

REGISTERED COMPANY NUMBER: 04142349 (England and Wales)
REGISTERED CHARITY NUMBER: 1087375



REPORT OF THE TRUSTEES AND
FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2012
FOR
THE MEN'S HEALTH FORUM

TM Accountants Limited
Chartered Certified Accountants
West Midlands House
Gipsy Lane
Willenhall
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WV13 2HA

THE MEN'S HEALTH FORUM
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FOR THE YEAR ENDED 31 MARCH 2012

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THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2012

The trustees who are also directors of the charity for the purposes of the Companies Act 2006, present their report with the financial statements of the charity for the year ended 31 March 2012. The trustees have adopted the provisions of the Statement of Recommended Practice (SORP) 'Accounting and Reporting by Charities' issued in March 2005.

REFERENCE AND ADMINISTRATIVE DETAILS

Registered Company number
04142349 (England and Wales)

Registered Charity number
1087375

Registered office
The Men's Health Forum
32-36 Loman Street
London
SE1 0EH

Trustees
Alan White
Gopa Mitra
John Larkin
Gillian Nineham
Lilly Laila Abedipour
Paul Bradley
David Hudson
Frank Keating
Sandra Gidley
Sara Richards
Su Wang

All Trustees alone are the members of the Company. Members of the Company each guarantee to contribute £1 to the assets of the Company in the event of it being wound up.

Company Secretary
Peter Baker

Independent Examiner
Mr Anthony Lee Morris
FCCA
TM Accountants Limited
Chartered Certified Accountants
West Midlands House
Gipsy Lane
Willenhall
West Midlands
WV13 2HA

Solicitors
Bates, Wells & Braithwaite
Cheapside House
138 Cheapside
London
EC2V 6BB

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing document

The organisation is a charitable company limited by guarantee, as defined by the Companies Act 2006, incorporated on 16 January 2001 and registered as a charity on 5 July 2001. The company was established under a Memorandum of Association which established the objects and powers of the charitable company and is governed under its Articles of Association. The Articles of Association were last amended on 24 November 2011.

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STRUCTURE, GOVERNANCE AND MANAGEMENT

Recruitment and appointment of new trustees

The directors of the company are also Charity Trustees for the purposes of charity law and under the company's Articles. Under the requirements of the Memorandum and Articles of Association the members of the Charity are elected to serve for a period of three years renewable by resolution of the trustees for a further term of three years. A trustee who has served six years in total can not be reappointed except that, in exceptional circumstances as deemed by the trustees, by unanimous resolution of the trustees, a trustee's appointment may be renewable by resolution for a further term of three years.

The organisation has a robust recruitment system to ensure a broad skill mix on the Board. A skills audit of Trustees is periodically undertaken and in the event of particular skills being lost due to retirements, every effort is made to recruit new Trustees with the appropriate skills.

Knowledge of men's health is not essential but we require potential Trustees share the organisation's mission, vision, values and beliefs.

The organisation has a Trustee Code of Conduct which provides a guide to the responsibilities required of a Trustee which was revised in early 2011.

Induction and training of new trustees

In order to develop a working knowledge of the organisation and to give themselves credibility, trustees are asked to maintain links and keep in touch with the organisation by attending Forum conferences and other events as well as by reading its publications, including the two Forum websites. All new trustees are given induction training when they join the organisation and are also provided with a job description. An annual appraisal for the Chair of Trustees has been introduced.

Organisational structure

The Trustee Board of The Men's Health Forum is currently made up of eleven individuals who meet quarterly and are responsible for the strategic direction and policy of the charity. The Secretary is the Chief Executive who also sits on the Committee but has no voting rights.

The organisation also has the following committees/groups

- Finance Committee
- Organisational Development Committee
- Project Steering or Advisory Groups

The Finance and Organisation Development Committees are committees of the Board. The other groups have an advisory or project management role.

Management responsibility of the organisation rests with the Chief Executive, who is responsible for ensuring that the charity delivers its strategic objectives as set by the Board. The President has responsibility as a leading spokesperson for the Forum, for fundraising, for media work, networking, and for strategic advice. The Director of Operations has responsibility for the day to day operational management of the organisation, individual supervision of the staff team, including the development of their skills and working practices in line with good practice, as well as ensuring that all project work is delivered on time and to budget.

Risk management

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

The Trustees regularly review the major risks to which the charity is exposed and systems have been established to mitigate those identified. External risks to funding led to the development of a new strategic plan in 2011-12 which allows for the diversification of funding sources and future activities. This followed a comprehensive organisational review in 2010-11 which sought to align more closely the staffing structure with the Forum's strategic objectives. This review also led to an increase in the staff resources available for income generation. Internal financial risks are minimised by the implementation of procedures for authorisation of all transactions and project spend and by ensuring consistent quality of delivery in all operational aspects of the charity. These procedures are periodically reviewed to ensure that they still meet the needs of the charity.

THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2012

OBJECTIVES AND ACTIVITIES

Objectives and aims

The Men's Health Forum's primary objective, as stated in its Memorandum of Association, is to 'promote men's health'. The Memorandum adds that this can be achieved through research, by providing information on men's health to health professionals and the general public, and by other (unspecified) means.

The trustees have also considered Charity Commission guidance on public benefit when planning its activities.

The Forum undertook a comprehensive strategic review during 2011-12 in order to create a new Strategic Plan for the period 2012-17. As part of this work, the organisation's mission statement was extensively revised and the following version was approved by the Board in March 2012:

Who we are

- MHF is the voice for the health and wellbeing of men and boys in England and Wales.

Why we exist

- Our goal is the best possible physical and mental health and wellbeing for all men and boys. There is one premature male death every five minutes and far too many men and boys suffer from health problems that could be prevented.

What we believe

- There is an urgent need to tackle the unnecessarily and unacceptably poor health and wellbeing of men and boys.

- The health of the whole population should be improved through an approach that takes full account of the needs of both sexes.

- Men and boys should be able to live healthy and fulfilling lives, whatever their backgrounds.

What we do

- Listen to and represent the concerns of men and boys.

- Support men and boys to improve their own health.

- Campaign for changes that will make a difference to men and boys, especially in those communities where the problems are greatest.

- Collaborate with the widest possible range of organisations and individuals, nationally and locally.

- Provide information, resources and training to equip agencies and professionals to deliver services to men and boys.

- Develop local community networks of professionals and volunteers.

- Accelerate research.

- Promote equality and diversity in every aspect of our work.

THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2012

ACHIEVEMENT AND PERFORMANCE

Charitable activities undertaken for the public benefit

During 2011/12, MHF continued to implement the strategic direction agreed in 2009/10. At that time, MHF set itself the new overarching goal of becoming 'The Centre of Excellence for Policy and Practice in Men's Health'.

This was understood to mean that MHF would be:

- The key informant in the policy debate around men's health issues at the national and local levels
- The authoritative source of information, data, statistics, advice and support for a range of health and related professionals
- The primary specialist producer and distributor of men's health information material to our target audiences
- An effective and active partner and collaborator with other agencies on areas of joint interest
- The provider of a supportive and stimulating environment for all staff and trustees of the Forum, based on trust, understanding and mutual respect which allows all to reach their full potential and deliver to the best of their ability
- An organisation that is managed in a responsible and ethical way to ensure best value for charitable funding
- At the hub of a network of organisations, as well as individual professionals and practitioners, in the health, academic and other fields who are committed to sharing and developing their expertise to improve men's health.

In order to meet our goal of becoming the Centre of Excellence, we adopted three broad strategic objectives:

1. To integrate men's health in the strategic/policy and thinking/planning of government, PCTs and national charities
2. To equip relevant, cross-sector providers to enable them to engage effectively with men
3. To build and consolidate the organisational integrity of the Forum to ensure the ability to deliver and sustainability to grow and develop.

As well as these overarching activities, we also decided in 2009/10 that all our policy work would relate primarily to public health and primary care (nationally and locally), would aim to tackle the inequalities affecting men, and would focus on a number of specific areas of health policy. These areas were reviewed during 2011/12 and it was agreed that our key health topics for that year would be cancer, mental health and cardiovascular disease. We also set ourselves the goal of understanding the new health structures (nationally and locally) and further improving the MHF's engagement and influence with key stakeholders.

Our work during 2011/12 to achieve these strategic objectives is set out below:

To integrate men's health in the strategic/policy and thinking/planning of government, PCTs and national charities.

Our ability to achieve this objective increased significantly from April 2009 when MHF, alongside a small number of other voluntary organisations, was appointed a Strategic Partner of the Department of Health for a period of three years. (During 2011/12, we heard that the arrangement would be extended into a fourth year, up to March 2013.) This was recognition of the importance the Department attached to MHF and to men's health as an issue and has given us much easier access to officials and ministers. As part of the Strategic Partner Programme, MHF and other partners meet Department of Health officials on a monthly basis to discuss a wide range of policy issues. MHF now also has quarterly update meetings with senior officials in the Department's public health team and is invited to meetings of the Department's National Stakeholder Forum.

MHF's influence on the Department was reflected in the references to men's health, and specifically the work of MHF, in the Equality Impact Assessment for the Health and Social Care Bill 2011 and in the consultation on suicide prevention in England. The latter document identified men under 50 as a key high-risk group and highlighted MHF's work, specifically our Delivering Male guide for practitioners working on mental health issues.

During 2011/12, MHF remained a member of NHS North West's Health Equalities Stakeholder Group. One of key activities was developing a model for the effective implementation of the NHS's new Equality Delivery System (EDS). We also commented on the development of the EDS through consultations with the Department of Health's Strategic Partners.

In March 2012, MHF, the Race Equality Foundation (REF) and the Women's Health and Equality Consortium (WHEC) co-hosted a free learning event to inform voluntary and community organisations about the EDS. This event was funded by the Department of Health as part of the Strategic Partnership Programme and attracted over 70 delegates. Following the meeting, we have continued to work with REF and WHEC to lobby the EDS central management team to engage further with the voluntary sector.

THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2012

ACHIEVEMENT AND PERFORMANCE

Charitable activities undertaken for the public benefit

In July 2011, we held a pharmacy roundtable event in partnership with the Royal Pharmaceutical Society. The speakers included Jonathan Mason, National Clinical Director for Pharmacy at the Department of Health, and Matthew Shaw, Deputy Director at the Centre for Postgraduate Pharmacy Education (CPPE). Recommendations for action were identified and, as part of the follow-up work, we will be organising a joint event of the Men's Health and Pharmacy All Party Groups to discuss the issues.

Our report on men's participation in the National Bowel Cancer Screening Programme, *Slow on the Uptake*, was published and formally launched at an All Party Group on Men's Health meeting in September. We later presented the findings of the study to the National Bowel Cancer Screening Programme's Advisory Committee.

MHF was invited by the Royal Society for Public Health to be one of the four supporting organisations of its Public Health International Conference 2011 in September. The President led a masterclass on men's health at the event. MHF supported another RSPH conference, *Tackling Obesity: Commissioning for Outcomes*, and ran a workshop on men and obesity.

MHF was a partner, with Age UK, NIACE and Leicester University, for the *Discovering Men's Sheds* conference in September. We are now a member of the national UK men's sheds network.

MHF was a partner, with FaithAction, the Mental Health Providers Forum, Nacro and Action for Prisoner's Families, for an event in October for commissioners of services related to offenders on the role of the voluntary sector.

Together with the other Department of Health Strategic Partners, MHF organised a national conference in November on the implications of the health service reforms for the voluntary sector.

In March 2012, the President chaired, and the Chief Executive also attended, a roundtable event on HPV vaccination and boys hosted by Sanofi Pasteur MSD. There was broad agreement that there is a compelling case for vaccinating boys to reduce the risk of a wide range of HPV-related cancers in both men and women. We also began working with FPA, BASHH and Sanofi Pasteur MSD on an All Party Group on Men's Health meeting on boys and HPV vaccination to be held jointly with the Sexual Health All Party Group.

During the year, we joined a new expert working group convened by Bayer which focuses on erectile dysfunction and testosterone deficiency. Bayer sponsored a meeting of the All Party Group on Men's Health on the issue in November. We also organised a meeting of the All Party Group in January on prostate cancer.

MHF joined the new Self Care Forum which aims 'further the reach of self-care and embed it into everyday life.' One of its first tasks was to raise awareness of Self Care Week 2011, which MHF supported.

MHF helped to publicise the major EU Report on the State of Men's Health in Europe, published in autumn 2011. The report's main author was MHF's chair of trustees, Professor Alan White. We attended an international symposium jointly organised by the European Men's Health Forum (EMHF) and Leeds Metropolitan University, where Alan is based, to discuss next steps following the report's publication.

We worked with the Mental Health Foundation to develop an academic and research network on men's mental health - the first meeting will take place in 2012/13 - and joined the newly-formed Children and Young People's Mental Health Coalition.

Throughout the year, we continued to work with L.B. Greenwich and to support the work of the Greenwich Men's Health Forum. We were also instrumental in L.B. Haringey's decision to establish a Haringey Men's Health Forum with an initial focus on heart disease and involvement in Men's Health Week (MHW) 2012.

MHW in June 2011 focused on the role of digital technologies in improving men's health. The Week was launched at Tottenham Hotspur FC at a well-attended meeting with guest speaker Gary Mabbutt, the ex-Spurs captain and England player. MHF's first app, *Bloke Noises*, was launched during the Week; traffic to our *malehealth* website rose sharply during MHW, from a usual 1,500-2,000 unique visits a day to nearly 3,000 on the launch day and to about 2,500 for each following day until Friday. A meeting of the All Party Group on Men's Health was held to discuss the theme of the Week. The MHF Mini Manual *Health Clicks* was distributed free to partner organisations (including 15,000 copies to Royal Mail). A large number of copies were also sold.

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ACHIEVEMENT AND PERFORMANCE

Charitable activities undertaken for the public benefit

There was a significant level of partner activity. NHS Choices developed an e-Card for people to send to men which carried the MHF logo and a link to malehealth. Pfizer's Man MOT online health clinic, which MHF supports, was open for extra days during MHW and received a significant increase in visitors. This has encouraged Pfizer to extend the service for a further six months to the end of 2011. Bupa provided an online health advice service during MHW and Nuffield offered men free access to their fitness centres. Pfizer's new Wilbert video, which promoted MHW as well as Man MOT, gained significantly more hits (almost 47,300 in one month compared to 37,500 in seven months for the previous video) because of the link with MHW. Our PR agency calculated that the media coverage for the Week reached an audience of over 40 million. About 1,000 organisations registered with MHF to receive information and resources and a significant number of local events were held across the country during MHW.

MHF's evaluation of MHW, based on an online survey of stakeholders, showed overwhelming approval for the Week.

In March 2012, MHF and 2020health, the health policy think tank, followed up MHW with a co-hosted, well-attended symposium on men's health and digital technologies. The keynote presentation was from Dr Charles Gutteridge, the national clinical director for informatics at the Department of Health.

In autumn 2011, we began work on MHW 2012 which will have a focus on heart disease, a problem that, like cancer, disproportionately affects men.

MHF was the charity partner for MWC Media's first Blue September (BS) campaign in the UK. Launched in September 2011, this campaign aimed to increase public awareness of all the cancer that can affect men and specifically to encourage men to reduce their risk of developing cancer, to improve their knowledge of symptoms, and to bring about earlier diagnosis. We also wanted BS to help us position MHF as an opinion leader on the issue of men and cancer and to support fundraising from a variety of new sources, including the general public.

With MHF's help, BS succeeded in gaining the support of a wide range of influential individuals and organisations (e.g. health minister Paul Burstow MP, national cancer director Professor Sir Mike Richards, London Mayor Boris Johnson, Barclays Premier League and several leading football and rugby clubs, including Liverpool, Everton, Fulham, Tottenham Hotspur, Portsmouth and Warrington Wolves).

The campaign was effectively launched by Blue September Ambassador Alan Fletcher ('Dr Karl Kennedy' in Neighbours) with an appearance on ITV's This Morning on 31 August 2011. Alan went on to take part in a series of TV and radio shows, including The Wright Stuff, OK TV, Garrison Radio, BBC Manchester, Salford City Radio and BBC WM. We were also able to secure the endorsement of Liverpool FC players Steve Gerrard and Jamie Carragher under the banner 'Red for Life, Blue for a Day'. Blue September was the lead story on the NHS Choices website from 1 September.

Third Sector magazine highlighted Blue September as its Digital Campaign of the Week with the 'verdict' that this is 'An eye-catching campaign that should benefit from the explosion of popularity in breast cancer awareness events over the last 10 years'. There were also local events taking place across England and Wales during September at sports stadia, workplaces, hospitals and elsewhere.

To equip relevant, cross-sector providers to enable them to engage effectively with men

MHF continued to forge relationships and partnerships with a wide variety of stakeholders to provide information, advice and guidance as well as direct service provision to enable them to engage effectively with men. This was achieved through the development of project activity and the dissemination of project outcomes as well as the delivery of existing services, e.g. information provision, training/consultancy.

We continued to provide extensive information to providers through a regular eBulletin and growing content on the menshealthforum.org.uk website. Our news clippings service, available online with links via email and Twitter, continued to grow and provide a flow of information to organisations and individuals with an interest in men's health.

Mini Manuals remained an important resource for public health and other professionals as well as an important source of income for MHF. They also help to raise our profile significantly and generate traffic to the malehealth.co.uk website. (Malehealth now has about 1.5m unique visitors a year.) During 2011/12, we received Information Standard accreditation and began the process of ensuring that all our publications are compliant.

Work continued on our Department of Health-funded project to produce the next generation of health information resources for men. This is scheduled for completion in 2012/13.

We were commissioned by Weight Watchers to analyse data from a pilot study of men in new weight management programmes in the West Midlands. We also acted as a consultant to an academic study by Aberdeen University on men and weight management programmes.

To build and consolidate the organisational integrity of the Forum to ensure the ability to deliver and sustainability to grow and develop

THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2012

ACHIEVEMENT AND PERFORMANCE

Charitable activities undertaken for the public benefit

To ensure that MHF is 'fit for purpose' and is able to deliver its mission effectively, we undertook a comprehensive strategic review that was completed by March 2012.

The review took place against the background of major and rapid policy change, including a shift of power in the health system from the national to the local (and, in public health, from the NHS to local government) as well as major cuts in government funding for charities (potentially including MHF, a major beneficiary of Department of Health grants over the past decade).

A new Strategic Plan for 2012-17 was agreed in November which commits MHF to focusing on seven key areas. In brief, these are:

- Advancing best practices and policies on men's health
- Providing men's health promotion and education
- Accelerating research
- Increasing visibility and public awareness of MHF
- Supporting local communities to tackle issues that affect men's health and wellbeing
- Growing sustainable revenue support for the mission
- Building a thriving and stable organisation

For the remainder of 2011/12, we focused on:

- Developing a new Mission Statement (agreed in March 2012, see above)
- Consulting external stakeholders on MHF's strengths and weaknesses
- A name change and rebranding
- Improving the visibility of MHF with wider audiences
- Improving MHF's web and digital presence
- Developing plans for community engagement and seeking funding for this work
- Establishing a strategic research partnership with an academic institution
- Agreeing the priorities for MHF's policy and public affairs work (from April 2012, these will be: analysing and responding to the impact of the government's health reforms; equalities; cancer; mental health; cardiovascular disease; and accident prevention).

The decision to implement a name change and rebranding was particularly significant. We believed that if MHF is to generate income successfully from the general public and also from a wider range of corporates, it is essential for the organisation to have a more engaging identity that will help it become much more widely-known. The rebranding work, and our wider income generation activity, was led by Sultan Torshkoev who took up the newly-created post of Head of Business and Service Development in July 2011. The rebranding work is expected to be completed during 2012/13.

The other major staffing change was the departure in October 2011 of Stephen Sibbald who had been Director of Operations at MHF for six years. He moved on to a similar role in a larger, international charity. The Director of Operations post was created to professionalise our staff management and operational delivery and Stephen more than exceeded our expectations in this role. He combined efficiency, sound judgement, consistent reliability and a capacity for hard work with an engaging personality to become an indispensable colleague. It was decided not to recruit a replacement for Stephen during the financial year pending the outcome of the strategic review. In January, we also lost Alana Premchand, one of our two part-time Administrative Assistants; Alana had made a significant contribution to the organisation's business development, particularly the sales of Mini Manuals.

However, our staffing complement was boosted by the recruitment of Selina Rodrigues and Rachel Mustafa (in June 2011 and March 2012 respectively) to fill our two part-time Administrative Assistant posts. We also began an intern programme, the first of whom was Renata Pucci. Renata was particularly involved in the development work of MHW 2012. Three further interns were recruited to start work in early 2012/13. The President, Ian Banks, returned from his sabbatical in October 2011 and resumed his work for MHF on a part-time basis with a particular focus on fundraising.

At the very end of 2011/12, we relocated our office within Loman Street to an enclosed space which was not only larger but which also provided a much quieter and more private working environment.

All staff continued to be regularly supervised. There are staff meetings, normally monthly, and smaller groups of staff meet frequently in their teams and to discuss specific projects. There are also social events for all staff at least twice a year. Staff with particular needs - such as childcare responsibilities or study commitments - have been permitted to work flexibly.

During the year, we updated our governing document to tackle internal inconsistencies and to align it better with the trustee code of conduct. We began work on the recruitment process for the new chair of trustees who will be needed by the time Professor Alan White's term of office expires in September 2013.

THE MEN'S HEALTH FORUM
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FOR THE YEAR ENDED 31 MARCH 2012

ACHIEVEMENT AND PERFORMANCE

Charitable activities undertaken for the public benefit

We made a successful application to the Salesforce Foundation for an in-kind contribution of Salesforce CRM software. 10 user licenses for one year, renewable annually, were granted to MHF. (The market value of this donation is £10,200 per year.) This grant allowed us to build a powerful customer-relationship, sales, fundraising, and communication platform that will improve our existing business processes, communication channels, reporting and data collection. This development was especially important in light of the expected increase in the amount of work in sales, external communication and fundraising.

Our external communications work continued to improve, including through the websites, eBulletin, Twitter and news clippings services. We responded to a large number of media enquiries throughout the year and, with the support of a leading PR company, ran a major campaign for MHW 2011. Blue September also made a significant impact (see above). Other media coverage during the year included: men's online purchase of counterfeit drugs (BBC R4); men and weight (BBC R5); and quotes from MHF in articles in The Daily Mail, BBC Online, The Pharmaceutical Journal, The Daily Telegraph, and numerous local newspaper and websites. Two major articles by MHF staff were published in the Journal of Family Planning and Reproductive Health Care and Trends in Urology and Men's Health.

FINANCIAL REVIEW

Reserves policy

The Trustees have established a policy whereby the unrestricted funds not committed or invested in tangible fixed assets ("free reserves") held by the charity should equate to an amount that would enable the charity to continue its current activities for three months in the event of a significant drop in funding. This amount has been calculated at £100,000. Should there be a significant fall in funding, it would be necessary to consider how this would be replaced or how activities could be changed. At the balance sheet date the free reserves were £33,067 (2011: £152,987). The trustees are more than aware that the current deficit of £66,933 (2011: surplus of £52,987) is unsatisfactory and every effort is being pursued in order to secure unrestricted sources of income at this stage.

Principal funding sources

The principal funding sources for the charity are currently by way of grants, donations and sales of publications.

Investment policy and objectives

Aside from retaining a prudent amount in reserves each year most of the charity's funds are to be spent in the short term so there are few funds for long term investment. Having considered the options, the Trustees agreed to that income be kept in a high interest account to ensure the best interest rates with immediate access.

FUTURE DEVELOPMENTS

The charity plans to continue the activities outlined above in the forthcoming years subject to satisfactory funding arrangements. Plans are also being developed to work on a number of new projects.

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

ON BEHALF OF THE BOARD:



Alan White - Trustee

25 October 2012

**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
THE MEN'S HEALTH FORUM**

I report on the accounts for the year ended 31 March 2012 set out on pages ten to eighteen.

Respective responsibilities of trustees and examiner

The charity's trustees (who are also the directors for the purposes of company law) are responsible for the preparation of the accounts. The charity's trustees consider that an audit is not required for this year (under Section 144(2) of the Charities Act 2011 (the 2011 Act)) and that an independent examination is required. The charity's gross income exceeded £250,000 and I am qualified to undertake the examination by being a qualified member of FCCA.

Having satisfied myself that the charity is not subject to audit under company law and is eligible for independent examination, it is my responsibility to:

- examine the accounts under Section 145 of the 2011 Act
- to follow the procedures laid down in the General Directions given by the Charity Commission (under Section 145(5)(b) of the 2011 Act); and
- to state whether particular matters have come to my attention.

Basis of the independent examiner's report

My examination was carried out in accordance with the General Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently no opinion is given as to whether the accounts present a 'true and fair view' and the report is limited to those matters set out in the statements below.

Independent examiner's statement

In connection with my examination, no matter has come to my attention:

- (1) which gives me reasonable cause to believe that, in any material respect, the requirements
 - to keep accounting records in accordance with Section 386 and 387 of the Companies Act 2006; and
 - to prepare accounts which accord with the accounting records, comply with the accounting requirements of Sections 394 and 395 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities

have not been met; or

- (2) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.



Mr Anthony Lee Morris
FCCA
TM Accountants Limited
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25 October 2012

THE MEN'S HEALTH FORUM

STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31 MARCH 2012

	Notes	Unrestricted funds £	Restricted funds £	2012 Total funds £	2011 Total funds £
INCOMING RESOURCES					
Incoming resources from generated funds					
Voluntary income	2	51,272	146,204	197,476	241,680
Investment income	3	858	-	858	1,747
Incoming resources from charitable activities					
Policy and research	4	-	18,700	18,700	36,465
Communication and awareness raising		126,756	135,145	261,901	313,959
Total incoming resources		178,886	300,049	478,935	593,851
RESOURCES EXPENDED					
Costs of generating funds					
Costs of generating voluntary income	5	27,899	9,769	37,668	7,942
Charitable activities					
Policy and research	6	16,002	184,270	200,272	273,198
Communication and awareness raising		131,732	145,739	277,471	438,587
Governance costs	8	60,455	-	60,455	28,322
Total resources expended		236,088	339,778	575,866	748,049
NET INCOMING/(OUTGOING) RESOURCES					
before transfers		(57,202)	(39,729)	(96,931)	(154,198)
Gross transfers between funds	15	(67,887)	67,887	-	-
Net incoming/(outgoing) resources		(125,089)	28,158	(96,931)	(154,198)
RECONCILIATION OF FUNDS					
Total funds brought forward		158,156	97,901	256,057	410,255
TOTAL FUNDS CARRIED FORWARD		33,067	126,059	159,126	256,057

The notes form part of these financial statements

THE MEN'S HEALTH FORUM

BALANCE SHEET
AT 31 MARCH 2012

	Notes	Unrestricted funds £	Restricted funds £	2012 Total funds £	2011 Total funds £
FIXED ASSETS					
Tangible assets	12	-	-	-	5,169
CURRENT ASSETS					
Stocks		36,238	-	36,238	38,125
Debtors: amounts falling due within one year	13	43,854	12,500	56,354	40,472
Cash at bank		(1,099)	113,559	112,460	283,304
		<u>78,993</u>	<u>126,059</u>	<u>205,052</u>	<u>361,901</u>
CREDITORS					
Amounts falling due within one year	14	(45,926)	-	(45,926)	(111,013)
NET CURRENT ASSETS					
		<u>33,067</u>	<u>126,059</u>	<u>159,126</u>	<u>250,888</u>
TOTAL ASSETS LESS CURRENT LIABILITIES					
		<u>33,067</u>	<u>126,059</u>	<u>159,126</u>	<u>256,057</u>
NET ASSETS					
		<u>33,067</u>	<u>126,059</u>	<u>159,126</u>	<u>256,057</u>
FUNDS					
Unrestricted funds	15			33,067	158,156
Restricted funds				126,059	97,901
TOTAL FUNDS					
				<u>159,126</u>	<u>256,057</u>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 March 2012.

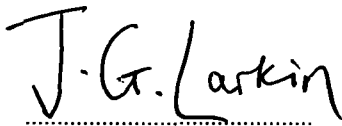
The members have not required the charitable company to obtain an audit of its financial statements for the year ended 31 March 2012 in accordance with Section 476 of the Companies Act 2006.

The trustees acknowledge their responsibilities for

- ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006 and
- preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

These financial statements have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small charitable companies and with the Financial Reporting Standard for Smaller Entities (effective April 2008).

The financial statements were approved by the Board of Trustees on 25 October 2012 and were signed on its behalf by:


John Larkin -Trustee

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2012

1. ACCOUNTING POLICIES

Accounting convention

The financial statements have been prepared under the historical cost convention, and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008), the Companies Act 2006 and the requirements of the Statement of Recommended Practice, Accounting and Reporting by Charities.

Incoming resources

All incoming resources are included on the Statement of Financial Activities when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy. Income is deferred only when the charity has to fulfil conditions before becoming entitled to the income or where the donor has specified that the income is to be expended in a future period.

Grants receivable including grants for the purchase of fixed assets are brought into account on receipt unless its receipt is certain in which case it is brought into account when the grant is notified.

Intangible income, which comprises donated services, is included in income at a valuation which is an estimate of the financial cost borne by the donor where such a cost is quantifiable and measurable. No income is recognised where there is no financial cost borne by a third party.

Resources expended

Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Resources expended include attributable VAT which cannot be recovered as the charity is not registered for VAT.

Cost of generating funds

Costs of generating funds incorporate the salaries, direct expenditure and overhead costs of the staff who undertake fundraising work.

Charitable activities

Charitable expenditure comprises those costs incurred on projects undertaken in pursuance of the charitable aims of the company.

Governance costs

Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity and include the audit fees and costs linked to the strategic management of the charity.

Allocation and apportionment of costs

Resources expended are allocated to the particular activity where the cost relates directly to that activity. Certain costs, which are attributable to more than one activity, are apportioned across cost categories on an appropriate basis.

Tangible fixed assets

Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Office equipment	- 25% on reducing balance
Website	- 33% on cost

Website planning costs are charged to the Statement of Financial Activities (SOFA) as incurred. Other website costs are capitalised as a fixed asset where they provide economic benefit by the provision of educational information to beneficiaries of the charity. Expenditure to maintain or operate the developed website is charged to the SOFA.

Stocks

Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

Taxation

The charity is exempt from corporation tax on its charitable activities.

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
FOR THE YEAR ENDED 31 MARCH 2012

1. ACCOUNTING POLICIES - continued

Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

Pension costs and other post-retirement benefits

The charity operates a defined contribution pension scheme. Contributions payable to the charity's pension scheme are charged to the Statement of Financial Activities (SOFA) in the period to which they relate.

Operating leases

Rentals payable under operating leases are charged to the Statement of Financial Activities (SOFA) on a straight line basis over the term of the lease.

2. VOLUNTARY INCOME

	2012	2011
	£	£
Grants	146,204	190,774
National Men's Health Week	2,500	5,000
Pfizer	-	2,500
Royal Mail	-	15,000
Food Standards Agency	-	10,000
Consultancy	-	7,958
Conference speaking	1,430	2,541
Sanofi Pasteur MSD	20,000	3,000
Donations £4,000 and under	27,342	4,907
	<u>197,476</u>	<u>241,680</u>

Grants received, included in the above, are as follows:

	2012	2011
	£	£
Department of Health Strategic Partner	146,204	140,774
Department of Health Financial Assistance Fund	-	50,000
	<u>146,204</u>	<u>190,774</u>

3. INVESTMENT INCOME

	2012	2011
	£	£
Bank interest receivable	<u>858</u>	<u>1,747</u>

4. INCOMING RESOURCES FROM CHARITABLE ACTIVITIES

	2012	2011
	£	£
Symposia	-	12,500
Grants	18,700	23,965
Mini manuals	126,756	115,895
National Men's Health Week	45,500	14,000
Grants	89,645	184,064
	<u>280,601</u>	<u>350,424</u>

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
FOR THE YEAR ENDED 31 MARCH 2012

4. INCOMING RESOURCES FROM CHARITABLE ACTIVITIES - continued

Grants received, included in the above, are as follows:

	2012	2011
	£	£
Football Foundation	-	3,965
NHS North West	-	10,000
Other	-	1,750
Department of Health	62,145	142,314
Roche	18,700	10,000
Sanofi Pasteur MSD	-	40,000
Weight Watchers	5,000	-
Pfizer	10,000	-
Bristol Myers Squibb	12,500	-
	<u>108,345</u>	<u>208,029</u>

5. COSTS OF GENERATING VOLUNTARY INCOME

	2012	2011
	£	£
Staff costs	34,232	-
Other fundraising costs	1,039	1,530
Marketing	2,397	6,412
	<u>37,668</u>	<u>7,942</u>

6. CHARITABLE ACTIVITIES COSTS

	Direct costs	Support costs (See note 7)	Totals
	£	£	£
Policy and research	168,270	32,002	200,272
Communication and awareness raising	218,190	59,281	277,471
	<u>386,460</u>	<u>91,283</u>	<u>477,743</u>

7. SUPPORT COSTS

	Management	Finance	Information technology	Totals
	£	£	£	£
Policy and research	30,954	79	969	32,002
Communication and awareness raising	56,137	236	2,908	59,281
	<u>87,091</u>	<u>315</u>	<u>3,877</u>	<u>91,283</u>

All support costs are allocated on the basis of staff time.

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
FOR THE YEAR ENDED 31 MARCH 2012

8. GOVERNANCE COSTS

	2012	2011
	£	£
Staff costs	35,324	5,609
Premises costs	1,738	2,989
Accountancy	2,400	-
Other costs	2,401	1,881
Auditors' remuneration	-	3,600
Accountants remuneration for non year end work	9,730	6,969
Travel costs	1,466	1,484
Meeting costs	3,314	2,830
Annual report	621	-
Communications	2,169	2,200
Depreciation	1,292	760
	<u>60,455</u>	<u>28,322</u>

9. NET INCOMING/(OUTGOING) RESOURCES

Net resources are stated after charging/(crediting):

	2012	2011
	£	£
Auditors' remuneration	-	3,600
Depreciation - owned assets	5,169	3,039
	<u>5,169</u>	<u>3,039</u>

10. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 March 2012 nor for the year ended 31 March 2011.

Trustees' Expenses

During the year expenses totalling £1,466 (2011: £1,484) were reimbursed to trustees.

11. STAFF COSTS

	2012	2011
	£	£
Wages and salaries	<u>309,555</u>	<u>351,235</u>

The average monthly number of employees during the year was as follows:

	2012	2011
Administration and finance	3	3
Project workers	7	7
	<u>10</u>	<u>10</u>

Wages and salaries include pension payments totalling £5,596 (2011: £7,441).

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
FOR THE YEAR ENDED 31 MARCH 2012

12. TANGIBLE FIXED ASSETS

	Office equipment £	Website £	Totals £
COST			
At 1 April 2011 and 31 March 2012	<u>34,328</u>	<u>30,600</u>	<u>64,928</u>
DEPRECIATION			
At 1 April 2011	29,159	30,600	59,759
Charge for year	5,169	-	5,169
At 31 March 2012	<u>34,328</u>	<u>30,600</u>	<u>64,928</u>
NET BOOK VALUE			
At 31 March 2012	<u>-</u>	<u>-</u>	<u>-</u>
At 31 March 2011	<u>5,169</u>	<u>-</u>	<u>5,169</u>

13. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2012 £	2011 £
Trade debtors	45,354	23,402
Other debtors	4,035	4,036
Grants due	-	12,186
Prepayments and accrued income	6,965	848
	<u>56,354</u>	<u>40,472</u>

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2012 £	2011 £
Trade creditors	31,272	92,928
Social security and other taxes	6,634	5,488
Other creditors	950	-
Accrued expenses	7,070	12,597
	<u>45,926</u>	<u>111,013</u>

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
FOR THE YEAR ENDED 31 MARCH 2012

15. MOVEMENT IN FUNDS

	At 1.4.11 £	Net movement in funds £	Transfers between funds £	At 31.3.12 £
Unrestricted funds				
General fund	158,156	(57,202)	(67,887)	33,067
Restricted funds				
Websites	5,650	(24,933)	19,283	-
Bowel Cancer	-	(3,505)	3,505	-
NHS North West	9,976	(10,259)	283	-
NMHDU Project	-	(15)	15	-
Department of Health Strategic Partner	-	(19)	19	-
Department of Health Information Project	42,275	24,284	-	66,559
Blue September	-	(5,568)	5,568	-
National Men's Health Week 2011	-	17,749	(17,749)	-
Cancer Round Table	40,000	9,500	-	49,500
Expert Symposium	-	10,000	-	10,000
National Men's Health Week 2012	-	(46,199)	46,199	-
Other	-	(995)	995	-
Fundraising costs	-	(9,769)	9,769	-
	97,901	(39,729)	67,887	126,059
TOTAL FUNDS	256,057	(96,931)	-	159,126

Net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	178,886	(236,088)	(57,202)
Restricted funds			
Department of Health Strategic Partner	146,204	(146,223)	(19)
Websites	-	(24,933)	(24,933)
NHS North West	-	(10,259)	(10,259)
Department of Health Information Project	62,145	(37,861)	24,284
Blue September	18,700	(24,268)	(5,568)
National Men's Health Week 2011	45,500	(27,751)	17,749
Cancer Round Table	12,500	(3,000)	9,500
Men only WeightWatchers pilots	5,000	(5,000)	-
Expert Symposium	10,000	-	10,000
Fundraising costs	-	(9,769)	(9,769)
Bowel Cancer	-	(3,505)	(3,505)
NMHDU Project	-	(15)	(15)
National Men's Health Week 2012	-	(46,199)	(46,199)
Other	-	(995)	(995)
	300,049	(339,778)	(39,729)
TOTAL FUNDS	478,935	(575,866)	(96,931)

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
FOR THE YEAR ENDED 31 MARCH 2012

15. MOVEMENT IN FUNDS - continued

Purposes of restricted funds:

Department of Health Strategic Partner: Grant funding to support the Department of Health, National Health Service and the third sector in tackling health inequalities from a gender perspective.

Websites: These funds provided the resources for the maintenance of the Forum's websites www.menshealthforum.org.uk and www.malehealth.co.uk.

Bowel Cancer: This grant is for a project to increase the level of participation by men in the national bowel cancer screening programme.

NHS North West: Funding for the provision of advice, support and research into the equality impacts of the activities and plans of the NHS North West Strategic Health Authority.

NMHDU Project: Funding for the publication of a guidance document for use by mental health practitioners.

National Men's Health Week: Funding towards the annual Men's Health Week which takes place in June.

Department of Health Information Project: Grant funding to develop new health information resources for use by NHS and other organisations to improve the health of men in socially disadvantaged groups.

Blue September - a new annual cancer awareness raising campaign focusing on prevention, symptoms and early diagnosis.

Cancer roundtable - a one-day event to improve understanding of the excess burden of cancer borne by men and a follow-on work programme to implement the findings.

Expert Symposium - a one-day event and follow-on publication to improve the adoption of digital services to improve the health of men and boys, organised in partnership with 2020health.

In the Trustees' opinion, there are sufficient resources held to enable each fund to be applied in accordance with the restrictions imposed by donors.

Transfers between funds

Transfers between unrestricted and restricted funds are made to cover the deficit of funds spent on individual restricted projects against grant income received.

16. RELATED PARTY DISCLOSURES

Dr I Banks is the President and a paid part-time employee of the Charity (Dr Banks was absent from the MHF on unpaid sabbatical leave returning in October 2011). During the year the Charity contracted with Dr Banks to write several Mini Manuals. The fee negotiated for this was £10,197 (2011: £13,177) and this was less than market rates for such work. The amount owing to Dr Banks at 31 March 2012 was £3,993 (2011: £4,986).

17. CAPITAL

The company is limited by guarantee and has no share capital. The members of the company have each undertaken to contribute £1 in the event of the company being wound up.

THE MEN'S HEALTH FORUM

DETAILED STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31 MARCH 2012

	2012 £	2011 £
INCOMING RESOURCES		
Voluntary income		
Grants	146,204	190,774
National Men's Health Week	2,500	5,000
Pfizer	-	2,500
Royal Mail	-	15,000
Food Standards Agency	-	10,000
Consultancy	-	7,958
Conference speaking	1,430	2,541
Sanofi Pasteur MSD	20,000	3,000
Donations £4,000 and under	27,342	4,907
	<u>197,476</u>	<u>241,680</u>
Investment income		
Bank interest receivable	858	1,747
Incoming resources from charitable activities		
Mini manuals	126,756	115,895
National Men's Health Week	45,500	14,000
Symposia	-	12,500
Grants	108,345	208,029
	<u>280,601</u>	<u>350,424</u>
Total incoming resources	478,935	593,851
RESOURCES EXPENDED		
Costs of generating voluntary income		
Staff costs	34,232	-
Other fundraising costs	1,039	1,530
Marketing	2,397	6,412
	<u>37,668</u>	<u>7,942</u>
Charitable activities		
Staff costs	183,519	251,493
Direct project costs	202,941	337,626
	<u>386,460</u>	<u>589,119</u>
Governance costs		
Staff costs	35,324	5,609
Premises costs	1,738	2,989
Accountancy	2,400	-
Other costs	2,401	1,881
Auditors' remuneration	-	3,600
Accountants remuneration for non year end work	9,730	6,969
Travel costs	1,466	1,484
Meeting costs	3,314	2,830
Annual report	621	-
Communications	2,169	2,200
Office equipment	1,292	760
	<u>60,455</u>	<u>28,322</u>
Support costs		

This page does not form part of the statutory financial statements

THE MEN'S HEALTH FORUM

DETAILED STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31 MARCH 2012

	2012	2011
	£	£
Management		
Staff costs	56,480	94,133
Communications	6,501	6,596
Postage and stationery	2,461	1,529
Sundries	2,853	1,012
Other staff costs	14,484	7,691
Premises costs	4,312	8,969
	<hr/>	<hr/>
	87,091	119,930
Finance		
Bank charges	315	457
Information technology		
Office equipment	3,877	2,279
	<hr/>	<hr/>
Total resources expended	575,866	748,049
	<hr/>	<hr/>
Net expenditure	<u>(96,931)</u>	<u>(154,198)</u>