

REGISTERED COMPANY NUMBER: 04142349
REGISTERED CHARITY NUMBER: 1087375

**REPORT OF THE TRUSTEES AND
FINANCIAL STATEMENTS For The Year Ended 31 MARCH 2010
FOR
THE MEN'S HEALTH FORUM**

Wallace Crooke
Chartered Accountants
& Registered Auditors
Wallace House
20 Birmingham Road
Walsall
West Midlands
WS1 2LT

THE MEN'S HEALTH FORUM
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for the Year Ended 31 MARCH 2010

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THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
for the Year Ended 31 MARCH 2010

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 2010. 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

Registered Charity number

1087375

Registered office

32-36 Loman Street
London
SE1 OEH

Trustees

Alan White

Jane Ursula DeVille-Almond

- resigned 11/2/2010

John Larkin

Gopa Mitra

Gillian Nineham

Lily Laila Abedipour

Paul Bradley

David Hudson

Frank Keating

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

Auditors

Wallace Crooke

Chartered Accountants

& Registered Auditors

Wallace House

20 Birmingham Road

Walsall

West Midlands

WS1 2LT

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 9 August 2004.

THE MEN'S HEALTH FORUM

REPORT OF THE TRUSTEES for the Year Ended 31 MARCH 2010

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.

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 eight 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 have conducted their own review of the major risks to which the charity is exposed and systems have been established to mitigate those identified. External risks to funding have led to the development of a strategic plan which allows for the diversification of funding sources and future activities. The post of Development Manager has enabled a greater focus on income generation, especially of unrestricted funds, from a wider variety of sources. Mini manuals have been identified as a major and growing source of unrestricted funding and were the subject of more intensive marketing and sales work. Income was also generated through an innovative men's health event held during National Men's Health Week in June 2009 as well as through the Week as a whole. New Department of Health multiple-year grant funding commencing April 2009 has also been secured. 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 2010

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 Forum's mission is to be an independent and authoritative advocate for male health and to tackle the inequalities affecting the health and wellbeing of boys and men in England and Wales.

We aim to be bold, innovative and authoritative. We seek to act with integrity, to be inclusive and to work co-operatively but to retain our independence at all times.

Our vision is a future in which all boys and men in England and Wales have an equal opportunity to attain the highest possible level of health and well-being. In this future:

- Health and health-related policies and services take fully into account the needs of boys and men through a gender-sensitive approach that also addresses wider inequalities.
- The health and wellbeing of boys and men are enhanced by supportive community, workplace, education, leisure and domestic environments.
- Boys and men are encouraged and enabled to take greater control over their own health and wellbeing.
- Men are fully engaged and involved as a stakeholder group in the development of health policy and services at all levels.

The Forum believes that:

- All boys and men are entitled to the highest possible level of health and well-being.
- The health of men and women should be improved by meeting the needs of both sexes through a gender-sensitive approach.
- Policies and services aimed at improving the health of men and boys should also take full account of inequalities, including those linked to social class, ethnicity, religion, age, disability and sexuality.
- Boys and men should be enabled and encouraged to take better care of their own health, to receive health advice and information appropriate to their experience and concerns, and to have access to equitable health services.

THE MEN'S HEALTH FORUM

REPORT OF THE TRUSTEES for the Year Ended 31 MARCH 2010

ACHIEVEMENT AND PERFORMANCE

Charitable activities

Following a review of its strategic direction in 2009/10, the MHF set itself a new overarching goal for the period to 2012 - to become 'The Centre of Excellence for Policy and Practice in Men's Health'.

This was understood to mean that MHF will 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 stated goal of becoming the Centre of Excellence, we adopted three broad strategic objectives:

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

The new goal and objectives replaced and refined the 10 organisational and 10 policy goals previously set for the five-year period up to 2012. It was felt that these 20 goals, while all important and commendable, were too diverse, lacked a common coherence and overstretched the capacity of the organisation to deliver them. Moreover, it was recognised that some of the goals had already been achieved, in full or in large part, and had contributed to the growing success of the organisation.

Our work during 2009/10 to achieve the three new 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 10 other voluntary organisations, was appointed a Strategic Partner of the Department of Health. This was recognition of the importance the Department attached to MHF and to men's health as an issue and enabled us to exert a far higher level of influence on officials and ministers. The Strategic Partnership role also required us to develop our work with a wider range of voluntary organisations at the national, regional and local levels. We began to work collaboratively with the other Partners, including on a national conference to discuss the implications of the Marmot Review on health inequalities for the voluntary sector and on a conference on men's health specifically for the voluntary sector in eastern England, and we started to develop a model for engaging local voluntary organisations in men's health in L.B. Greenwich.

MHF submitted evidence to the Marmot Review and was instrumental in ensuring the Department of Health organised a seminar with Professor Marmot to discuss the implications for the Review of the cross-cutting equality issues, including gender. The Marmot Review was published in February 2010 and was disappointingly weak on gender issues and MHF will therefore continue to work to ensure that gender inequality is taken into proper account in policy on health inequalities. MHF also presented at a Department of Health stakeholder symposium specifically on gender equality in June.

THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
for the Year Ended 31 MARCH 2010

ACHIEVEMENT AND PERFORMANCE

Charitable activities

MHF joined a new Commission established by ACEVO (Association of Chief Executives of Voluntary Organisations) whose objective is 'to explore the third sector's potential role in public health in this country, and the steps that need to be taken to realise that potential' with the aim of influencing the new government. It will report in 2010/11. The Chief Executive was also elected to the National Assembly of National Voices, a coalition of more than 200 national health and social care organisations that aims to ensure a stronger voice for those who come into contact with the NHS and care services and the voluntary organisations that help them.

Our membership of NHS North West's equality stakeholder reference group was renewed for a second year and it is noteworthy that we were the only organisation on that group not based on the region.

MHF continued to have an active programme of engagement with MPs from all the major parties. The All Party Parliamentary Group on Men's Health, for which we provide the secretariat, met several times during the year and men's use of primary care and men, physical activity and sport were among the topics discussed. We also worked with MPs to get issues raised through parliamentary questions and Early Day Motions.

In November 2009, MHF's Chief Executive chaired an event at the House of Lords to launch a report by the Coalition on Men and Boys which aimed to put men's issues on the public policy agenda. The report, *Man Made: Men, masculinities and equality in public policy*, covered health, work, fatherhood, education and violence, as well as the connections between these issues. Nick Clegg MP and Danny Alexander MP spoke at the event which was also backed by the Equality and Human Rights Commission.

As well as these overarching activities, we also decided during the strategic review 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 the following five key and specific areas of health policy:

- Cancer
- The workplace
- Physical activity
- Mental health
- Access to primary care.

Our work in each of these areas is set out below:

Cancer. During the year, MHF continued to contribute to the work of the National Cancer Equalities Initiative (NCEI). NCEI held a meeting on men and cancer at LeedsMet University, at which we were represented, to contribute to the delivery of the Cancer Reform Strategy. An influential report on the excess burden of cancer in men was published by the National Cancer Intelligence Network, in partnership with LeedsMet University, Cancer Research UK and MHF. This generated significant media coverage during National Men's Health Week (NMHW) 2009. We continued to work on our own Department of Health-funded project to improve men's uptake of the national bowel cancer screening programme and to act as a consultant for the Football Foundation's Ahead of the Game project which aims to improve men's awareness of bowel, prostate and lung cancers.

The workplace. This issue was the focus of National Men's Health Week 2008. The main focus of our work in 2009/10 was to make a submission to the Independent NHS Health and Well-Being Review led by Steve Boorman. The final report, published in November 2009, contained a recommendation that an NHS staff health and well-being services should be responsive to issues such as a range of diversity issues, including gender. Significantly, we were invited to join the Department of Health's Coalition for Better Health's Health and Work leadership group. The Coalition aims to bring together organisations with a significant part to play in tackling the major current health and wellbeing challenges with an initial focus on alcohol, work and health, obesity and physical activity. We also completed a short project on the nutritional health of construction workers for the Food Standards Agency.

Physical activity. Improving the physical activity levels of men was adopted as our theme for NMHW 2010. A significant level of activity was dedicated during 2009/10 to developing the activities for the Week and laying the basis for the policy work to be published in June 2010.

THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
for the Year Ended 31 MARCH 2010

ACHIEVEMENT AND PERFORMANCE

Charitable activities

Mental health. We were commissioned by the National Mental Health Development Unit (NMHDU) to produce a scoping study of key issues in men's mental health. This was completed and published in early 2010 and led to a further commission from NMHDU to work with the mental health charity MIND to produce guidance for practitioners on working with men on mental health issues. This guidance will take account of the findings of our project on the mental health of black and minority ethnic men (which was also completed during the year) and of a consultative conference we held in March 2010 at Reading University in association with MIND and the Charlie Waller Institute. A response was made to the New Horizons consultation on the Department of Health's future mental health policy. In addition to our appointment to the National Mental Health Equality Board convened by NMHDU we joined the new Ministerial Advisory Group for Equality in Mental Health.

Access to primary care. This issue was the focus of NMHW 2009 and new policy on this issue was published during the Week. The issues were discussed at a meeting of the All Party Group on Men's Health in July and further explored at a symposium held jointly with the Royal Society for Public Health in November. NMHW 2009 was judged to have been a great success. Our evaluation showed that 82% of local participants and 75% of partner organisations wanted to be involved in NMHW 2010; 91% of local registrants and 100% of partners would recommend the Mini Manual produced for the Week to colleagues and/or order more; 75% of partners thought Week was 'good value for money'.

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.

A major focus of activity during 2009/10 was transforming our two websites to bring them up-to-date in terms of design and functionality. This process proved more complex and time-consuming than originally envisaged but the two new sites - www.menshealthforum.org.uk (the site aimed mainly at professionals) and www.malehealth.co.uk (aimed mainly at 'the man in the street') - were successfully launched in early 2010. We launched, in parallel, a new eBulletin of news and information which links directly to the menshealthforum.org.uk site. The MHF also has a news clippings service available online with links via email and Twitter. Together, these services enabled the Forum to provide a flow of information to organisations and individuals with an interest in men's health. However, more work is needed to provide a coherent, up-to-date and accessible source of key statistics on 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. Several new titles were launched during the year, including the Man Manual (for NMHW 2009), Yorkshire Man and Fit for Farming. The Yorkshire Man mini manual received a very positive independent evaluation from LeedsMet University and other manuals also generated positive feedback from the professionals that used them in their work with men. The first mini manual was produced in 2003 and in 2009/10 we reached the milestone of publishing 1m copies spread over 100 different titles.

In April 2009, we began a three-year project, funded by the Department of Health, to produce the next generation of health information resources for men. LeedsMet University, working in partnership with The Hub social marketing agency, were commissioned to undertake the first, background research phase of the project.

MHF began work on its Department of Health-funded project to develop the men's health skills and knowledge base of the NHS workforce. Solutions for Public Health was commissioned as consultants to the project and it was decided to adopt a twin-track approach: developing separate but complementary training packages for managers/commissioners and for front-line public health staff (specifically, health trainers). Pilot training events for each group were planned (to be delivered in 2010/11) and an independent evaluator appointed.

MHF also ran a separate training event specifically for NMHW partner organisations and some of the other Strategic Partner organisations.

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 2010

ACHIEVEMENT AND PERFORMANCE

Charitable activities

In order to achieve its primary goal of being a 'Centre of Excellence in Policy and Practice', MHF must ensure that it is 'fit for purpose' and is able to deliver on its identified objectives. We identified seven key strategic areas which need to be addressed within this objective in order to achieve this:

Staffing/HR. All staff continued to be regularly supervised and to have an annual appraisal. There are staff meetings, normally monthly, and smaller groups of staff meet frequently to discuss specific projects. During the year, a 'hot desk' was established in the office to make it easier for staff to spend time there around meetings. The office was relocated within the Loman Street building to a larger space with more natural lighting. There are also social events for all staff at least twice a year. The commitment of staff remains very high. Staff with particular needs - such as childcare responsibilities or study commitments - have been permitted to work flexibly. The organisation is concerned about the heavy workloads of several staff and has made a commitment to address this problem in 2010/11. We have been fortunate to have the services of a long-term volunteer (Mustafa Ibrahim) and are considering whether we can make effective use of more volunteers or interns.

Knowledge management. We have identified that staff require access to a client relationship database and an online library of relevant research and reports. The new websites, launched during the year, will provide the platform for these developments.

Governance and ethics. Following a regular review of the Board's size, skills and succession issues, it was agreed to recruit four new trustees. This will happen during 2010/11. It was also identified that the MHF needed to update its governing document, its code of conduct and trustee job descriptions. Work began on this during the year and will be finalised later in 2010. The ethical policy was revised following extensive discussions with staff and trustees. Further work is needed to ensure that diversity is mainstreamed in all areas of activity.

Operational Management. MHF believes that its operational management practice should adhere to and reflect best practice in terms of the management of a third sector organisation and that senior management staff will be equipped to manage for excellence. While we believe that our current management practices are robust, there remains room for improvement and this will continue to be addressed in the period up to 2012.

Quality Assurance. MHF wishes to ensure that its activities and services meet both internal and external good practice service standards including, where appropriate, achieving external accreditation. Wherever possible, we evaluate every aspect of our work, using independent external evaluators when funding permits. We began work to comply with the Department of Health's Information Accreditation Scheme, launched during 2009/10. It remains our longer-term objective to seek PQASSO (the Practical Quality Assurance System for Small Organisations) accreditation.

Business Development. Matthew Maycock returned to work at MHF in Early 2010 which meant that the Business Development Manager post was effectively full-time (Matthew job-shared this post with Kristin McCarthy). However, our business development work has been largely confined to NMHW and mini manuals and we continue to face the challenge of creating the capacity to take advantage of a greater range of opportunities. These will include fully exploiting our project outcomes from an income generation as well as a health promotion point of view.

Communications. Our external communications work continued to improve, including through the new websites, eBulletin, Twitter and news clippings services. We responded to a large number of media enquiries throughout the year but lack of capacity limited our ability to do significant pro-active media work. However, we commissioned a PR company (Berkeley PR) to manage our NMHW 2009 media campaign and this generated considerable coverage. We plan to develop a strategic communications plan, a programme of campaigning activity for each business year, and how best to disseminate the outcomes of each of our projects.

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 £176,888 (2009: £132,589). The trustees are satisfied with the current surplus of £76,888 (2009: £32,589) taking into account the increasing challenge for the organisation to secure unrestricted sources of income from funders.

THE MEN'S HEALTH FORUM
REPORT OF THE TRUSTEES
for the Year Ended 31 MARCH 2010

FINANCIAL REVIEW

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.

STATEMENT OF TRUSTEES RESPONSIBILITIES

The trustees (who are also the directors of The Men's Health Forum for the purposes of company law) are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and 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 those financial statements, the trustees are required to

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charity SORP;
- make judgements and estimates that are reasonable and prudent;
- 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 which disclose with reasonable accuracy at any time the financial position of the charitable company and to 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.

STATEMENT AS TO DISCLOSURE OF INFORMATION TO AUDITORS

So far as the trustees are aware, there is no relevant information (as defined by Section 418 of the Companies Act 2006) of which the charitable company's auditors are unaware, and each trustee has taken all the steps that they ought to have taken as a trustee in order to make them aware of any audit information and to establish that the charitable company's auditors are aware of that information.

AUDITORS

The auditors, Wallace Crooke, will be proposed for re-appointment at the forthcoming Annual General Meeting.

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

23 July 2010

REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF THE MEN'S HEALTH FORUM

We have audited the financial statements of The Men's Health Forum for the year ended 31 March 2010 on pages eleven to twenty one. The financial statements have been prepared under the accounting policies set out therein and the requirements of the Financial Reporting Standard for Smaller Entities (effective April 2008).

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 trustees those matters we are required to state to them in an auditors' 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 trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditors

The trustees' (who are also the directors of the charitable company for the purposes of company law) responsibilities for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice) and for being satisfied that the financial statements give a true and fair view are set out on page eight.

Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and International Standards on Auditing (UK and Ireland).

We report to you our opinion as to whether the financial statements give a true and fair view, are properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice and are prepared in accordance with the Companies Act 2006. We also report to you whether, in our opinion the information given in the Report of the Trustees is consistent with those financial statements.

In addition, we report to you if, in our opinion, the charitable company has not kept adequate accounting records, if the charitable company's financial statements are not in agreement with the accounting records and returns, if we have not received all the information and explanations we require for our audit, or if certain disclosures of trustees' remuneration specified by law are not made.

We read the Report of the Trustees and consider the implications for our report if we become aware of any apparent misstatements within it.

Basis of audit opinion

We conducted our audit in accordance with International Standards on Auditing (UK and Ireland) issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgements made by the trustees in the preparation of the financial statements, and of whether the accounting policies are appropriate to the charitable company's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

**REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF
THE MEN'S HEALTH FORUM**

Opinion

In our opinion:

- the financial statements give a true and fair view of the state of the charitable company's affairs as at 31 March 2010 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- the financial statements have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice applicable to Smaller Entities;
- the financial statements have been prepared in accordance with the Companies Act 2006; and
- the information given in the Report of the Trustees is consistent with the financial statements.

Mr Tony Morris, FCCA (Senior Statutory Auditor)
for and on behalf of Wallace Crooke
Chartered Accountants
& Registered Auditors
Wallace House
20 Birmingham Road
Walsall
West Midlands
WS1 2LT

23 July 2010

THE MEN'S HEALTH FORUM

**STATEMENT OF FINANCIAL ACTIVITIES
for the Year Ended 31 MARCH 2010**

	Notes	Unrestricted funds £	Restricted funds £	2010 Total funds £	2009 Total funds £
INCOMING RESOURCES					
Incoming resources from generated funds					
Voluntary income	2	117,516	151,580	269,096	206,680
Investment income	3	1,463	-	1,463	7,161
Incoming resources from charitable activities					
Policy and research	4	-	114,656	114,656	210,329
Communication and awareness raising		172,684	379,177	551,861	420,039
Total incoming resources		<u>291,663</u>	<u>645,413</u>	<u>937,076</u>	<u>844,209</u>
 RESOURCES EXPENDED					
Costs of generating funds					
Costs of generating voluntary income	5	5,219	-	5,219	40,849
Charitable activities					
Policy and research	6	7,160	269,532	276,692	251,195
Communication and awareness raising		207,464	306,039	513,503	371,841
Governance costs	8	25,476	-	25,476	71,987
Total resources expended		<u>245,319</u>	<u>575,571</u>	<u>820,890</u>	<u>735,872</u>
 NET INCOMING RESOURCES before transfers					
		46,344	69,842	116,186	108,337
Gross transfers between funds	15	(4,781)	4,781	-	-
Net incoming/(outgoing) resources		41,563	74,623	116,186	108,337
 RECONCILIATION OF FUNDS					
Total funds brought forward		143,533	150,536	294,069	185,732
TOTAL FUNDS CARRIED FORWARD		<u><u>185,096</u></u>	<u><u>225,159</u></u>	<u><u>410,255</u></u>	<u><u>294,069</u></u>

The notes form part of these financial statements

THE MEN'S HEALTH FORUM

**BALANCE SHEET
AT 31 MARCH 2010**

	Notes	Unrestricted funds £	Restricted funds £	2010 Total funds £	2009 Total funds £
FIXED ASSETS					
Tangible assets	12	8,208	-	8,208	10,944
CURRENT ASSETS					
Stocks		26,440	-	26,440	28,170
Debtors: amounts falling due within one year	13	38,950	171,100	210,050	70,091
Cash at bank		216,507	97,519	314,026	442,676
		<u>281,897</u>	<u>268,619</u>	<u>550,516</u>	<u>540,937</u>
CREDITORS					
Amounts falling due within one year	14	(105,009)	(43,460)	(148,469)	(257,812)
		<u>176,888</u>	<u>225,159</u>	<u>402,047</u>	<u>283,125</u>
NET CURRENT ASSETS					
		<u>176,888</u>	<u>225,159</u>	<u>402,047</u>	<u>283,125</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		185,096	225,159	410,255	294,069
NET ASSETS		<u>185,096</u>	<u>225,159</u>	<u>410,255</u>	<u>294,069</u>
FUNDS					
	15			185,096	143,533
Unrestricted funds				225,159	150,536
Restricted funds				<u>410,255</u>	<u>294,069</u>
TOTAL FUNDS				<u>410,255</u>	<u>294,069</u>

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 23 July 2010 and were signed on its behalf by:

John Larkin -Trustee

The notes form part of these financial statements

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS for the Year Ended 31 MARCH 2010

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 2010

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

	2010	2009
	£	£
Grants	151,580	65,000
Memberships	-	60
National Men's Health Week	47,910	94,000
Pfizer	10,000	25,000
Roche Diagnostics Ltd	5,000	4,500
Developing Patient Partnerships	-	10,000
Royal Mail	25,000	-
International Planned Parenthood Federation	5,000	-
Prostate Cancer Research Foundation	7,000	-
Food & Drink Federation	3,000	-
NHS Choices	5,000	-
Donations £2,000 and under	9,606	8,120
	<u>269,096</u>	<u>206,680</u>

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

	2010	2009
	£	£
Department of Health Central administration costs	-	65,000
Department of Health Strategic Partner	151,580	-
	<u>151,580</u>	<u>65,000</u>

3. INVESTMENT INCOME

	2010	2009
	£	£
Bank interest receivable	<u>1,463</u>	<u>7,161</u>

THE MEN'S HEALTH FORUM

**NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
for the Year Ended 31 MARCH 2010**

4. INCOMING RESOURCES FROM CHARITABLE ACTIVITIES

		2010	2009
	Activity	£	£
Grants	Policy and research	114,656	210,270
Grants £2,000 and under	Policy and research	-	59
Mini manuals	Communication and awareness raising	172,684	223,572
National Men's Health Week	Communication and awareness raising	9,000	44,175
Grants	Communication and awareness raising	370,177	152,000
Grants £2,000 and under	Communication and awareness raising	-	292
		<u>666,517</u>	<u>630,368</u>

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

		2010	2009
		£	£
Department of Health BME Project		-	46,000
Department of Health Bowel Cancer		45,000	45,000
Department of Health National Men's Health Week		150,000	107,000
Department of Health Men and Work Symposium		-	20,000
Pfizer Men and Pharmacy		-	5,000
NHS Bowel Cancer		-	18,000
Roche Bowel Cancer		-	5,000
Football Foundation BME		-	3,666
Atos Origin Men and Work Symposium		-	5,000
HWWB Men and Work Symposium		-	3,000
Food Standards Agency Men and Salt		-	2,700
Football Foundation Ahead of the Game		6,891	1,607
NHS North West		12,765	10,297
FSA Construction Workers		-	15,000
EHRC Men's Coalition		-	30,000
Developing Patient Partnerships Websites		-	45,000
Gender Equality Scoping Study		20,000	-
NMHDU		30,000	-
Pfizer Websites		6,000	-
Department of Health NHS Workforce Development Project		104,100	-
Department of Health Improving the Health of men		103,977	-
HMPS Prison Project		6,100	-
		<u>484,833</u>	<u>362,270</u>

5. COSTS OF GENERATING VOLUNTARY INCOME

		2010	2009
		£	£
Staff costs		-	38,592
Sundries		203	174
Membership costs		1,799	2,083
Marketing		3,217	-
		<u>5,219</u>	<u>40,849</u>

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
for the Year Ended 31 MARCH 2010

6. CHARITABLE ACTIVITIES COSTS

	Direct costs	Support costs (See note 7)	Totals
	£	£	£
Policy and research	230,635	46,057	276,692
Communication and awareness raising	416,551	96,952	513,503
	<u>647,186</u>	<u>143,009</u>	<u>790,195</u>

7. SUPPORT COSTS

	Management	Finance	Information technology	Human resources	Totals
	£	£	£	£	£
Policy and research	43,012	102	326	2,617	46,057
Communication and awareness raising	87,818	306	977	7,851	96,952
	<u>130,830</u>	<u>408</u>	<u>1,303</u>	<u>10,468</u>	<u>143,009</u>

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

8. GOVERNANCE COSTS

	2010	2009
	£	£
Staff costs	-	48,532
Premises costs	3,181	3,738
Other costs	606	1,358
Auditors' remuneration	3,525	3,450
Auditors' remuneration for non-audit work	7,617	6,510
Travel costs	6,096	1,846
Meeting costs	419	90
Annual report	1,659	3,281
Communications	1,939	2,270
Depreciation	434	912
	<u>25,476</u>	<u>71,987</u>

9. NET INCOMING/(OUTGOING) RESOURCES

Net resources are stated after charging/(crediting):

	2010	2009
	£	£
Auditors' remuneration	3,525	3,450
Depreciation - owned assets	<u>2,736</u>	<u>3,648</u>

THE MEN'S HEALTH FORUM

**NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
for the Year Ended 31 MARCH 2010**

10. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 March 2010 nor for the year ended 31 March 2009.

Trustees' Expenses

During the year expenses totalling £1,484 (2009: £881) were reimbursed to trustees.

11. STAFF COSTS

	2010 £	2009 £
Wages and salaries	<u>338,781</u>	<u>321,884</u>

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

	2010	2009
Administration and finance	3	3
Project workers	7	7
	<u>10</u>	<u>10</u>

Wages and salaries include pension payments totalling £7,238 (2009: £7,152).

12. TANGIBLE FIXED ASSETS

	Office equipment £	Website £	Totals £
COST			
At 1 April 2009 and 31 March 2010	<u>34,328</u>	<u>30,600</u>	<u>64,928</u>
DEPRECIATION			
At 1 April 2009	23,384	30,600	53,984
Charge for year	<u>2,736</u>	<u>-</u>	<u>2,736</u>
At 31 March 2010	<u>26,120</u>	<u>30,600</u>	<u>56,720</u>
NET BOOK VALUE			
At 31 March 2010	<u>8,208</u>	<u>-</u>	<u>8,208</u>
At 31 March 2009	<u>10,944</u>	<u>-</u>	<u>10,944</u>

13. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2010 £	2009 £
Trade debtors	54,014	65,704
Other debtors	4,036	1,998
Grants due	150,000	-
Prepayments and accrued income	2,000	2,389
	<u>210,050</u>	<u>70,091</u>

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
for the Year Ended 31 MARCH 2010

14. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2010	2009
	£	£
Trade creditors	94,452	39,274
Social security and other taxes	19,309	7,782
Other creditors	1,722	1,631
Accrued expenses	32,986	30,148
Deferred income	-	178,977
	<u>148,469</u>	<u>257,812</u>

15. MOVEMENT IN FUNDS

	At 1/4/09	Net movement in funds	Transfers between funds	At 31/3/10
	£	£	£	£
Unrestricted funds				
General fund	143,533	46,344	(4,781)	185,096
Restricted funds				
Websites	22,999	(13,394)	-	9,605
National Men's Health Week 2009	22,904	(22,904)	-	-
Pharmacy project	3,300	(4,342)	1,042	-
Bowel cancer	32,159	1,042	-	33,201
BME project	45,875	(36,433)	-	9,442
Men and salt	1,496	(1,496)	-	-
Sports symposium	1,040	(4,779)	3,739	-
Men and work symposium	3,000	(3,000)	-	-
Men's coalition	7,704	(7,704)	-	-
Football Foundation - Ahead of the Game	1,351	(1,351)	-	-
NHS North West	7,243	4,757	-	12,000
FSA construction workers	1,465	(1,465)	-	-
NMHDU Project	-	21,033	-	21,033
National Men's Health Week 2010	-	9,000	-	9,000
Department of Health NHS Workforce Development Project	-	61,262	-	61,262
Department of Health Strategic Partner	-	30,442	-	30,442
Department of Health Information Project	-	35,700	-	35,700
Prison Project	-	3,474	-	3,474
	<u>150,536</u>	<u>69,842</u>	<u>4,781</u>	<u>225,159</u>
TOTAL FUNDS	<u>294,069</u>	<u>116,186</u>	<u>-</u>	<u>410,255</u>

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
for the Year Ended 31 MARCH 2010

15. MOVEMENT IN FUNDS - continued

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

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	291,663	(245,319)	46,344
Restricted funds			
Department of Health Strategic Partner	151,580	(121,138)	30,442
Websites	6,000	(19,394)	(13,394)
Bowel cancer	45,000	(43,958)	1,042
Football Foundation - Ahead of the Game	6,891	(8,242)	(1,351)
NHS North West	12,765	(8,008)	4,757
Scoping Study	20,000	(20,000)	-
NMHDU Project	30,000	(8,967)	21,033
National Men's Health Week 2010	159,000	(150,000)	9,000
Department of Health NHS Workforce Development Project	104,100	(42,838)	61,262
Department of Health Information Project	103,977	(68,277)	35,700
Prison Project	6,100	(2,626)	3,474
National Men's Health Week 2009	-	(22,904)	(22,904)
Pharmacy project	-	(4,342)	(4,342)
BME project	-	(36,433)	(36,433)
Men and salt	-	(1,496)	(1,496)
Sports symposium	-	(4,779)	(4,779)
Men and work symposium	-	(3,000)	(3,000)
Men's coalition	-	(7,704)	(7,704)
FSA construction workers	-	(1,465)	(1,465)
	<u>645,413</u>	<u>(575,571)</u>	<u>69,842</u>
TOTAL FUNDS	<u>937,076</u>	<u>(820,890)</u>	<u>116,186</u>

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED for the Year Ended 31 MARCH 2010

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.

Football Foundation - Ahead of the Game: Funding towards the provision of support to the Football Foundation in respect of their Cancer and Football 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.

Scoping Study: Grant funding to undertake a scoping study and expert symposium to explore the main issues in men's mental health.

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.

NHS Workforce Development Project: Department of Health funding to improve the capacity and capability of the health workforce to engage with men.

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.

Prison Project: Funding to support and assist with the development of a men's health information resource for use in prisons.

Pharmacy Project: This grant is for a project to improve men's use of community pharmacy services.

BME Project: Funding for a project to develop resources to improve the mental health and use of services by black and minority ethnic men.

Men & Salt: Funding for a project to pilot a workplace based intervention for reducing men's salt intake.

Sports Symposium: Funding for an expert symposium to explore ways of improving male health and the quality of life in sports stadium neighbourhoods.

Men & Work Symposium: Funding for an expert symposium to explore the use of the workplace as a setting for effective health improvement work with men.

Men's Coalition: Funding for the establishment of a coalition of various organisations to address a wide range of issues concerning men's health and behaviour, including to launch and disseminate the new report *Man Made: The place of men and masculinity's in public policy*.

FSA Construction Workers: A grant to assist the Food Standards Agency in raising awareness amongst male construction workers of the need for lifestyle and diet improvements.

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

THE MEN'S HEALTH FORUM

NOTES TO THE FINANCIAL STATEMENTS - CONTINUED
for the Year Ended 31 MARCH 2010

15. MOVEMENT IN FUNDS - continued

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. During the year the Charity contracted with Dr Banks to write several Mini Manuals. The fee negotiated for this was £33,589 (2009: £35,879) and this was less than market rates for such work. The amount owing to Dr Banks at 31 March 2010 was £15,644 (2009: £9,472).

17. CAPITAL

The company has no share capital being limited by guarantee. There are eight members of the company each of whom has 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 2010

	2010 £	2009 £
INCOMING RESOURCES		
Voluntary income		
Grants	151,580	65,000
Memberships	-	60
National Men's Health Week	47,910	94,000
Pfizer	10,000	25,000
Roche Diagnostics Ltd	5,000	4,500
Developing Patient Partnerships	-	10,000
Royal Mail	25,000	-
International Planned Parenthood Federation	5,000	-
Prostate Cancer Research Foundation	7,000	-
Food & Drink Federation	3,000	-
NHS Choices	5,000	-
Donations £2,000 and under	9,606	8,120
	<hr/>	<hr/>
	269,096	206,680
Investment income		
Bank interest receivable	1,463	7,161
Incoming resources from charitable activities		
Mini manuals	172,684	223,572
National Men's Health Week	9,000	44,175
Grants	484,833	362,270
Grants £2,000 and under	-	351
	<hr/>	<hr/>
	666,517	630,368
Total incoming resources	937,076	844,209
RESOURCES EXPENDED		
Costs of generating voluntary income		
Staff costs	-	38,592
Sundries	203	174
Membership costs	1,799	2,083
Marketing	3,217	-
	<hr/>	<hr/>
	5,219	40,849
Charitable activities		
Staff costs	224,413	108,863
Direct project costs	422,773	351,365
	<hr/>	<hr/>
	647,186	460,228

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 2010

	2010 £	2009 £
Governance costs		
Staff costs	-	48,532
Premises costs	3,181	3,738
Other costs	606	1,358
Auditors' remuneration	3,525	3,450
Auditors' remuneration for non-audit work	7,617	6,510
Travel costs	6,096	1,846
Meeting costs	419	90
Annual report	1,659	3,281
Communications	1,939	2,270
Office equipment	434	912
	<hr/>	<hr/>
	25,476	71,987
Support costs		
Management		
Staff costs	114,368	125,897
Communications	5,820	6,813
Postage and stationery	977	1,568
Sundries	121	585
Premises costs	9,544	11,217
	<hr/>	<hr/>
	130,830	146,080
Finance		
Bank charges	408	347
Information technology		
Office equipment	1,303	2,736
Human resources		
Other staff costs	10,468	13,645
	<hr/>	<hr/>
Total resources expended	820,890	735,872
	<hr/>	<hr/>
Net income	116,186	108,337
	<hr/> <hr/>	<hr/> <hr/>

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