilience support service via schools for pupils, teachers, parents and carers.
- > Test out and share protocols for remote delivery of evidence-based interventions and therapies that support the quality of the parent-child relationship in the early years, and establish a national early years remote therapy service.
- > Refine and continue scaling the Mind the Dad project across the UK, so that to the partners of women with complex and severe mental illness can access evidence-based mental health and parenting interventions.
- > Further develop adaptations of the Reflective Parenting model to mother and baby groups and increase remote delivery of the model to reach marginalised and underserved groups.
- > Expand use of POD, a software tool developed by the Anna Freud Centre to improve routine outcome monitoring in child mental health practice.
- > Establish an online parent-facing clinical platform that is codesigned by parents with children under five, so that it shares the information they want, how they want it and when they want it.
- > Capture the learning from Reflective Parenting groups and write a model development paper for publication.
- > Work closely with CORC to develop an approach to pragmatic evaluation and consultation that allows us to support non-research mental health professionals to evaluate their own practice.
- > Continue research on how to best support young people to actively manage their mental health and mental health care using digital.
- > Establish and progress the parental engagement audit tool for schools and alternative provisions across the country.

- > Continue to disseminate research findings about the impact of coronavirus of children and young people's mental health through regular 'Emerging Evidence' series and research updates.
- > Begin leading the delivery of the largest full-scale randomised controlled trial of a parent-infant intervention (Circle of Security-Parenting) in perinatal mental health teams across England.
- > Successfully set up the clinical side of the Reflective Fostering Programme RCT, and the adaptation of the programme to online delivery.
- > Continue to improve our Wiki manuals to support professionals with the theory and practice of mentalization.
- > Sustain a high-quality student learning experience for 2020-21 in the continued implementation of a hybrid teaching model across all postgraduate study programmes.
- > Launch first set of blended learning resources in Jan 2021 for the Postgraduate Certificate in Child and Young Person's Psychological Wellbeing Practice and Postgraduate Diploma for Educational Mental Health Practitioners.
- > Seek UCL approval to transition the one-year MSc in Psychoanalytic Developmental Psychology to a two-year programme including a placement in the Early Years Programme.
- > Market, recruit and launch the newly approved MPhil/PhD in Developmental Neuroscience and Mental Health for September 2021.
- > Establish a PGS Staff-Student Equality, Diversity and Inclusion Committee to develop and oversee implementation of a departmental EDI strategy, which will include members of staff, students and alumni.
- > Formally develop a five-year strategy for blended learning to be adopted in PGS across all programmes, with a common framework and shared objectives for all courses to align to.



## Financial review

### Financial position of the charity

The financial statements for the Anna Freud National Centre for Children and Families for the year are shown from page 44 onwards.

The pandemic has had a significant impact on our operations in the year to 31 August 2020. Much of the Centre's activity was centred around face-to-face delivery of teaching, training and clinical support services. Due to the restrictions associated with COVID-19 much of this activity had to stop in March 2020. However, the demand for our services increased and we were acutely aware that we needed to continue and increase delivery. We worked tirelessly during April and May to recreate our delivery online. We successfully completed our post graduate training in the year to 31 August 2020 and have started the new academic year with a mix of online and face to face teaching. All teaching and training material has been revised for online delivery and the feedback has been positive. Online delivery has allowed us to increase our reach by engaging with more people across the UK.

Given the level of disruption delivering income of £16.2m (2019: £16.2m) at the same level as the previous year represents a strong outcome. The deficit of £0.3m (2019: surplus of £0.5m) reflects additional costs and disruption caused by the restrictions associated with COVID-19. The Centre also utilised the Government Job Retention Scheme in the year to 31 August 2020 and claimed £0.2m for employees unable to work due to COVID-19.

It is likely that 2021 will be another challenging year as the impact of COVID-19 continues. Building on the positive feedback for our online teaching and training we expect income levels for the year to 31 August 2021 to be similar to the current year.

The reintroduction of lockdown restrictions in January 2021 means that we face the challenge of managing with the financial uncertainty of the pandemic combined with an increased demand for our training and support. However, our sales of online courses remain strong, and we are continuing to deliver postgraduate teaching online.

### Income

The source of our income continues to be from multiple sources, and this has served us well through the pandemic. Income from Government, NHS and academic institutions has grown with notable increases in our schools training income at £2.1m (2019: £1.3m) of 61% over the previous year and post graduate teaching with an increase in income of 9% to £3.1m (2019: £2.8m).

### Expenditure

Charitable expenditure in the year to 31 August 2020 was £16.6m (2019: £15.8m) an increase of 5%. The main areas of increased expenditure were our training in schools and post graduate teaching in line with increased income. In addition, research expenditure of £3.0m (2019: £2.6m) increased by 15%.

### Reserves

Total funds at 31 August 2020 were £31.6m (2019: £31.9m) of which £1.2m (2019: £1.4m) were free and unrestricted. The decrease in free reserves reflects the impact of continuing to provide our services through the pandemic.

Our policy remains investing available funds in the expansion of our charitable work and extending our reach and impact. We will retain sufficient levels of free reserves

(i.e., excluding fixed assets) to enable us to continue to deliver our core activities in the event of any significant disruption to income or economic downturn. The Trustees have reviewed our free reserves and consider the level of reserves to be reasonable.

### **Investment performance**

Our investment policy is reviewed by the Board on an annual basis. In the year, the overall objective remained to achieve income and capital growth over and above inflation. The trustees reviewed the investment portfolio considering the coronavirus pandemic and concluded that it was appropriate to continue with our existing investments.

Funds under investment at 31 August 2020 were £1.9m (2019: £1.9m) with an investment gain in the year of £43,519 (2019: £45,549). Income derived from investments to 31 August 2020 was £58,967 (2019: £62,950).

The Trustees consider that holding £1.9m of investments provides an appropriate level of funds to support the reserves policy.

### **Going concern**

The Board of Trustees have reviewed the financial position and believes that there are sufficient resources to manage any financial or operational risks. It is considered that our organisation has adequate resources to continue in operational existence for the foreseeable future. Therefore, the Board continues to adopt the going concern basis of accounting in preparing the accounts.

The reintroduction of lockdown restrictions in January 2021 will mean that the limited training and teaching that was delivered face to face will return to remote delivery. The preparation for the first lockdown in March 2020 means that we can deliver this activity remotely. It is likely that some of our Schools training will be delayed and it is likely to be deferred to the summer term of 2021. Notwithstanding these changes the Trustees continue to believe that we have sufficient resources to continue operations for the foreseeable future.

## **Fundraising**

The Centre's fundraising team had a target to raise £2.7 million in grants and donations for the year, including £450,000 in unrestricted funding, and exceeded this target by 28.7%.

The fundraising successes of recent years and the incredible generosity and understanding of our existing funders meant that we were able to respond flexibly to the coronavirus pandemic, ensuring our teams could continue to deliver on their ambitions. Our priority has been working with funders, partners and contractors to ensure the Centre's charitable activities can continue to benefit infants, children, young people and families despite disruption and additional resourcing pressures. This has involved working with funders and Programme teams to ensure the Centre can continue to meet demands and deliver differently, balanced with matching new funding opportunities to our frontline delivery and research projects.

As a result, we were delighted to secure new grants from the National Lottery Community Fund, KPMG Foundation, The Royal Foundation and Garfield Weston Foundation to provide newly developed digital services for families with children under five, for schools as well as our new Mental Health Academy training platform for a range of professionals. Unrestricted funding was already a priority area for the Centre going into the financial year, as this funding enables us to respond flexibly and creatively to the challenge of child mental health. These donations are even more vital now and in the medium-term to help us provide our services through new means, undertake rigorous research to understand the evolving needs of young people, continue to connect those supporting children and young people with the most up to date evidence, and produce practical tools and resources to support the mental health of whole communities.

### **Fundraising approach**

We undertake fundraising activity to our supporters via our website, through emails and direct contact at meetings and events, managed and monitored 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 Donations Policy which all volunteers, employees and hired 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 self-regulatory scheme we comply with its principles in all our fundraising:

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

When we benefit from commercial companies raising funds on our behalf through the sale of products, we operate within a written commercial participator agreement to ensure that their activities are not harmful to the Centre, our beneficiaries or supporters. We monitor the activities carried out by those on behalf of the charity for the purpose of fundraising in donor gift agreements and a donor database, recording relevant communications, transactions and agreements.

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

- > Do not undertake any general solicitations by telephone or door-to-door.
- > Ensure communications to the public in the course of carrying out fundraising activities are truthful and non-deceptive.
- > Keep confidential any and all personal information collected for fundraising purposes. We do not share this data outside the Centre unless there is an overriding legal reason to do so.

We received no complaints about our fundraising activity in 2020 (2019: nil).

### **Thank you**

Without the support of charitable trusts and foundations, companies, organisations and individuals, we would not be able to continue our vital work with children, young people and their families who need our help. Particularly in response to the coronavirus pandemic, we have been humbled by your continued generosity to help the Centre support those most in need. Thank you.

## **Principal risks and uncertainties**

### **Approach to risk management**

As a children's mental health charity, we face a range of different risks across all our activity. We make every effort to identify and put plans into place to mitigate and manage these risks.

The Board of Trustees carries out a top-level risk assessment each year and monitors progress quarterly. This process is supported by our Finance Audit and Risk Subcommittee and Quality Assurance Subcommittees. These groups aim to identify and assess major risks to the Centre and to ensure that steps are taken to mitigate these risks as far as possible. The Trustees continue to review the register of risks, which identifies the types of risk and assesses their likelihood of occurrence, potential impact and means of mitigation. Internal risk management processes are integrated into the annual business planning and reporting cycle. Departments and teams identify and manage local activity and project risks.

### **Summary of potential risks the Board has identified**

#### Strategic

The immediate impacts of the pandemic have led us to take up technology more quickly and accelerate the 'Closing the Gap' strategy. Failure to operationalise and implement the agreed strategy will limit progress towards goals. To mitigate this risk, we are securing funding to deliver on the Closing the Gap plan to build delivery capacity and infrastructure for strategy development, implementation and monitoring. This includes additional management positions and structures to ensure strategic objectives are owned across the Centre's projects.

Our strategy requires a collaborative approach with a number of organisations and government bodies, who may not support our proposed approach. The pandemic has made collaboration more difficult as communication channels, opportunities and relationships are reduced or disrupted. We are maintaining and developing strong relationships with government, NHS, UCL and other mental health and children's charities to come together and deliver consistent messages.

There is continued risk and uncertainty around the long-term impact of the coronavirus pandemic, particularly on underserved children and families, as well as changes brought about by Brexit. The Centre's move to quickly adopt new technology provides a level of confidence that teaching, training and clinical support will continue online. The reintroduction of lockdown in January 2021 means that some of the Centre's training may be delayed but is expected to continue.

#### Fundraising

There is reduced funding available to all charities due to a combination of economic downturn in the UK, uncertainty around Brexit and the pandemic. These factors contribute to reduced ability of other charities to fundraise from the public, increasing competition for institutional and statutory funding, and will likely lead to a distribution of funds away from London through levelling up. This will limit the funding available to pursue our charitable purpose in the medium term. Uncertainty around Brexit makes it difficult to forecast the impact on EU students and income to Postgraduate Studies.

To ensure the Centre has the capacity and resources to deliver on its ambitions, we are working in close partnership with existing major donors, trusts and foundations, and maintaining high-quality performance on statutory contracts. We also continue to drive diversity amongst our funding portfolio to reduce our risk profile. With additional funding for Closing the Gap, and a continued emphasis on unrestricted grants and donations, we are also able to develop a wider market for our training and support packages to reach and engage a greater number of individuals, schools and communities.

### Operational delivery

Our Kantor Centre of Excellence building is currently under used due to the pandemic and there is a risk that reduced occupancy, due to social distancing and other precautions impacts service delivery. While the majority of staff are working remotely, maintenance and security are still required, and reduced demand for office and conference space also reduces our ability to drive income from the building. The potential for changed working practices and less physical presence in London poses a risk in our ability to make the building a hub for child mental health.

The Centre's business continuity plans are regularly reviewed and updated to ensure we can maintain our operation through disruption, and reoccupation plans for key workers delivering clinical appointments and teaching are being maintained. In the medium term we will also identify changes to ways of working to make the most of the Kantor Centre of Excellence and increase collaboration and community relationships.

### Child protection

Safeguarding the children and families is a priority. We have safeguarding procedures in place, with mandatory safeguarding levels 1 and 2 training for all staff and level 3 for those working directly with children. All clinicians undertake continuous training and development and have regular supervision. Our Safeguarding Oversight Group (SOG) oversees any safeguarding concerns, escalating issues to external agencies as appropriate. The Clinical Governance Leadership Group reviews clinical risk at a strategic level, setting policy and guidance for clinical staff.

Failure to maintain safeguarding standards and knowledge would result in the potential for harm to vulnerable children. The coronavirus pandemic has increased risk and instance of harm in the general population and online service delivery reduces opportunity and ability to identify potential/actual harm. The frequency of SOG meetings has increased during remote working.

### IT systems and information governance

Associated risks for our IT systems are routinely managed by an external company. Identified risks, including cyber-attacks and unauthorised access to or loss of personal data, are monitored and regularly reviewed. The risks are further mitigated with staff guidance and training. We have robust IT and information governance (IG) policies in place to ensure data is collected, managed and stored appropriately, safely and in line with prevailing legislation. This is overseen by the Information Governance Leadership Group. The move to remote working during pandemic and delivery of services increases possibility of attack or error causing data or security breach.

All new staff complete introductory IG training and tailored training and guidance are provided to teams. An IG Manager and a Caldicott Guardian are in place to support staff and advise on data risks. We have reviewed our processes and staff guidance to ensure we comply with the General Data Protection Regulation (GDPR) and the Data Protection Act 2018. We are NHS IG Toolkit (version 14) and Data Security and Protection Toolkit (DSP Toolkit) compliant and use the ICO Accountability Framework to evidence compliance. Preparations are being made for implementation of UK GDPR post-Brexit.

### Equality, diversity and inclusion

The worldwide BLM movement led to a review of how we operate and interact with each other and our students, families, funders and supporters to ensure we are an inclusive, welcoming organisation that reflects its community. Failure to act could result in poorer quality services and activities, reduced funding, higher staff turnover, lower morale and a decline in community engagement which would hinder our ability to achieve our objectives. A training programme has been completed for all staff and trustees and an equality, our diversity and inclusion strategy is being further developed with support from an external consultant. Anti-racism and EDI working groups are being set up internally and the two anti-racism group co-Chairs are joining the Senior Management Team. We are also continuing to engage with other organisations, such as Body and Soul, to see how we can better reflect the wider community and ensure our services are accessible and inclusive.

### Participation

Failure to live our values and ensure participation opportunities to children, young people and families could result in services that do not reflect our communities. A participation strategy and team are in place and development of new services includes the participation team and Young and Parent Champions. Within the year we have also widened our pool of Champions from across the UK.

### Working culture

The move to the Kantor Centre of Excellence building required a change in working culture and the move to remote working during the pandemic within the first year at Rodney Street has further impacted ways of working. There is a risk to staff morale, an interruption of relationships with service users and potential for increased dissatisfaction amongst our people, families and students.

An extensive communication and engagement plan to keep collaboration and dialogue open during remote working and service delivery is being implemented. This includes development of work and social Microsoft Teams sites. We have increased the frequency of all staff meetings for feedback and engagement and continue regular staff surveys to understand the impact of remote working and measures to support staff wellbeing.

## 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, registration number 03819888.

The **Board of Trustees** comprises the charity's trustees and the legal directors of the company. Trustees 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. The Board of Trustees met six times in the last year.

The Board sets and reviews strategy and monitors operational matters supported by various subcommittees, three of which report directly to the Board. The performance of individual Trustees and of the Board as a whole is assessed every year.

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". In addition, Trustees are encouraged to keep abreast of their duties and responsibilities by reading Charity Commission and other updates and attending appropriate training courses. 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.

The **Finance, Audit and Risk Subcommittee's** membership includes the Chair and Treasurer. Before submission to the full Board, the Finance Committee reviews the annual accounts, issues relating to internal or external audits, investment and reserves policies, and the remuneration of senior staff. Matters not reserved for decision by the Board of Trustees are delegated to the Centre's Executive, consisting of its Chief Executive, Chief Operating Officer and Finance Director.

The **Quality Subcommittee** has oversight of the Clinical Governance Leadership Board, the Safeguarding Oversight Group, any clinical risks, Operations, Health and Safety and research activity. This subcommittee meets termly and is chaired by a Trustee. Its remit is to ensure the Board 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 and ensure that the Centre has effective mechanisms for managing clinical risk, learning from incidents and taking action to reduce risks and improve quality.

The **Nominations Subcommittee** has responsibility for the fair and transparent nominations process for Trustee appointments and meets annually or as required. It is also responsible for reviewing the structure, size and composition (including the skills, knowledge and experience) of the Board and making any recommendations for change, as well as keeping under review the leadership needs of the organisation, with a view to ensuring the continued ability of the organisation to achieve its aims.

### Key management personnel Trustees

The Hon Michael Samuel MBE (Chair)



Ms Catherine Bedford (appointed 12.11.19)  
Ms Sally Cairns  
Professor John Cape (resigned 20.05.20)  
Ms Melanie Chatfield  
Ms Pamela Hutchinson (appointed 08.12.20)  
Dr Moshe Kantor  
Ms Nicola Loftus  
Professor Linda Mayes MD  
Mr Peter Oppenheimer  
Mr Daniel Peltz OBE (Treasurer)  
Professor Stephen Pilling (appointed 01.07.20)  
Mr Dominic Shorthouse (Deputy Chair)  
Ms Sarah Wood OBE (appointed 08.02.21)

**Executive**

Professor Peter Fonagy, CEO  
Ms Ros Bidmead, Chief Operating Officer  
Mr David Fowler, Finance Director  
Mr Jonathan Robinson, Strategic Consultant  
Dr Peter Fuggle, Director of Clinical Service Improvement  
Professor Jessica Deighton, Director of Innovation, Evaluation and Dissemination  
Ms Jaime Smith, Director of Mental Health and Wellbeing in Schools  
Professor Eamon McCrory, Director of Postgraduate Studies  
Dr Dickon Bevington, Medical Director

For key management remuneration, please see page 59.

## 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 Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period.

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

- > Select suitable accounting policies and then apply them consistently.
- > Observe the methods and principles in the Charities Statement of Recommended Practice (SORP).
- > Make judgements and estimates that are reasonable and prudent.
- > State whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements.
- > 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 Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as 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.

### Auditors

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 8<sup>th</sup> February 2021 and signed on their behalf by:

*Michael Samuel*

**The Hon Michael Samuel MBE**

Chair of Trustees

8<sup>th</sup> February 2021

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

### Opinion

We have audited the financial statements of The Anna Freud Centre for the year ended 31 August 2020 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 2020 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 ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

### Responsibilities of trustees for the financial statements

As explained more fully in the trustees' responsibilities statement set out on page 40, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

**Auditor's responsibilities for the audit of the financial statements**

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

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

**Conclusions relating to going concern**

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

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

**Other information**

The trustees are responsible for the other information. The other information comprises the information included in the Trustees' Annual 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 other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

**Opinions on other matters prescribed by the Companies Act 2006**

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

- > the information given in the Trustees' Annual Report (which incorporates the strategic report and the directors' report) for the financial year for which the

financial statements are prepared is consistent with the financial statements;  
and

- > the Trustees' Annual Report (which incorporates the strategic report and the directors' report) has been prepared in accordance with applicable legal requirements.

### **Matters on which we are required to report by exception**

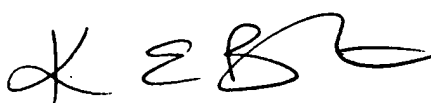
In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report (which incorporates the strategic report and the directors' report).

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
- > we have not received all the information and explanations we require for our audit.

### **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.



**Kathryn Burton** (Senior Statutory Auditor)

For and on behalf of Haysmacintyre LLP, Statutory Auditors

7th

April 2021

10 Queen Street Place

London EC4R 1AG

The Anna Freud Centre

Charity number 1077106, company number 03819888

The Anna Freud Centre

**Charity number 1077106, company number 03819888**

**Financial statements**

# Statement of financial activities, incorporating an income and expenditure account

## Year ended 31 August 2020

Registered charity number 1077106, registered company number 03819888.

	Notes	Unrestricted funds 2020	Restricted funds 2020	Total funds 2020	Total funds 2019
		£	£	£	£
<b>Income from:</b>					
Grants, donations and legacies	2	699,539	3,059,334	3,758,874	4,194,576
Investments	3	58,967	-	58,967	62,950
Charitable activities					
Clinical and preventative services		1,559,370	106,605	1,665,975	2,599,917
Postgraduate training		3,044,533	-	3,044,533	2,803,709
Research		1,831,530	1,134,024	2,965,554	2,887,974
Conference and study events		2,165,121	70,623	2,235,744	2,346,574
Campus		-	-	0	1,800
Mental health in schools		2,074,892	-	2,074,892	1,250,657
		10,675,446	1,311,251	11,986,697	11,890,631
Other		410,760	-	410,760	37,914
<b>Total income</b>		<b>11,844,712</b>	<b>4,370,586</b>	<b>16,215,298</b>	<b>16,186,071</b>
<b>Expenditure on:</b>					
<b>Raising funds</b>					
Fundraising and publicity	4	340,666	-	340,666	237,525
Investment and management fees		720	-	720	502
Legal fees		0	-	0	-
		341,386	-	341,386	238,027
Charitable activities					
Clinical Service Improvement		3,522,941	726,903	4,249,844	4,193,687
Innovation, Evaluation and Dissemination		1,922,358	763,643	2,686,001	2,689,038
Postgraduate Studies		3,455,911	19,386	3,475,297	2,767,666
Research and Policy Development		1,865,044	1,092,358	2,957,402	2,586,988
The Family School		138,189	219,727	357,916	322,766
Mental Health and Wellbeing in Schools		1,685,364	459,591	2,144,955	1,639,476
User Participation, Library and Dissemination		306,639	65,000	371,639	295,295
Campus Real Estate Development		2,486	-	2,486	1,027,066
		12,898,932	3,346,609	16,245,541	15,521,981

<b>Total expenditure</b>	<b>4</b>	<b>13,240,317</b>	<b>3,346,609</b>	<b>16,586,927</b>	<b>15,760,008</b>
<b>Net income/(expenditure) before investment gains</b>		<b>(1,395,605)</b>	<b>1,023,977</b>	<b>(371,629)</b>	<b>426,063</b>
Net investment gains		84,038	-	84,038	45,549
Net income / (expenditure)		(1,311,567)	1,023,977	(287,591)	471,612
Transfer between funds	12	-	-	-	-
Net movement in funds		(1,311,567)	1,023,977	(287,591)	471,612
Funds balance brought forward at 1 September	12	31,419,253	486,352	31,905,605	31,433,992
Funds balance carried forward at 31 August	12	30,107,686	1,510,328	31,618,014	31,905,604

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 2020

Registered charity number 1077106, registered company number 03819888.

	Notes	2020		2019	
		£	£	£	£
<b>Fixed assets</b>					
Tangible assets	6		36,642,089		37,274,141
Investments	7		1,923,540		1,880,021
			38,565,629		39,154,161
<b>Current assets</b>					
Debtors	8	1,403,603		5,304,133	
Cash at bank and in hand		4,937,369		26,452	
		6,340,972		5,330,585	
<b>Creditors: amounts falling due within one year</b>	9	(6,852,461)		(10,931,942)	
<b>Net current assets</b>			(511,489)		(5,601,357)
<b>Creditors: amounts falling due after more than one year</b>	10		(6,436,126)		(1,647,200)
<b>Total assets less total liabilities</b>			31,618,014		31,905,604
<b>Funds</b>	12				
General funds			1,252,342		1,809,062
Designated funds			28,855,343		29,610,190
Restricted funds			1,510,328		486,352
<b>Total funds</b>			31,618,013		31,905,604

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

The financial statements were approved and authorised for issue by the Board on 8<sup>th</sup> February 2021 and were signed below on its behalf by:

*Michael Samuel*

**The Hon Michael Samuel MBE**  
Chair of the Board of Trustees

*Daniel Peltz*

**Daniel Peltz OBE**  
Treasurer

## Statement of cash flow

## Year ended 31 August 2020

	2020	2019
	£	£
<b>Reconciliation of movement in funds to net cash flow</b>		
Net movement in funds	(287,591)	471,612
Depreciation charges	702,917	250,735
Income from investments	(58,967)	(62,950)
Unrealised investment (gains)	(84,038)	(45,536)
(Increase)/decrease in debtors	3,900,530	55,892
Increase/(decrease) in creditors	709,445	2,685,439
<b>Net cash flow provided by operating activities</b>	<b>4,882,296</b>	<b>3,355,192</b>
<b>Cash flows from investing activities</b>		
Investment income	58,967	62,950
Purchase of tangible fixed assets	(70,866)	(8,285,884)
Disposal of tangible fixed assets	33,011	183,424
Depreciation charges on disposal of tangible fixed assets	(33,011)	(393,835)
Purchase of investments	(58,967)	(54,279)
Disposal of investments	99,486	-
Disposal of assets held for sale	-	-
Increase/(decrease) in cash	28,620	(8,487,624)
<b>Cash flows from financing activities</b>		
Bank loan repayment	-	(106,571)
	-	(106,571)
Increase in cash and cash equivalents in the period	4,910,917	(5,239,002)
Cash and cash equivalents at the beginning of the period	26,452	5,265,455
<b>Cash and cash equivalents at the end of the period</b>	<b>4,937,369</b>	<b>26,452</b>

## Analysis of changes of net debt

	At 1 September 2019	Cash flows	Other non- cash changes	At 31 August 2020
	£	£	£	£
<b>Cash and cash equivalents</b>				
Cash	26,452	4,910,917	-	4,937,369
Overdrafts	-	-	-	-
Cash equivalents	-	-	-	-
	26,452	-	4,910,917	4,937,369
<b>Borrowings</b>				
Debt due within one year	(4,893,084)	-	4,893,084	-
Debt due after one year	-	-	(4,893,084)	(4,893,084)
	(4,893,084)	-	-	(4,893,084)
<b>Total</b>	(4,866,632)	4,910,917	0	44,285

## Notes to the financial statements

### Year ended 31 August 2020

#### 1. 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 Freud Centre meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy 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 concern 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 freehold 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
Furnishings and equipment	25% per annum

##### 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 are sold there is no gain or loss arising relating to previous years. As a result, the statement of financial activities does not distinguish between the valuation adjustments 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.

##### d) 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 an award or pledge has been made in writing and if there are no restrictions or

constraints on receiving the donation 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 Coronavirus Job Retention Grant (CJRG) and is recognised under the accruals basis in line with staff costs. In the year to 31 August 2020 the amount claimed is £0.2m (2019: nil).

#### e) Translation of foreign currencies

Bank balances in foreign currencies are translated into sterling at the rate of exchange ruling at the year end 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 direct costs. Governance costs include costs incurred in meeting constitutional and statutory requirements.

#### 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 contributory system with Royal London, administered by The Anna Freud Centre.

##### **Short term benefits**

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

##### **Employee termination benefits**

Termination benefits are accounted for on an accrual basis and in line with FRS 102.

#### i) Fund accounting

General funds consist of amounts available to the trustees to be applied 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.

Restricted funds consist of amounts subject to special trusts within the objects of the charity either imposed by the donor or by the terms of the appeal.

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

**j) Financial instruments**

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.

**l) Debtors**

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

**m) Creditors and provisions**

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

**n) Critical judgements and estimates**

In the application of the accounting policies, the Trustees are required to make judgement, estimates, and assumptions about the carrying value of assets 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 depreciate the Kings Cross Property over 75 years to reflect its useful economic life.

**2. Grants and donations**

	<b>2020</b>	<b>2019</b>
	<b>£</b>	<b>£</b>
<b>Unrestricted funds</b>		
Unrestricted general	465,127	354,329
HMRC Job Retention Scheme furlough payments	234,412	-
<b>Unrestricted total</b>	<b>699,539</b>	<b>354,329</b>
<b>Restricted funds</b>		
<b>Campus Project (formerly Development Fund)</b>		
Pears Foundation	-	500,000

Fondation VRM	-	291,221
The Foyle Foundation	-	250,000
The Segelman Trust	-	200,000
Hands Trust	-	100,000
GreenOak Real Estate	-	75,000
The Michael J Samuel Charitable Trust	-	50,000
Mr S Morgan	-	50,000
John Carrafiell Family Fund	-	45,000
Mr P Oppenheimer	-	30,000
The Peter Samuel Charitable Trust	25,000	25,000
Mr L Polisano	-	20,000
The Clore Duffield Foundation	25,000	25,000
Sundry donors	-	83,621
Campus total	50,000	1,744,842
<b>Clinical Service Improvement</b>		
<b>Child Psychotherapy Services</b>		
The Anna Freud Foundation	7,758	5,673
The Chesser Trust	8,000	8,000
Anonymous donor	31,981	-
Sundry donors	4,275	4,350
<b>Early Years Parenting Unit</b>		
Mr V Meyer & Mrs E Meyer	-	25,000
<b>Early Years Central</b>		
Mr V Meyer & Mrs E Meyer	87,500	125,000
The Sylvia Adams Charitable Trust	-	49,939
<b>Empowering Parents, Empowering Communities</b>		
Berry Street Foundation	-	6,106
<b>Family Ties</b>		
Department for Work and Pensions	92,938	31,874
<b>Reflective Fostering Collaboration</b>		
KPMG Foundation	50,000	70,483
Segelman Trust	50,283	70,200
Anonymous donor	8,019	-
<b>PIP</b>		
The Chesser Trust	8,000	8,000
Sundry donors	6,775	6,880
<b>States of Mind</b>		
Berkeley Foundation	-	17,089
<b>Mind the Dad</b>		
Berry Street Foundation	21,869	-
<b>Integrated Early Years Pathway</b>		

Department of Health and Social Care	163,668	-
London Borough of Camden	17,280	-
London Borough of Wandsworth	31,115	-
<b>Responding to COVID-19: Early Years Digital Therapy Service</b>		
National Lottery Community Fund	106,461	-
KPMG Foundation	79,501	-
<b>Schools Remote Service</b>		
Berkeley Foundation	20,000	-
Hands Trust	25,005	-
Garfield Weston Foundation	60,000	-
Sundry donors	1,000	-
Other	3,090	3,949
<b>Innovation, Evaluation and Dissemination</b>		
<b>Child Policy Research Unit</b>		
UCL - Institute of Child Health	-	54,431
<b>More than Mentors</b>		
Community Links	8,390	16,500
<b>Power Up 2</b>		
Anonymous donor	-	45,000
<b>Smart Toys</b>		
Committee for Children	-	11,692
<b>Marie Skłodowska-Curie Innovative Training Network TEAM</b>	63,833	-
<b>Youth Wellbeing Collaboration (Strategic Grant)</b>		
Department of Health and Social Care	-	125,952
<b>Schools Evaluation</b>		
The Mercers' Company	150,000	-
<b>iRisk - seed corn</b>		
Nuffield Foundation	5,000	-
<b>#RESET Mental Health</b>		
Nominet	44,276	-
<b>On My Mind</b>		
Pixel Fund	10,000	-
Other	5,000	10,296
<b>Postgraduate Studies</b>		
The Chesser Trust	9,000	9,000
<b>The Science of Early Adversity and Resilience</b>		
UCL	32,214	-



**CEO Research Projects****Alternative Provision Innovation**

Department for Education	214,694	177,319
KPMG Foundation	27,247	65,506
Porticus UK	92,753	-
Esmee Fairbairn Foundation	80,000	-

**DNU Lab**

UCL	-	9,000
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**The UK Trauma Council**

St James's Place Charitable Foundation	56,485	150,140
National Lottery Community Fund	474,004	-

**Systematic Therapy for At Risk Teens - Multi-Systemic Therapy**

UCL	-	64,761
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**UCL Collaborative Projects**

Anonymous donor	42,500	35,000
Psychoanalytic Electronic Publishing	48,749	53,888
Virginia Tech Carilion	-	45,309

**Policy Development**

The Royal Foundation	-	50,000
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**Postnatal depression and oxytocin study**

The Michael J Samuel Charitable Trust	15,000	-
International Psychoanalytical Association	7,467	-
American Psychoanalytic Association	14,675	-
Galvani Charitable Foundation	250	-

**Mental Health Academy**

The Royal Foundation	71,762	
Other	5,000	54,129

**The Family School**

The Peter Cundill Foundation	-	174,994
Anonymous donor	100,000	94,000
Other	441	1,000

**Mental Health and Wellbeing in Schools****Schools in Mind Campaigns**

Jo Malone London	101,673	46,874
Garfield Weston Foundation	40,000	-
Rosemarie Nathanson Charitable Trust	10,000	-

**Animation**

Jo Malone London	-	-
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**Schools and Mental Health Project**

Jo Malone London		40,663
<b>Mentally Healthy Schools</b>		
The Royal Foundation	271,814	314,878
Jo Malone London	30,600	--
<b>Schools Outreach Service</b>		
Mrs E Meyer	52,500	-
St Giles-in-the-Fields and William Shelton Educational Charity	36,019	-
Edward Harvist Trust	2,271	-
Other	1,200	12,530
<b>Restricted Total</b>	<b>3,059,335</b>	<b>3,840,247</b>
<b>Grand Total</b>	<b>3,758,874</b>	<b>4,194,576</b>

### 3. Investment income

	2020	2019
	£	£
Income from listed investments	58,967	62,950

#### 4. Total expenditure

##### Total expenditure year ended 31 August 2020

	Salaries	Consultants	PG grants	Other expense	Support costs	Total 2020
	£	£	£	£	£	£
<b>Cost of raising funds</b>						
Fundraising and publicity	307,075	18,000	-	15,591	-	340,666
Investment management fees	-	-	-	720	-	720
Legal fees	-	-	-	-	-	-
	307,075	18,000	-	16,311	-	341,386
<b>Charitable expenditure</b>						
Clinical Service Improvement	2,738,200	143,809	-	270,394	1,097,442	4,249,844
Innovation, Evaluation and Dissemination	1,171,410	712,478	-	290,651	511,463	2,686,001
Postgraduate Studies	2,250,247	47,968	45,305	107,417	1,024,360	3,475,297
Research and Policy Development	1,184,439	265,251	187,721	532,502	787,489	2,957,402
The Family School	207,365	3,610	100,000	7,388	39,552	357,916
Mental Health and Wellbeing in Schools	1,395,074	19,244	-	156,880	573,757	2,144,955
User Participation, Library and Dissemination	290,468	2,900	35,386	42,885	-	371,639
Campus Real Estate Development	-	-	-	2,486	-	2,486
	9,237,203	1,195,259	368,412	1,410,603	4,034,063	16,245,541
<b>Total expenditure</b>	<b>9,544,278</b>	<b>1,213,259</b>	<b>368,412</b>	<b>1,426,914</b>	<b>4,034,063</b>	<b>16,586,927</b>

**Total expenditure year ended 31 August 2019**

	<b>Salaries</b>	<b>Consultants</b>	<b>PG grants</b>	<b>Other expense</b>	<b>Support costs</b>	<b>Total 2019</b>
	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
<b>Cost of raising funds</b>						
Fundraising and publicity	225,406	970	-	11,149	-	237,525
Investment management fees	-	-	-	502	-	502
Legal fees	-	-	-	-	-	-
	225,406	970	-	11,651	-	238,027
<b>Charitable expenditure</b>						
Clinical Service Improvement	2,516,121	242,893	-	526,447	908,226	4,193,687
Innovation, Evaluation and Dissemination	1,314,668	694,688	-	281,999	397,683	2,689,038
Postgraduate Studies	1,830,227	102,904	45,305	161,129	628,100	2,767,666
Research and Policy Development	1,051,130	347,615	243,000	372,793	572,449	2,586,988
The Family School	183,096	-	100,000	14,080	25,590	322,766
Mental Health and Wellbeing in Schools	769,154	346,946	-	239,530	283,846	1,639,476
User Participation, Library and Dissemination	224,483	3,995	35,386	31,430	-	295,295
Campus Real Estate Development	-	1,920	-	1,025,146	-	1,027,066
	7,888,879	1,740,962	423,691	2,652,554	2,815,894	15,521,981
<b>Total expenditure</b>	<b>8,114,285</b>	<b>1,741,932</b>	<b>423,691</b>	<b>2,664,205</b>	<b>2,815,894</b>	<b>15,760,007</b>

	2020	2019
	£	£
<b>Support costs</b>		
Staff costs via payroll	1,264,685	978,271
Staff costs via agency/consultants	252,170	243,094
Staff related costs	83,416	34,612
Office expenses	853,578	720,211
IT costs	673,499	487,512
Governance	35,483	33,444
Finance charges	170,079	41,327
Depreciation	701,152	277,423
	<b>4,034,063</b>	<b>2,815,894</b>

Support costs are allocated to activities in the ratio of each activity's direct expenditure as this is considered to be a reasonable reflection of usage. Governance costs include audit fees of £22,180 (2019: £21,160). Additional fees of £nil were paid to the auditors in the year (2019: £1,390).

## 5. Staff costs and numbers

	2020	2019
	£	£
<b>a) Staff costs</b>		
Wages and salaries	9,515,358	8,017,213
Social security costs	843,079	713,855
Pension costs	450,526	361,489
	<b>10,808,963</b>	<b>9,092,557</b>

Staff costs include seconded staff costs amounting to £542,701 (2019 restated to include seconded staff costs £639,406). Staff costs also includes staff redundancy payments amounting to £29,775 (2019: £nil)

	2020	2019
	No.	No.
<b>Emoluments over £60,000</b>		
£60,001 - £70,000	11	6
£70,001 - £80,000	4	4
£80,001 - £90,000	4	3
£90,001 - £100,000	3	2

Pension contributions of £84,162 were made to those receiving emoluments over £60,000 (2019: £55,544)

The total remuneration paid to key management personnel in the period was £742,515 (2019: £795,257).

	2020	2019
The average number of employees analysed by function was:	No.	No.
Clinical and preventative services	90	60
Postgraduate training	104	62
Research	85	86
Conference and study events	10	0
Mental health in schools	54	27
Library	2	1
	345	236

### b) Trustees

No trustee received remuneration for their services during the year (2019: £nil). Reimbursed expenses were £nil (2019: £nil)

## 6. Tangible fixed assets

	Freehold land	Freehold properties	Furnishings and equipment	Total
	£	£	£	£
<b>Cost</b>				
At 1 September 2019	8,110,690	28,112,281	1,280,875	37,503,846
Additions	-	-	70,866	70,866
Disposals	-	-	(33,011)	(33,011)
Transfers	-	-	-	-
At 31 August 2020	8,110,690	28,112,281	1,318,730	37,541,701
<b>Depreciation</b>				
At 1 September 2019	-	93,708	135,997	229,705
Charge for the year	-	374,830	328,087	702,917
Disposals	-	-	(33,011)	(33,011)
At 31 August 2020	-	468,538	431,073	899,611
<b>Net book value</b>				
At 31 August 2020	8,110,690	27,643,743	887,657	36,642,089
At 31 August 2019	8,110,690	28,018,573	1,144,878	37,274,141

The Anna Freud Centre has entered into a contract with Willmott Dixon to construct the Centre of Excellence at Kings Cross. The total value of the contract is £18.4m including VAT. At 31 August 2020 costs incurred were £18.0m.

## 7. Investments

	2020	2019
	£	£
Market value at 1 September	1,880,021	1,780,206
Additions	58,967	54,781
Disposal proceeds	(99,486)	(502)
Net investment gains	84,038	45,536
Market value at 31 August	1,923,540	1,880,021
Historical cost at 31 August	1,597,178	1,612,149
<b>Listed investments (market value)</b>		
UK fixed interest	282,689	235,399
UK equity shares	324,265	334,645
Overseas equities	991,619	866,145
Property	52,850	158,812
Alternative assets	193,182	96,889
Market value of listed investments	1,844,605	1,691,890
Cash	78,935	188,131
Total	1,923,540	1,880,021

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 2020 was £720 (2019: £502).

## 8. Debtors

	2020	2019
	£	£
Trade debtors	745,247	2,075,044
Prepayments and accrued income	540,562	2,443,456
Other debtors	117,794	785,633
	1,403,603	5,304,133

**Debtors: amounts falling due within one year**

	<b>2020</b>	<b>2019</b>
	<b>£</b>	<b>£</b>
Trade debtors	745,247	2,075,044
Prepayments and accrued income	440,304	2,415,998
Other debtors	117,794	785,632
	<b>1,303,345</b>	<b>5,276,675</b>

**Debtors: amounts falling due after one year**

	<b>2020</b>	<b>2019</b>
	<b>£</b>	<b>£</b>
Trade debtors	-	-
Prepayments and accrued income	100,258	27,458
Other debtors	-	-
	<b>100,258</b>	<b>27,458</b>

**9. Creditors: amounts falling due within one year**

	<b>2020</b>	<b>2019</b>
	<b>£</b>	<b>£</b>
Trade and other creditors	728,234	985,444
Taxation and social security costs	225,975	212,759
Accruals and deferred income	5,898,252	4,840,655
Bank loans	-	4,893,084
	<b>6,852,461</b>	<b>10,931,942</b>

**Analysis of accruals and deferred income**

	<b>2020</b>	<b>2019</b>
	<b>£</b>	<b>£</b>
Deferred income at the start of the period	4,840,655	3,190,420
Amounts released to income in the year	(4,448,580)	(1,354,208)
Amounts deferred in the year	5,506,177	3,004,443
Deferred income at the end of the period	<b>5,898,252</b>	<b>4,840,655</b>

Deferred income relates to service level agreements and short course and training income that relates to future periods. A loan of £4.9m was agreed on the 27 September 2019 for a period of five 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.



**10. Creditors: amounts falling due in more than one year**

	<b>2020</b>	<b>2019</b>
	<b>£</b>	<b>£</b>
Bank loans	4,893,084	-
DfE Family School capital contribution	1,543,042	1,611,118
	<b>6,436,126</b>	<b>1,611,118</b>

**The analysis of bank loans is as follows:**

Due in 1-2 years	-	-
Due in 3-5 years	4,893,084	-
Due beyond 5 years	-	-
	<b>4,893,084</b>	<b>-</b>

A loan of £4.9m was agreed on the 27 September 2019 for a period of five years on a fixed rate basis of 2.87%

**The analysis of the DfE contribution is as follows:**

Income	-	-
Recognised in 1-2 years	68,075	68,075
Recognised in 3-5 years	204,226	204,226
Recognised beyond 5 years	1,270,741	1,338,816
	<b>1,543,042</b>	<b>1,611,118</b>

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

**11. Operating lease commitments**

	<b>2020</b>	<b>2019</b>
	<b>£</b>	<b>£</b>
Operating leases	53,827	67,970
	<b>53,827</b>	<b>67,970</b>

	<b>2020</b>	<b>2019</b>
	<b>£</b>	<b>£</b>
Due in less than 1 year	14,143	14,143
Due in 1-2 years	14,143	14,143
Due in 3-5 years	25,541	39,684
Due beyond 5 years	-	-
	<b>53,827</b>	<b>67,970</b>

**12. Statement of funds**

	1 September 2019	Income	Expenditure	Investment gains and revaluations	Transfers	31 August 2020
	£	£	£	£	£	£
<b>General funds</b>	1,809,063	11,842,374	(12,483,132)	84,038	-	1,252,342
<b>Designated funds</b>						
Fixed asset fund	29,083,052	-	(701,152)	-	-	28,381,900
EBPU	527,139	2,338	(56,033)	-	-	473,444
Total designated funds	29,610,190	2,338	(757,185)	-	-	28,855,343
<b>Restricted funds</b>						
Campus project	-	-	-	-	-	-
Clinical projects	188,085	885,116	(726,903)	-	-	346,298
Innovation, Evaluation and Dissemination	-	855,545	(763,643)	-	-	91,901
Postgraduate studies	-	41,214	(19,386)	-	-	21,828
Research projects	168,762	1,877,193	(1,092,358)	-	-	953,596
The Family School	128,881	100,441	(219,727)	-	-	9,594
Mental Health and Wellbeing in Schools	624	546,077	(459,591)	-	-	87,111
Central Support Services	0	65,000	(65,000)	-	-	-
Total restricted funds	486,352	4,370,586	(3,346,609)	-	-	1,510,328
<b>Total funds</b>	<b>31,905,605</b>	<b>16,215,298</b>	<b>(16,586,927)</b>	<b>84,038</b>	<b>-</b>	<b>31,618,014</b>

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 are being designated by self-generated surpluses.

### Details of restricted funds

Restricted funds result when income is received from funders for a specific purpose in advance of the costs being incurred. These are held to fund the discharge of that purpose and generally this occurs within a year. These are the names of some of funds held for these purposes:

#### **Clinical projects**

Include Reflective Fostering and Looked After Children, Mental Health Assessment Pilots in the Trauma and Maltreatment Service, as well as States of Mind project in Service Improvement. There are also several projects in the Early Years service including VCSE Health and Wellbeing, Perinatal Fathers, and Family Ties.

#### **Research projects**

Include funding for the UK Trauma Council, MOAM (Mentalising for Offending Adult Males), Alternative Provision Schools rollout, Tri Space, Mental Health Academy, Serenity Integrated Mentoring and REST feasibility study.

#### **Innovation, Evaluation and Dissemination**

Include Nested School based evaluations, School Transition, and RESET Mental health.

#### **The Family School**

Supporting the leadership and running of the Family School.

#### **Mental Health and Wellbeing in Schools**

Schools in Mind, and Mentally Healthy Schools.

### Statement of funds (2019 comparative)

	1 September 2018	Income	Expenditure	Investment gains and revaluations	Transfers	31 August 2019
	£	£	£	£	£	£
<b>General funds</b>	851,655	9,363,205	(8,366,471)	45,549	(84,876)	1,809,062
<b>Designated funds</b>						
Fixed asset fund	15,946,354	-	(277,752)	-	13,414,450	29,083,052
EBPU	538,056	2,000	(97,793)	-	84,876	527,139
<b>Total designated funds</b>	16,484,410	2,000	(375,545)	-	13,499,326	29,610,190
<b>Restricted funds</b>						
Campus project	12,694,874	1,746,642	(1,027,066)	-	(13,414,450)	-
Clinical projects	-	877,953	(689,868)	-	-	188,085

Innovation, Evaluation and Dissemination	152,505	2,142,927	(2,295,432)	-	-	
Postgraduate studies	203,883	9,000	(212,883)	-	-	
Research projects	650,209	1,194,092	(1,675,539)	-	-	168,762
The Family School	180,331	270,600	(322,050)	-	-	128,881
Mental Health and Wellbeing in Schools	216,126	570,187	(785,688)	-	-	624
Central Support Services	-	9,465	(9,465)	-	-	
Total restricted funds	14,097,928	6,820,866	(7,017,992)	-	(13,414,450)	486,352
Total funds	31,433,993	16,186,071	(15,760,008)	45,549	-	31,905,604

### 13. Related parties and related party transactions

Trustees and related parties made donations totalling £80,000 in the year to the Anna Freud Centre (2019: £1,818,070).

### 14. Pension commitments

The organisation makes contributions to personal pension schemes on behalf of some of its employees. Contributions in the year totalled £450,526 (2019: £361,489). Amounts owing to the scheme at 31 August 2020 were £nil (2019: £96,566).

### 15. Analysis of net assets between funds

Fund balances at 31 August 2019 are represented by:

	General funds	Designated funds	Restricted funds	Total funds
	£	£	£	£
Tangible fixed assets	8,260,190	28,381,900	-	36,642,089
Investments	1,923,540	-	-	1,923,540
Long term creditors	(6,436,126)	-	-	(6,436,126)
Net current assets	(2,495,261)	473,444	1,510,328	(511,489)
	1,252,342	28,855,343	1,510,328	31,618,014

Fund balances at 31 August 2019 comparative are represented by:

General funds	Designated funds	Restricted funds	Total funds
£	£	£	£

Tangible fixed assets	8,191,089	29,083,052	-	37,274,141
Investments	1,880,021	-	-	1,880,021
Long term creditors	(1,647,200)	-	-	(1,647,200)
Net current assets	(6,614,847)	527,139	486,352	(5,601,357)
	1,809,062	29,610,190	486,352	31,905,604

## 16. Post balance sheet events

The impact of COVID 19 has continued to affect the Centre's operations into 2021. The Centre now delivers teaching, training and some mental health interventions online. Therefore, the impact of the lockdowns in November 2020 and January 2021 is less than the first lockdown in March 2020. Projections for the year to 31 August 2021 are still in line with budget and are forecast to deliver income of £16m and a deficit of around £0.3m.

The Centre continues to utilise the CJRG and in the year to 31 August 2021 this is forecast to be £0.1m (2020: £0.2m).

## 17. Comparative financial statement of financial activities (2019)

	Notes	Unrestricted funds 2019	Restricted funds 2019	Total funds 2019
		£	£	£
<b>Income from:</b>				
Donations and legacies	2	354,329	3,840,247	4,194,576
Investments	3	62,950	-	62,950
Charitable activities				
Clinical and preventative services		2,204,507	395,410	2,599,917
Postgraduate training		2,803,709	-	2,803,709
Research		542,092	2,345,882	2,887,974
Conference and study events		2,264,328	82,246	2,346,574
Campus		-	1,800	1,800
Mental Health in Schools		1,095,376	155,281	1,250,657
		8,910,012	2,980,619	11,890,631
Other		37,914	-	37,914
<b>Total income</b>		9,365,205	6,820,866	16,186,071
<b>Expenditure on:</b>				
<b>Raising funds</b>				
Fundraising and publicity	4	237,525	-	237,525
Investment and management fees		502	-	502
Legal fees		-	-	-
		238,027	-	238,027
Charitable activities				
Clinical and preventative services		3,503,819	689,868	4,193,687
Innovation, Evaluation & Dissemination		393,606	2,295,432	2,689,038
Postgraduate training		2,554,783	212,883	2,767,666
Research & Policy Development		911,448	1,675,539	2,586,988

The Family School		716	322,050	322,766
Mental Health & Wellbeing in Schools		853,788	785,688	1,639,476
User Participation, Library & Dissemination		285,830	9,465	295,295
Campus Real Estate Development		-	1,027,066	1,027,066
		8,503,989	7,017,992	15,521,981
<b>Total expenditure</b>	<b>4</b>	<b>8,742,015</b>	<b>7,017,992</b>	<b>15,760,008</b>
<b>Net income/(expenditure) before investment gains</b>		623,189	(197,126)	426,063
Net investment gains		45,549	-	45,549
Net income / (expenditure)		668,738	(197,126)	471,612
Transfer between funds	12	13,414,450	(13,414,450)	
<b>Net movement in funds before gain on revaluation of assets</b>		14,083,188	(13,611,576)	471,612
Revaluation of assets held for sale		-	-	-
Net movement in funds		14,083,188	(13,611,576)	471,612
<b>Funds balance brought forward at 1 September</b>	<b>12</b>	<b>17,336,065</b>	<b>14,097,928</b>	<b>31,433,993</b>
<b>Funds balance carried forward at 31 August</b>	<b>12</b>	<b>31,419,253</b>	<b>486,352</b>	<b>31,905,605</b>