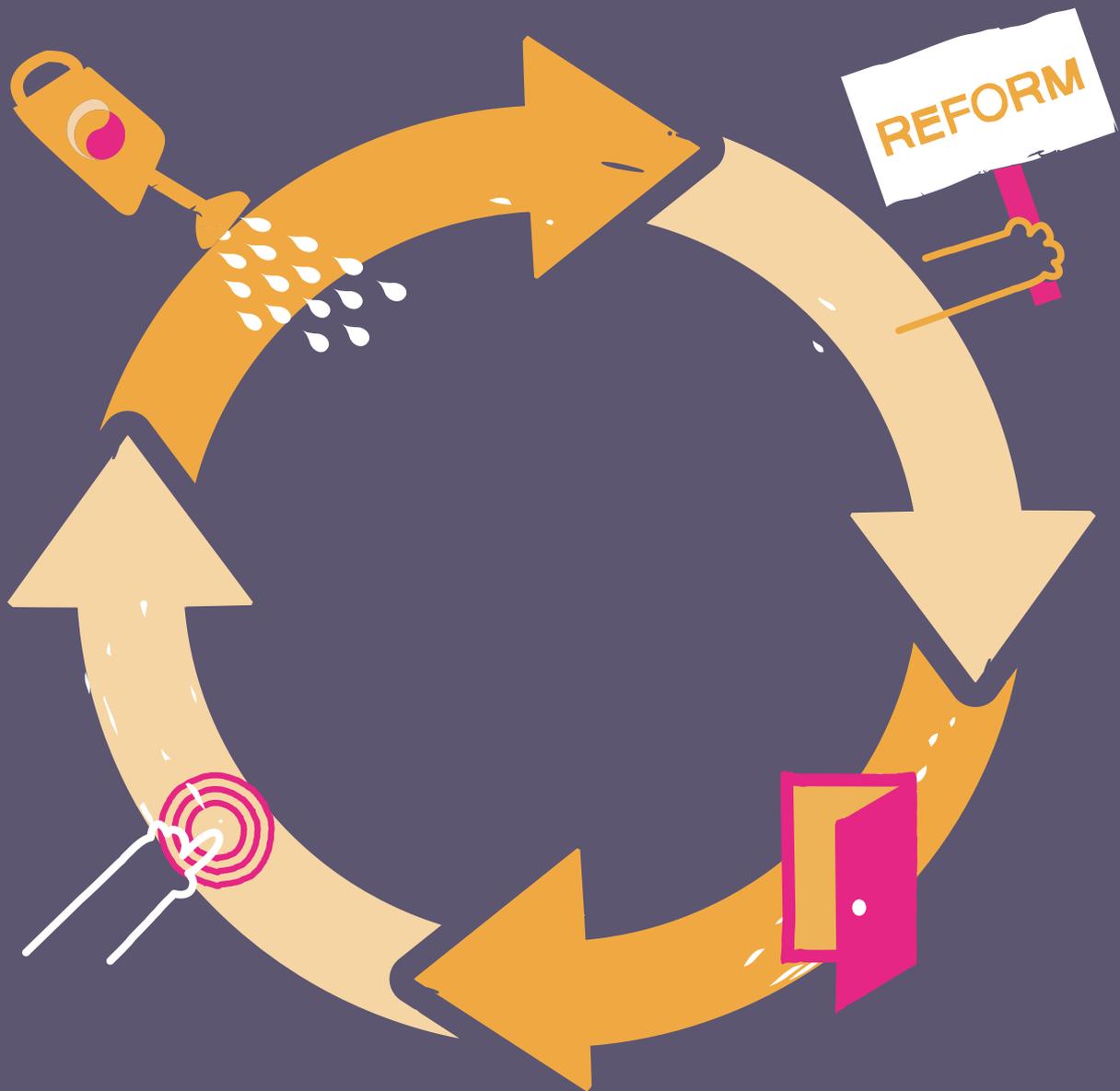


ANNUAL REPORT



Mental
Health
Reform

2021



+ DIRECTORS
REPORT
& FINANCIAL
STATEMENTS

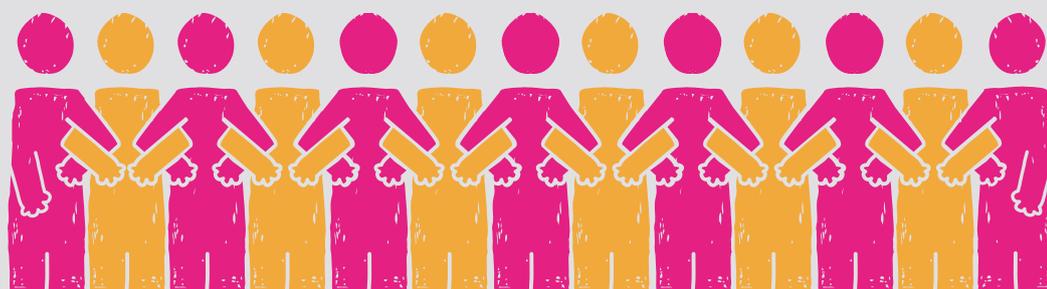
MEMBERS

Governing Members

- * 3Ts
- * A Lust For Life
- * AHEAD
- * AkiDwA
- * Alcohol Action Ireland
- * ALONE
- * The Alzheimer Society of Ireland
- * Amnesty International Ireland
- * Barnardos
- * Bodywhys
- * Cairde
- * Children's Rights Alliance
- * Chime
- * Cork Mental Health Foundation
- * Disability Federation of Ireland
- * Donegal Mental Health Advocacy Services
- * Dual Diagnosis Ireland
- * Dublin Simon Community
- * Dyspraxia/ DCD Ireland
- * Exchange House
- * Fighting Blindness
- * Finglas Addiction Support Team (FAST)
- * First Fortnight
- * Focus Ireland
- * Gateway Mental Health Association
- * GROW
- * HADD-ADHD Ireland
- * Hail – Housing Association of Integrated Living
- * Helplink Mental Health
- * HUGG
- * Huntington's Disease Association of Ireland
- * Irish Penal Reform Trust
- * Irish Society for the Prevention of Cruelty to Children (ISPCC)
- * Jigsaw
- * Mental Health Ireland
- * Merchants Quay Ireland
- * MyMind
- * National Women's Council
- * Pavee Point – Traveller and Roma Centre
- * Peer Advocacy in Mental Health
- * Peter McVerry Trust
- * Pieta
- * The Rehab Group
- * Respond! Housing Association
- * Samaritans
- * Shine
- * Slí Eile Housing Association
- * Smashing Times Theatre and Film Company
- * SpunOut
- * Suicide or Survive
- * Threshold Training Network
- * Transformative Recovery College
- * Traveller Counselling Service
- * Union of Students in Ireland

Associate Members

- * The Association for Psychoanalysis and Psychotherapy in Ireland
- * Association of Occupational Therapists of Ireland
- * BelongTo
- * Bloomfield Health Services
- * Cork Counselling Services
- * Depaul Ireland
- * Dyslexia Association of Ireland
- * European Association of Professional Hypnotherapists
- * Family Therapy Association of Ireland
- * Irish Association for Counselling & Psychotherapy
- * Irish Association of Social Workers
- * Irish Association of Speech and Language Therapists
- * Irish Council for Psychotherapy
- * Irish Foster Care Association
- * Irish Online Counselling & Psychotherapy Service
- * Irish Refugee Council
- * Irish Society of Chartered Physiotherapists
- * National Association for Pastoral Counselling and Psychotherapy
- * Psychological Society of Ireland
- * St. John of God Hospital
- * St. Patrick's University Hospital
- * Turn2me



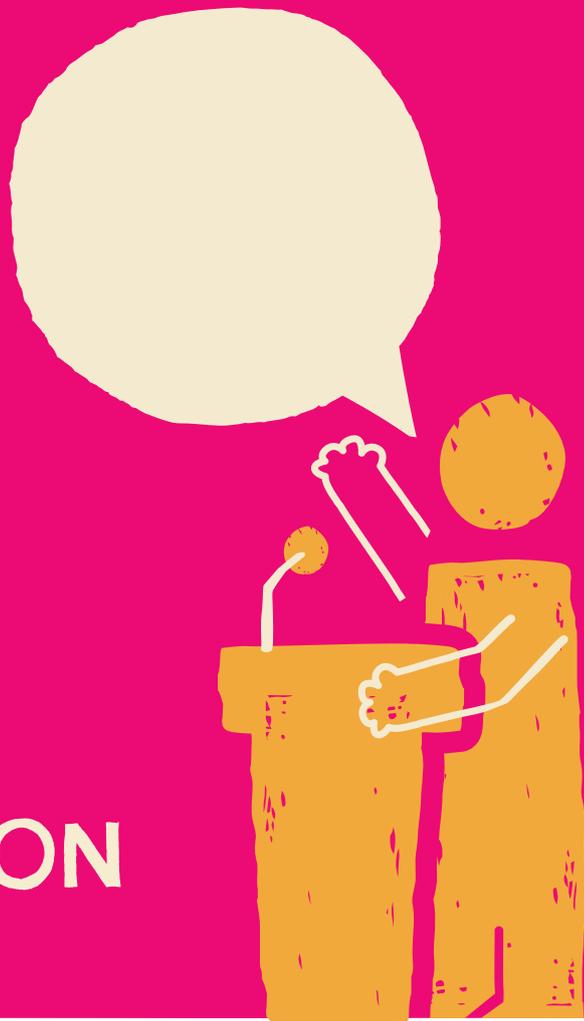
CONTENTS

1.	Introduction	Chairpersons' Report	7
		CEO Statement	12
		Mission, Purpose and Objectives	13
		- Our Purpose	13
		- Our Origins	13
		- Our Vision	13
		- Our Mission	13
		- Core Values	14
		- Key Activities	15
		Operating Context	16
2.	Our Work	Strategic Report	18
		- Statement of Strategic Intent for 2021-2022	18
		Strategic Priority 1	21
		1.1 Summary	21
		1.2 Key Outcomes	22
		Strategic Priority 2	25
		2.1 Summary	25
		2.2 Key Outcomes	26
		Strategic Priority 3	34
		3.1 Summary	34
		3.2 Key Challenges	36
		Strategic Priority 4	37
		4.1 Summary	37
		4.2 Key Outcomes	37

3. Governance, structure and management	- Company Information	40
	- Staff overview	40
	- Bios	41
	- Board Composition	46
	- Sub committees	47
	- Board Meetings	47
	- Conflicts of Interest	47
	- Board recruitment and induction	47
	- Engagement and communication with stakeholders	48
	- Risk management	48
	- Decision making	49
	- Investment policy	49
	- Governance code compliance	49
	- Director's remuneration	50
	- Key Management Team	50
- Performance Management	50	
4. Financial Review	- Funders and income sources	53
	- Reserves policy	53
	- Going Concern	53
	- Research and Development	53
	- Post Balance Sheet Events	53
	- Political Contributions	53
	- Accounting Records	54
	- Statement on relevant audit information	54
	- Auditors	54
5. Independent Auditors' Report	- Directors' responsibilities statement	56
	- Directors	57
	Report on the Audit of the Financial Statements	58
	- Statement of Financial Activities	61
	- Balance Sheet	62
	- Statement of Changes in Funds	63
	- Statement of Cash Flows	64
	Notes to the Financial Statements	65

1

INTRODUCTION



CHAIRPERSONS' REPORT

Michele Kerrigan,
Chairperson
Mental Health Reform



In 2021, I took up the role of Chairperson of Mental Health Reform (MHR) and I am delighted to present to you, on behalf of the Board of Directors, the 2021 annual report. I would first like to thank and pay tribute to my predecessor Professor Agnes Higgins, who since 2016 fulfilled the role of chairperson of MHR with insightful strategic leadership, dedication and commitment

2021 was once again a year that will be remembered for the uncertainty and ever changing context created by the COVID-19 pandemic. For many, it was a demanding year, personally and professionally. It was also a year which presented a unique moment for mental health when, never in the history of the Irish state has, the mental health aspects of a public health crisis been so prominent.

We are proud that we as a coalition have risen to challenges and demands of this new context, and together with our members, we have continued to push forward our shared agenda. This report charts the past 12 months of our work. There has been important progress that I would like to highlight.



In February and March, **over 400 individuals** participated in MHR's United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) consultation and capacity building sessions.



In August, we launched the findings of the **'Brave New Connections' survey** which gathered information about the impacts of COVID-19 on the organisations working in the sector. Conducted between April and May 2021, the survey explored the ways organisations have responded, what challenges they experienced, and what areas they would find useful to have support with going forward into the 'new normal'.



In October, we welcomed the **Government's commitment of €37M in Budget 2022**. While the investment fell short of the €85M ask, we recognised that it is a positive step towards improving access to mental health services.



In October, we launched the **Cultural Competency Toolkit** with support from the HSE and the Sláintecare Integration Fund. The Toolkit is a practical guide for mental health professionals, services, and staff on working with ethnic minority communities in Ireland.

In 2021, the board also took time to reflect on MHR's progress towards our mission and goals. To assist with this, we commissioned both an external evaluation of our 2018 - 2020 strategic plan and an internal capacity review. The recommendations of both are being taken forward in 2022.

As we head into 2022, I would like to personally thank my fellow Board members for their continued commitment and for giving so generously of their time and expertise. A special thanks to all the MHR staff whose efforts, commitment and hard work is evident in this report. I would also like to thank our funders; your recognition of MHR's valuable role in reforming the country's mental health system is greatly appreciated.

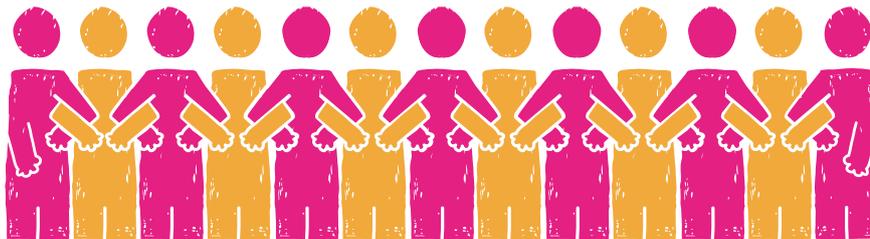
The success of MHR is a clear illustration of the power the coalition has when working together as a strong, collective voice, grounded in the wisdom and experience

of our member organisations, service users and their supporters. The outcomes shown in this report would not be possible without the invaluable input from our member organisations and those individuals who participate in our advisory groups and consultations.

In 2022, we will begin to develop MHR's next strategic plan. We have many interesting conversations ahead as we map and look at how we work together for our members, our stakeholders and ultimately the service users and their families, friends and carers. There is an opportunity for each of you to shape our priorities beyond 2023 and I look forward to hearing from all of you.



Michele Kerrigan,
Chairperson
Mental Health Reform



..The success of MHR is a clear illustration of the power the coalition has when working together as a strong, collective voice, grounded in the wisdom and experience of our member organisations, service users and their supporters.





Fiona Coyle, CEO, MHR, Gary Kiernan, Director of Regulation, Mental Health Commission, Mary Butler, Minister of State for Mental Health and Older People, Emilia Marchelewska, Health Advocacy Officer, Cairde, Blessing Dada, See Change Ambassador and John Farrelly, Chief Executive, Mental Health Commission at the launch of 'Ethnic Minorities and Mental Health, Revised guidelines for mental health services and staff on working with people from ethnic minority communities'



Violet-Ann Wynne TD, Pauline Tully TD, Fiona Coyle, CEO, MHR, Holly Cairns TD and Ivana Bacik TD at the launch of MHR's Guide on the UNCRPD in Merrion Square Gardens.



Justyna Maslanka (above) and Rawan Al Zawadi (below) taking part in the Cultural Competency Toolkit information video..





Left: Mary McCarthy, Mental Health Advocate and Fiona Coyle, CEO, MHR at the launch of MHR's Pre-Budget Submission in Leinster House



Below: MHR members and Grassroots Forum members pictured at the launch of MHR's Pre-Budget Submission in Leinster House



Rory Fitzgerald, Regional Director, Samaritans, Lyanne O' Brien, Service User, Shine, Marc Ó Cathasaigh TD, Fiona Coyle, CEO, Mental Health Reform, Jessica Statham, Support and Information Officer, Shine and Matt Shanahan TD taking part in Mental Health Reform's pre-budget campaign in Waterford.

CEO STATEMENT

Fiona Coyle, CEO,
Mental Health Reform



2021 was a year we entered with the hope that we would shortly emerge from the COVID-19 pandemic that dominated our lives the previous year. However, if 2020 taught us anything, it is to expect the unexpected. The mental health impacts of the pandemic remained central in public discourse. However, additional challenges such as the cyber-attack in May had a hugely detrimental effect on our healthcare system.

MHR, guided by an interim strategic plan developed by the Board in 2020, endeavoured to ensure that any positive opportunities were harnessed; including sending tablets to members of our Grassroots Forum so they could participate in meetings online; expanding our reach geographically for our online meetings and taking advantage of the oft-repeated mentions of minding our mental health.

The ongoing restrictions meant that key research projects such as our Prisons' Project could not be progressed. However, we moved ahead with a number of other projects that were not contingent on accessing places in person. We published our Cultural Competency toolkit; refreshed the Ethnic Minority Guidelines in partnership with the Mental Health Commission; delivered our annual pre-budget campaign and by the last quarter of the year we had lobbied over 50 designated public officials.

One of our key campaigns since our establishment has been for the Reform of the Mental Health Act 2001. In July 2021, the long-awaited Heads of Bill for the Mental Health (Amendment) Bill 2021 was published. We commissioned a Human Rights Analysis of the Draft Heads of a Bill to Amend the Mental Health Act 2001 and set about our advocacy to ensure the delivery of person-centred, recovery-focused legislation that adequately protects people's rights.

I would like to acknowledge the work of Mary Butler TD, Minister of State for Mental Health and Older People, and her Officials on progressing this hugely important piece of legislation. I would also like to acknowledge the members of the Sub-Committee on Mental Health who are undertaking the pre-legislative scrutiny of the Mental Health (Amendment) Bill 2021.

As always, I would like to thank our members, our Board, our Grassroots Forum, our staff and the wider community. Our voices are being heard; we are being invited to the 'virtual' tables with decision-makers and we are getting closer to our vision where everyone can access the support they need in their community to achieve their best possible mental health.

Go raibh míle maith agaibh.

Fiona Coyle
CEO, Mental Health Reform

MISSION, PURPOSE AND OBJECTIVES



Our Purpose

The company was set up under a Memorandum of Understanding. Articles of Association which established the objects and powers of the charitable company, is governed by this constitution and is managed by a Board of Directors.

The objectives for which Mental Health Reform exist are:

- * to benefit the community by promoting best practice in all aspects of service provision to people experiencing mental health difficulties,
- * advancing the education of the public at large to the benefits of an Ireland where people achieve and enjoy the highest attainable standard of mental health.

Our Origins

Initially named The Irish Mental Health Coalition, MHR was founded in 2006. It began with five organisations; Shine, Bodywhys, Grow Mental Health, Irish Advocacy Network and Amnesty International. The coalition had three service providers, an advocacy organisation and a human rights organisation. Those pillars (service providers, advocacy and human rights) were present from the very beginning, and they were what was needed to move the coalition forward.

Ireland's mental health policy A Vision for Change, was launched in 2006. The coalition was focused on holding the Government accountable for its delivery of that policy.

Over the coming years, a strong membership was developed. That membership expanded to incorporate other organisations which had something to offer, particularly those that had strong grassroots involvement, so that we could hear the voices of mental health service users.

In February 2011, the Irish Mental Health Coalition was renamed Mental Health Reform (MHR). This marked the transition from a campaigning coalition operated as a project of Shine, to the establishment of a national support organisation for NGOs representing service users, families and community groups engaged in mental health.

Our Vision

An Ireland where everyone can access the support they need in their community to achieve their best possible mental health.

Our Mission

To be the unifying voice that drives progressive reform of mental health services and supports in Ireland.

Core Values

	Best international standards and human rights norms	We consistently invoke best international standards and human rights norms as the benchmark we expect all parties to aspire to and progressively deliver.
	Equitable access to high quality mental health services	We promote a model of health and social care where everyone has equal access to affordable, sustainable and high quality, primary care and recovery oriented mental health services.
	Empowerment of individuals and mobilisation of local communities	We operate from a conviction that the views and active participation of the person who experiences mental health difficulties and their support networks are pivotal to achieving best outcomes and that integrated services at local community level constitute the best enabling context.
	Independence and integrity	Our authority stems from our independence. We campaign with integrity demonstrating respect for all stakeholders and without fear or favour.
	Focus on value-added activity	Our focus is on activity that adds distinctive value to the work of the members and avoids duplication of their efforts.
	Financial stewardship	We operate efficiently, making best use of the resources entrusted to us.
	Accountability	We are accountable for our effectiveness to our members via the Board with timely, accurate and comprehensive information.
	Authoritative voice	We root our recommendations in consultation with stakeholders and in international and national evidence of good practice.
	Principled pragmatism	We hold true to our principles while working towards pragmatic steps forward in reform of the mental health system.

Key Activities

MHR's key ongoing activities are outlined below. MHR's approach is to provide a unified voice to government, its agencies, the Oireachtas and the general public on mental health issues. In 2021, this became increasingly important as a clear need emerged for a strong coordinated voice to ensure that experiences of members, service users, family, friends, carers and supporters are reflected in the COVID-19 response. MHR performed a key role in the sector by providing an information provision service, a space for members to share resources and collaborate, and finally a united voice when approaching policy makers.

Our approach was as follows;

Key Activities		
 <p>Coordination & Policy Development</p>	 <p>Research & Innovation</p>	 <p>Accountability & Advocacy</p>
<ul style="list-style-type: none"> * We draw on the expertise and experience and coordinate the views of our member organisations. * We represent the sector in public forums. * We prepare policy submissions on behalf of our member organisations, informed by our Grassroots Forum and other advisory groups. 	<ul style="list-style-type: none"> * We consult with people who use services and family members, reporting their experiences to government and its agencies. * We conduct research to identify unmet needs and good practice solutions. * We support and demonstrate innovation in the way that mental health supports are provided. 	<ul style="list-style-type: none"> * We monitor progress on government commitments and hold the government and its agencies to account for delivery. * We mobilise our membership and wider supporter network to make publicly visible the support for a better mental health system.

OPERATING CONTEXT

In 2021, the COVID-19 pandemic continued to have a significant impact on the environment in which the coalition works. According to the World Health Organisation (WHO), the global prevalence of anxiety and depression increased by 25% in the first year of the pandemic. Similarly, research in Ireland showed that the mental health of one in every six people deteriorated during the pandemic. The increase in the prevalence of mental health difficulties has led to a rise in demand for mental health supports which placed additional pressures on our mental health system. In 2021, this was compounded by the HSE cyberattack which severely impacted the delivery of mental health services.

As part of the Brave New Connections project, MHR conducted a survey in 2021 to explore how organisations in the Voluntary and Community Sector have adapted to the challenges of the COVID-19 pandemic. Almost 60 organisations responded to the survey, most of whom were members of Mental Health Reform.

Survey results show that most organisations managed to continue supporting their large numbers of vulnerable users, and many experienced an increase in the numbers of people seeking support as well as in the severity of mental health difficulties. The new context required major adaptation and change, including developing online versions of their services and reorganising their staff and volunteer working arrangements. These findings demonstrate the pivotal role of the Voluntary and Community Sector during the COVID-19 pandemic in ensuring access to services and supports for those who need them.

Since the onset of the pandemic, mental health has become a notable element in national public discourse. As Ireland's leading coalition on mental health, MHR is well placed to provide unique insight into the challenges faced by the sector during the crisis. In 2021, we became an increasingly prominent spokesperson on mental health issues for policy makers and the media.

At an operational level, while public fundraising remained difficult, MHR increased its overall income by securing new project funding to support its innovation work on e-mental health.

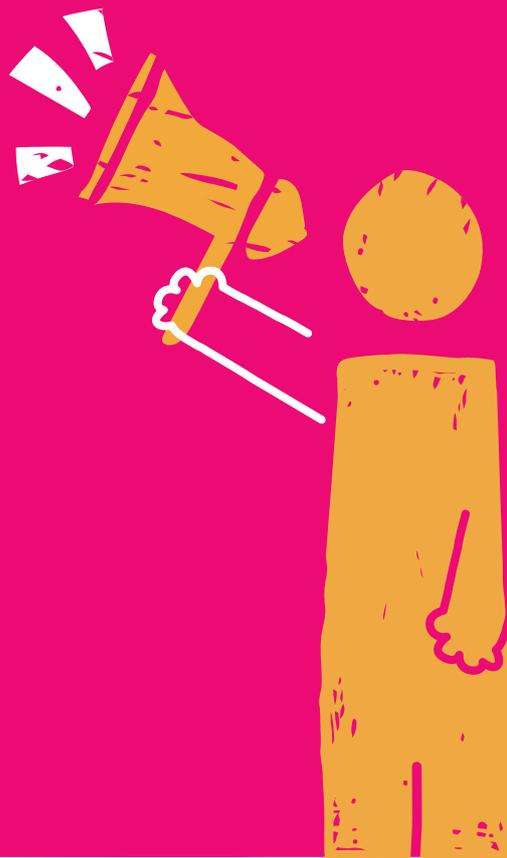
In July, MHR welcomed the Government's approval of the Heads of Bill to amend the Mental Health Act. For the past six years, MHR and its member organisations have advocated for reform of the Mental Health Act in line with Expert Group recommendations. The reform of the Mental Health Act is a once-in-a-generation opportunity to deliver mental health legislation that adequately protects people's rights.



.. research in Ireland showed that the mental health of **one in every six** people deteriorated during the pandemic.

2

OUR WORK



STRATEGIC REPORT



Statement of Strategic Intent for 2021–2022



1. Secure changes in legislation and policy



2. Improve access to services



3. Understand and respond to the impact of COVID 19



4. Strengthen the capacity, outreach and sustainability of MHR

Strategic Goals	Key Performance Indicators	Progress 2021
Advocate and secure changes in legislation and policy to give meaningful effect to a human rights-based and recovery-centred approach to mental health	<ul style="list-style-type: none"> * Heads of Bill to reform the Mental Health Act 2001 published * Government held to account on UNCRPD * Mental health taken into account in key governmental policies identified as needing intervention by MHR including Health, Justice and housing * Greater awareness of MHR's work among the public 	<ul style="list-style-type: none"> * Heads of Bill to reform the Mental Health Act 2001 published in July following public consultation process of which MHR was part * MHR submit report based on wide service user consultation * 17 Policy submissions made in 2021 * Increased media engagement in 2021

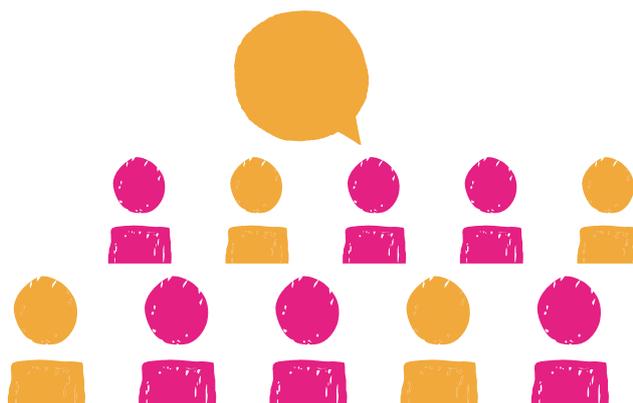
<p>Improve access to services through the implementation of Sharing the Vision</p>	<ul style="list-style-type: none"> * Increase in investment in mental health * Develop tools to ensure Mental Health services and supports are inclusive to the needs of marginalised groups * Increased engagement of people experiencing mental health difficulties in formation, review and rollout of policy. * Promote and support implementation of e-mental health 	<ul style="list-style-type: none"> * Pre-Budget 2021 campaign launched virtually on August 31st. Investment of €37M in mental health services. 2,080 people encouraged to contact their TD. Reach of 91,501 people on social media * Cultural Competency Toolkit launched and distributed to 109 Community Mental Health Teams across Ireland. * Over 500 individuals attend MHR's consultations in 2021. * Digital Mental health policy brief launched
<p>To understand, respond and foster innovation on the impact of COVID-19 on mental health and mental health services</p>	<ul style="list-style-type: none"> * MHR member organisations supported to adapt and innovate to COVID-19 * Analyse and publically communicate research on the impact of COVID-19 on Mental Health 	<ul style="list-style-type: none"> * Research conducted and Brave New Connections report launched * Resource, Rebuild, Reform policy brief and campaign launched
<p>To strengthen the capacity, outreach and sustainability of MHR</p>	<ul style="list-style-type: none"> * Increased member engagement in MHR's activities * MHR adheres to the recommendations as laid out by regulatory authorities * Strengthen internal capacity * Diversify funding 	<ul style="list-style-type: none"> * Recruitment of Communications and Engagement Manager and Communications and Membership Officer with member relations function. * Compliance with Governance code, CRO & CRA * Capacity Review undertaken. New team structure in place. * Fundraising strategy in progress

Due to the unpredictability of COVID-19, the Board took a decision in 2020 to develop a shorter term, 'Statement of Strategic Intent 2021-2022' to guide the organisation through the unprecedented uncertainty of the pandemic and to allow time to develop the next longer term strategic plan.

This statement of strategic intent was accompanied by the development of a detailed Operations Plan, outlining key objectives under each strategic priority; the actions to be undertaken; the risks associated with each objective; the resources required for each objective, and the timeframe for completion and outputs. The Operations Plan was seen as a working document and provided an overview of the projects and plans for 2021, including those projects which were paused or stalled due to delays stemming from COVID-19.

The 4 priorities for 2021 and 2022 are:

1	Secure changes in legislation & policy	
2	Improve access to services	
3	Understand and respond to the impact of COVID-19	
4	Strengthen the capacity, outreach & sustainability of MHR.	



STRATEGIC PRIORITY 1

Advocate and secure changes in legislation and policy to give meaningful effect to a human rights-based and recovery-centred approach to mental health



1.1 Summary

MHR is at the forefront of policy and law reform in Ireland. The relationships built with Government and Opposition TDs and Senators provide the coalition with a unique opportunity to advocate for and secure changes in legislation and policy.

In 2021, we worked towards the following outcomes:

- * Reform of the Mental Health Act, 2001
- * Government is held to account on the implementation of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)
- * Government commitment to drive progressive reform of mental health services and supports

2021 saw the long-awaited publication of the Heads of Bill to amend the Mental Health Act. This represented a pivotal moment for the future of mental health services in Ireland. A parallel and important piece of work on legislation and policy was that of the Assisted Decision-Making (Capacity) Act 2015. Our lobbying for the human rights and recovery-centred approach for people with mental health difficulties will continue into 2022, when the Decision Support Service is expected to become operational.

In 2021, our political engagement was critical to ensuring that mental health remained on the national agenda during the ongoing COVID-19 pandemic.

Key figures:



1.2 Key Outcomes

Progress Towards Reform of the Mental Health Act, 2001

A key priority for MHR is our campaign to reform the Mental Health Act 2001. It was 2015 when the Expert Group Review of the Mental Health Act, 2001 published its report, outlining 165 recommendations for changes to the Act. 2021 finally saw some progress on this hugely significant legislation.

In early 2021, the Department of Health led a review of the Mental Health Act 2001. As part of this review, the Department invited submissions from the public and key stakeholders. In March, MHR partnered with the HSE's Mental Health Engagement and Recovery Team (MHER) to host public information sessions on the consultation.

Our dedicated recourse page included submission guidelines for the public. In July the Draft heads of Bill were published and MHR commissioned an independent human rights analysis of the Heads of Bill. MHR was invited to appear as witnesses before the Sub-Committee on Mental Health as part of the pre-legislative scrutiny process in November.

In 2022, MHR will continue to support the Minister of State for Mental Health and Older People, Mary Butler in urging the Government to prioritise this long-awaited legislation. It is hoped that the process will create opportunities for our members and those with lived experience to actively engage in the legislative process.



Timeline:

- * MHR Public Information Session - March 2021
- * MHR Submission - April 2021
- * Heads of Bill to amend the Mental Health Act – Published July 2021
- * MHR Human Rights Analysis of the Heads of Bill to Reform the Mental Health Act - Published November 2021
- * MHR appearance before the Sub-Committee on Mental Health as part of the pre-legislative scrutiny of the Heads of Bill - November 2021

Strengthened Political Engagement

Regular engagement with the Irish government and Oireachtas members was a key activity for the coalition in 2021. In January, MHR had a meeting with Minister for Health, Stephen Donnelly. Later in the year, we met with Minister of State for Mental Health and Older People, Mary Butler. These meetings provided MHR with an invaluable opportunity to discuss our work and highlight key priorities for the mental health sector.

Key Political Meetings in 2021

- * Meeting with the Lord Mayor of Dublin, Mansion House – October 2021
- * Meeting with the Mayor of South Dublin County Council and MHR members – October 2021
- * Meeting with Regina Doherty and Fine Gael Senators ahead of Budget Day – October 2021
- * Meeting with An Ceann Comhairle, Seán Ó Fearghail – November 2021

MHR was also invited to join the Oireachtas Disability Group (ODG) in the last quarter of 2021. This is a cross-party group of TDs, Senators along with community & voluntary disability organisations. Its goal is to advance the full implementation of the UNCRPD.

Increased Public Profile

In 2021, MHR increased public support for its agenda through targeted communications. The coalition aimed to strengthen its media relations strategy by building relationships with national and regional media, supporting service users to share their stories, and proactively responding to key developments in mental health. This approach generated coverage in 85 media outlets, representing a 6% increase on the previous year. Key highlights include Newstalk, RTÉ Today with Claire Byrne, Irish Times and the RTÉ News. MHR continued to invest in digital communications, increasing its output and growing its audience. The coalition increased its social media audience by 8% compared to the previous year. While this was 2% below its annual target, there was substantial growth on particular platforms such as LinkedIn which saw a 50% increase in social media followers. MHR has identified the need to develop a communications strategy in 2022 to optimise digital communications and enhance stakeholder engagement.

MHR receives a large number of requests for meetings, guest lectures, trainings, briefings and 2021 was no different. Continuing to work online meant that the geographical reach was extended and opportunities were presented which may not have worked if travel had been involved.

Co-ordinated Policy Input

In 2021, MHR continued developing consensus-based policy submissions in consultation with our members.

MHR produced 17 policy positions which were submitted to influence the development of key governmental policies. This was an increase from 7 in 2020 and is reflective of new emphasis being placed on mental health.

1. Submission to the public consultation on the Mental Health Act
2. Submission to the UNCRPD state report
3. Submission to the Mental Health Parity of Esteem Bill 2020
4. Submission to the Joint Oireachtas Committee on Health
5. Submission on Ireland's third review under the Universal Periodic Review
6. Submission to An Garda Síochána new Strategy Statement
7. Criminal Justice Briefing to Chair of Joint Task Force
8. Submission to the Joint Oireachtas Committee on Health on the impact of COVID-19 emergency powers on fundamental rights and mental health
9. Submission to the HSE Mental Health promotion plan
10. Submission to the Irish Human Rights and Equality Commission Strategy Statement 2022-24
11. Submission to the Mental Health Commission public consultation on seclusion and restraint
12. Pre-budget submission
13. Submission to the Joint Oireachtas Committee on Health and Sub-Committee on Mental Health on the impact of COVID-19 on mental health
14. Submission to the HIQA Draft Overarching National Standards for the Care and Support of Children using Health and Social Care Services
15. Submission to the draft State Report on the UNCRC on behalf of the Children's Mental Health Coalition (CMHC)
16. Submission to Oireachtas Sub-Committee on Mental Health on the draft heads of Bill to amend the Mental Health Act
17. Submission to the Review of the Equality Acts

Ensuring Implementation of the UNCRPD

MHR is a funded member of the Disability Participation and Consultation Network (DPCN). The DPCN was established to ensure that persons with disabilities have input into making policies and laws in Ireland. As a member of the DPCN, a key objective for MHR is holding the Government to account on the implementation of the UNCRPD. In 2021, MHR made a submission in response to the Draft Initial State Report on the UNCRPD which was informed by consultations with people with psychosocial disabilities.

Overall, the consultations have highlighted that the State report needs to more accurately reflect the reality for persons with disabilities in Ireland.

MHR undertook a number of other projects as part of the DPCN, including the production of a guide and information materials on the UNCRPD for people with psychosocial disabilities as well as six capacity building sessions for members of the public.

UNCRPD:

CONSULTATIONS
February–March 2021
176 participants

INFORMATION WEBINAR
March 2021
91 participants

CAPACITY BUILDING SESSIONS
July–November 2021
47 participants

Key Challenges

Some of our challenges in 2021 related to capacity, changes within the Policy, Advocacy & Research team and the sheer volume of public consultations on issues of importance to MHR members throughout the year. In the last quarter of the year, following the recruitment of a new Policy & Advocacy Coordinator, our political advocacy work was significantly expanded.



Above: The UNCRPD Guide produced by Mental Health Reform.

Right: Violet-Ann Wynne TD, Pauline Tully TD, Holly Cairns TD and Ivana Bacik TD at the launch of MHR's Guide on the UNCRPD in Merrion Square Gardens.



STRATEGIC PRIORITY 2

Improve access to services through the implementation of *Sharing the Vision*



2.1 Summary

Improving access to mental health services is a critical enabler of better mental health outcomes for service users. In line with the core values and principles of *Sharing the Vision*, all service users should have access to timely, evidence-informed interventions that assist in their recovery.

MHR contributes its knowledge of best practice in how mental health services can be best configured and designed to meet service user needs. We ensure that through all our processes we capture the lived experiences of mental health service users.

In 2021, MHR focused on the following outcomes:

- * Increase investment in mental health related support services
- * Ensure mental health services and supports are inclusive to the needs of marginalised groups
- * Support people experiencing mental health difficulties to be key actors in formation, review and rollout of policy
- * Represent members' voices in key policy implementation spaces
- * Promote and support implementation of e-mental health

In terms of impact, the Government invested an additional €37M in mental health services for Budget 2022. Although this investment was less than the €50M allocation in Budget 2021, we recognise that it was a positive step towards improving access to mental health services.

Compared to 2020, MHR supported more people with lived experience of mental health difficulties to influence policy through participation in MHR's consultations, advocacy training and public appearances. In 2021, over 500 people attended MHR's public consultations.

Funding from Rethink Ireland and Interreg North-West Europe in 2021 enabled MHR to strengthen its impact in the e-mental health field through the development of innovative e-mental health technologies in collaboration with international partners.



2.2 Key Outcomes

Increased Investment for Mental Health in Budget 2022

Our Pre-Budget Submission 2022 was launched on the 31st of August 2021 with a photo call at Leinster House and an online launch event. Together with our 77 member organisations, we called on the Government to invest €85million in our mental health services for Budget 2022. This included €20M to maintain existing levels of services; and €65M to be used exclusively for developing our services to drive change in the system, and deal with the new challenges faced.

The pre-budget campaign encompassed PR, digital communications, and a partnership with Uplift Ireland, which provides a platform for members of the public to contact their TD directly.

Compared to 2020, MHR sought to increase engagement with service users, their family members, friends and carers in this campaign. This was achieved by issuing a public survey on mental health services which shaped our pre-budget submission. Support was also given to service users and family members to speak out to the media and participate in our pre-budget launch in Dublin and Waterford.

MHR sent an open letter to the Taoiseach on behalf of its members calling on the Government to increase investment in mental health services to address the long-term impact of the pandemic.

Opposite: Patrick Reilly, Pavee Point, Suzanne Ennis, Turn2me, Hugh O'Donoghue, Irish Association for Counselling and Psychotherapy, Fiona Coyle, CEO, MHR (centre), Seamus Sheedy, Irish Association for Counselling and Psychotherapy and Martin Rogan, CEO, Mental Health Ireland at the launch of MHR's Pre-Budget Submission 2022 at Leinster House.



 <p>Increase spending on mental health to 10% of the total health budget by 2024</p>	 <p>Expand Child and Adolescent Mental Health Services (CAMHS)</p>	 <p>Invest in the Individual Placement and Support scheme</p>
 <p>Increase staffing levels across mental health services</p>	 <p>Support the Community & Voluntary sector</p>	 <p>Access to affordable housing for people with mental health disabilities</p>
 <p>Invest in mental health in primary care</p>	 <p>Invest in advocacy services for people with mental health difficulties</p>	 <p>Improve mental health supports in the prison system</p>

#Budget22

Budget 2022 in Numbers

300 **RESPONSES**
to pre-budget survey



7 service users and family members represented

90 **PARTICIPANTS** at virtual pre-budget launch event



2,080 **EMAILS** sent to TDs via Uplift



33 **MEDIA HITS**



57% INCREASE
in media coverage
from 2020

REACH OF
91,500



people on
SOCIAL MEDIA

MHR secured a meeting with Minister of State, Mary Butler, in the lead-up to Budget Day and we were also invited to appear before a joint sitting of the Oireachtas Committee on Health and the Sub-Committee on Mental Health to discuss our budget campaign. In our efforts to reach across Departments, we had requested meetings with other Ministers but unfortunately were not successful with those requests. Meetings with Ministers for Housing, Employment, Social Protection and Justice will remain priorities for us for next year.

Though it fell short of the €85M we called for, on the 12th of October 2021, we welcomed the allocation of an additional €24M for the development of new services and €13M to support the provision of existing levels of service announced in Budget 2022. There was also an announcement of an additional, once-off funding of €10M for the sector.

Empowering Service Users

A key focus for MHR is supporting people with mental health difficulties and their families, friends, carers and supporters to influence mental health policies, and advocate for improved mental health services.

The Grassroots Forum provides a space for people with lived experience of mental health difficulties to engage directly with MHR. Participants in the forum contribute to the formation of MHR's policy positions and participate in our public campaigns.

Due to COVID-19 restrictions, all meetings with the Grassroots Forum in 2021 took place online via Zoom. MHR provided tablets to participants to support their continued engagement with the Forum. Members of the Grassroots Forum played an instrumental role in MHR's Budget 2022 campaign by informing MHR's pre-budget submission and participating in the launch of the campaign at Leinster House.

MHR also continued the delivery of its community mental health pilot project in the Mid-West. This project involved training and coordinating communities of people across the Mid-West to speak out for better mental health services, by engaging with mental health services management and other local stakeholders including politicians, local media and members of the public.

This project developed an information leaflet to encourage people in the Mid-West region to get involved in MHR's local campaign work. This material was circulated to local member organisations to share with their service users.

We also delivered two training sessions on mental health advocacy for 25 participants. Sessions provided participants with key communication skills to support involvement in advocacy groups, including practical strategies for communicating with public representatives. Our speaking engagements

included information sessions for service users, carers and family members in partnership with Family Carers Ireland and Jigsaw.

In 2021, MHR increased its focus on facilitating people with lived experience to publicly campaign for improved mental health services. We succeeded in supporting seven individuals to participate in public appearances including media interviews and online events. This will continue to be a key priority for the coalition in 2022.

Case Study

Promoting Cultural Competency in Mental Health Services

In October 2021, MHR published the Cultural Competency Toolkit, a practical guide for mental health professionals, services, and staff on working with ethnic minority communities in Ireland.

Research shows that people from ethnic minority groups experience significant challenges in accessing mental health supports that adequately meet their needs. These include language barriers, bias and communication problems and cultural differences and misunderstandings.



The project partnered with the Cabra Community Mental Health Team, engaged the expert support of the Welsh pan-equality organisation Diverse Cymru, and was overseen by an expert steering committee.

The project output was a Cultural Competency Toolkit. A resource to provide practical tools, resources and recommended practices for mental health professionals, services and staff who work with ethnic minority communities in Ireland.

In March and April, Diverse Cymru delivered a cultural competency education programme to mental health practitioners in Cabra Community Mental Team. The project was externally evaluated which identified it as a promising model.

In order to raise awareness of the toolkit among Community Mental Health Teams, MHR produced an information video with the participation of Cabra Community Mental Health Team and mental health service users from ethnic minority communities. The video was essential in sharing perspectives of people from ethnic minority communities who had experienced barriers in accessing mental health services.



“ Cultural and language barriers can be a huge problem for people in ethnic minority communities so we need more translators in mental health services in Ireland”

– Justyna Maslanka, mental health service user

The toolkit was launched at a virtual event which was attended by 121 participants from across the mental health sector. MHR distributed hard copies of the toolkit and a factsheet to 109 HSE Community Mental Health Teams across Ireland. Since its launch, the Cultural Competency Toolkit webpage has generated 1,140 page views. In 2022, MHR plans to work with the HSE to ensure the Cultural Competency Toolkit is promoted as a key resource to Community Mental Health teams.

Ensuring High-Quality Services for Ethnic Minority Communities

In December, the Mental Health Commission and MHR published revised guidelines for mental health services and staff working with people from ethnic minority communities. The guidelines were originally published by the Mental Health Commission and MHR in 2016. Titled ‘Ethnic Minorities and Mental Health’, the updated guidelines are designed to inform mental health services and staff on how best to provide care to individuals from ethnic minorities. In line with Ireland’s national mental health policy, *Sharing the Vision*, the revised guidelines aim to support the delivery of diverse and culturally sensitive mental health services.



The guidelines are the result of a public consultation process which gathered feedback from mental health service providers, service users from ethnic minority communities and interested stakeholder groups.

Minister for Mental Health & Older Persons, Mary Butler T.D launched the guidelines at a virtual event. 170 people attended the event representing over 46 organisations in the mental health sector.

The Mental Health Commission have engaged with staff in approved mental health centres and mental health services to promote awareness of the guidelines. The Mental Health Commission will also be incorporating the guidelines into their monitoring plans in the future. In 2022, MHR will work with the Mental Health Commission to ensure that the guidelines are widely disseminated to mental health professionals throughout Ireland.

Representing Members' Voices in Key Policy Implementation Spaces

In 2021, MHR represents members' voices in key policy implementation spaces.

Sharing the Vision (StV) National Implementation and Monitoring Committee (NIMC)

The National Implementation and Monitoring Committee (NIMC) is collectively responsible for driving and overseeing the long-term implementation of Ireland's national mental health policy *Sharing the Vision: A Mental Health Policy for Everyone*. Fiona Coyle, CEO, MHR has been actively engaged in the NIMC throughout 2021 and will continue to be into 2022. The establishment of the NIMC Steering Committee and the inclusion of MHR has been a welcome step-forward in the realisation of MHR's mission, vision and values. The first implementation plan for *Sharing the Vision 2022 - 2024* is due to be launched in 2022.

National Housing Strategy for People with Disabilities

The National Housing Strategy for Disabled People 2022 – 2027 uses the term “disability” in reference to 4 categories of disability (sensory disability, mental health difficulties, physical disability and intellectual disability). Psychosocial disabilities are also included when referring to mental health difficulties as this is in line with the social model of language.

In 2021, Fiona Coyle, CEO, MHR provided input to the National Housing Strategy for People with Disabilities. This involved a number of meetings throughout the year, participating in relevant subgroups and Advisory Groups.

Next year, MHR will continue this important work as part of the National Housing Strategy for People with Disabilities Implementation Monitoring Group. The importance of safe and secure housing for people with psychosocial disabilities cannot be understated and MHR will ensure that the voices of our members are represented in this work.

Ongoing Research

Research on LGBTI+ People's Experiences of Mental Health Services

Drawing on the data collected as part of the My Voice Matters project and in partnership with LGBT Ireland, this HSE funded project aims to explore the views and experiences of mental health service users from the LGBTI+ community in an effort to provide insight into how mental health services and supports can better meet their needs.

The goal for 2021 was to complete this project and substantial progress was made towards this goal, including the following:

- * Participant recruitment was completed
- * All focus groups for the project were completed
- * Thematic analysis of focus group data was completed and written up
- * Relevant literature was reviewed in preparation for the drafting of the final report

Due to several challenges including staff changes and difficulties recruiting participants, completion of this project has been delayed until 2022.



Mapping Mental Health Services and Supports in the Irish Prison Service

The objective of this HSE funded project is to map the range of mental health services and supports available to adult prisoners across the Irish Prison Service (IPS). This will not only provide detailed information on the services and supports that are available but it will also help to identify gaps in the available services and supports. As this project relies heavily on the cooperation of the IPS, it has been particularly vulnerable to disruption and delay due to the pandemic. There were also concerns about mapping services and supports during a pandemic when the services and supports available in the IPS would not reflect those available under normal circumstances. In consultation with project stakeholders, the decision was taken to pause the project until such time as a fair and representative mapping process could be carried out.

Therefore, the goals for 2021 were as follows:

- * To monitor the situation in the IPS
- * Maintain engagement with key stakeholders and contacts in the field
- * Regularly assess how appropriate it would be to re-start the mapping process

These goals were achieved. However, as the IPS remained in lockdown throughout 2021, this project will continue in 2022.

Research & Advisory Committee

MHR's research work is supported by the Research Advisory Committee (RAC). This advisory forum was established in 2019 to advise and support the development, implementation, review and dissemination of all research conducted and commissioned by MHR. The RAC didn't meet in person during 2021 due to the ongoing pandemic but nevertheless continued to provide expert input.

Fostering Innovation in e-Mental Health

Since 2015, through support from Interreg North-West Europe, MHR has been exploring the role of technological innovation and in particular e-mental health initiatives to address key mental healthcare challenges in Ireland. In that time numerous key stakeholders, including the HSE, began also to explore the potential of e-mental health initiatives. This is evidenced in the increasing role of digital mental health envisaged in *Sharing the Vision*. However, the unprecedented occurrence of the COVID-19 pandemic dramatically changed the narrative and context around e-mental health and this area of work has become a key focus for MHR. In 2021, we accessed two new funding streams for this work stream, scaling up our work and delivering the following.

Supporting Members to Navigate the New Context

The Innovation team held regular meetings with MHR members and other Voluntary and Community sector organisations to discuss challenges and opportunities for e-mental health, particularly in the times of the COVID-19 crisis. The eMEN team has been very well-placed to provide support to voluntary and other organisations in this context, and has been working in an agile way to capitalise on eMEN achievements and respond to the needs of various stakeholders by providing expertise and guidance on the matter.

As part of the eMEN project, MHR with its international partners began developing a substantial training programme on e-mental health that will be delivered to selected Irish mental health service providers in 2022. In 2021, an e-mental health training toolkit was finalised and shared with relevant stakeholders.

Publication of a Digital Mental Health Policy

MHR held a number of meetings with high level policy makers, including the Department of Health and HSE *Sharing the Vision* implementation team to discuss digital mental health policy. We published a digital mental health policy document and presented this to the *Sharing the Vision* National Implementation Monitoring Committee (NIMC). The document was also sent to the office of Minister Mary Butler. A meeting with the Minister was scheduled for early 2022 to discuss the paper and its contribution to mental health policy development in Ireland.

Transnational Collaboration and Knowledge Exchange

Within the eMEN project, MHR initiated and held a country exchange session in May. This meeting was the first step in establishing a mechanism for the partners to share a better understanding of the overall situation of e-mental health in each of the participating countries. This includes sharing of specific examples of interesting/good practice that could help guide developments in other countries, and developing a common understanding and perspective for benchmarking the overall extent/nature of e-mental health utilisation in the different countries.

Progressing new tools and initiative

eWELL

During the first phase of eMEN we supported work in the HSE to develop an online CBT programme for adolescents (eWell). In 2021, MHR contributed to the evaluation of eWell as part of the overall evaluation of the national Assistant Psychologists pilot and participated in a number of planning meetings with HSE clinical governance, development, IT and management functions in the preparatory work for the national roll-out of eWell. MHR have agreed to play a supportive role in progressing this when the disruptions of the COVID-19 pandemic recede.

Frontline Screener

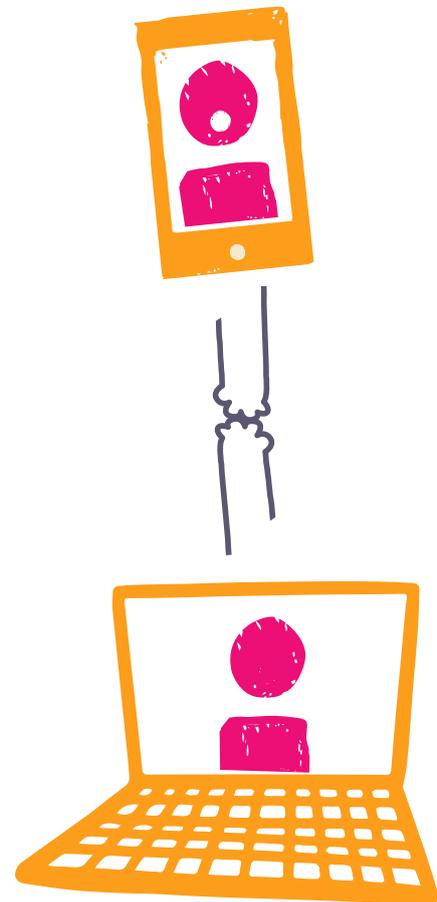
As part of the 'Frontline Screener' project, funded by Rethink Ireland, MHR developed an Irish version of the Dutch online self-help screening tool for potential Post Traumatic Stress Disorder (PTSD) – MIRROR. This was done in collaboration with Dublin Simon Community's mental health service for homeless persons (Sure Steps). In 2021, a pilot version was co-developed and piloted in Dublin Simon. This work will be continued in 2022, including exploring possibilities for making MIRROR more broadly available in Ireland.

Video Platforms

As part of the programme of work supporting digital innovation in response to the challenges of the COVID-19 pandemic, MHR worked on a number of initiatives involving video-communication. The VideoConnect.ie project brought together three services for older persons - ALONE, Alzheimer's Society of Ireland, and the HSE's Memory Technology Resource Rooms programme. The project has been sharing experiences and exploring opportunities for enhancing service coordination between the organisations. In 2022, this project will be looking at the potential for three-way video sessions to facilitate access to mental health counselling for older persons who might benefit from this. On another video-communication project we have been working with Dublin Simon Community's Sure Steps counselling and an Irish video platform provider (Wellola). This collaboration has been developing a service management and delivery platform for Sure Steps, and also gathering data on counsellor and client satisfaction with counselling via video-communication.

Key Challenges

As indicated above, the pandemic and associated restrictions have had a negative impact on our research work with a number of research projects being delayed until 2022. The disruption of the pandemic coupled with staff changes also resulted in a decrease in meetings with the Grassroots Forum. MHR has identified a need to review the Forum and develop a new terms of reference in 2022.



STRATEGIC PRIORITY 3

To understand, respond and foster innovation on the impact of COVID-19 on mental health and mental health services



3.1 Summary

COVID-19 has fundamentally altered the mental health landscape both in terms of service delivery and service demand. Due to this changing context, MHR focused on the following objectives in 2021.

- * Analyse and publicly communicate research on the impact of COVID-19 on mental health
- * Support member organisations to adapt and innovate to COVID-19 and the changing operational context

Since 2020, MHR has acquired more knowledge about the impact of COVID-19 on mental health services. Our relationships with member organisations and academic bodies have allowed us to offer valuable insights and data to policy makers, informing the national discourse. In 2021, we launched a briefing document which highlighted the need to resource, rebuild and reform our mental health services. This underpinned our call to Government to place mental health at the centre of COVID-19 recovery planning. The impact of COVID-19 restrictions has markedly increased the relevance and importance of e-mental health, as many mental health organisations have had to consider moving to virtual/online modes of service delivery. Through our Brave New Connections project, MHR has focused on supporting capacity-building for non-profit Voluntary and Community Sector (VCS) mental health organisations adapting and responding to the challenges and disruptions of the pandemic.

Understanding Public Attitudes Towards Prioritising the Mental Health Services

Building on the successful collaboration between MHR and the COVID-19 Psychological Research Consortium (C19PRC; a group of mental health researchers from universities in Ireland and the United Kingdom who are conducting projects to understand the mental health effects of the pandemic), MHR worked with a team of researchers from Maynooth University on a paper examining public attitudes towards prioritising mental health services and supports in response to the mental health impact of the COVID-19 pandemic, and the socio-demographic and psychological characteristics associated with these attitudes.

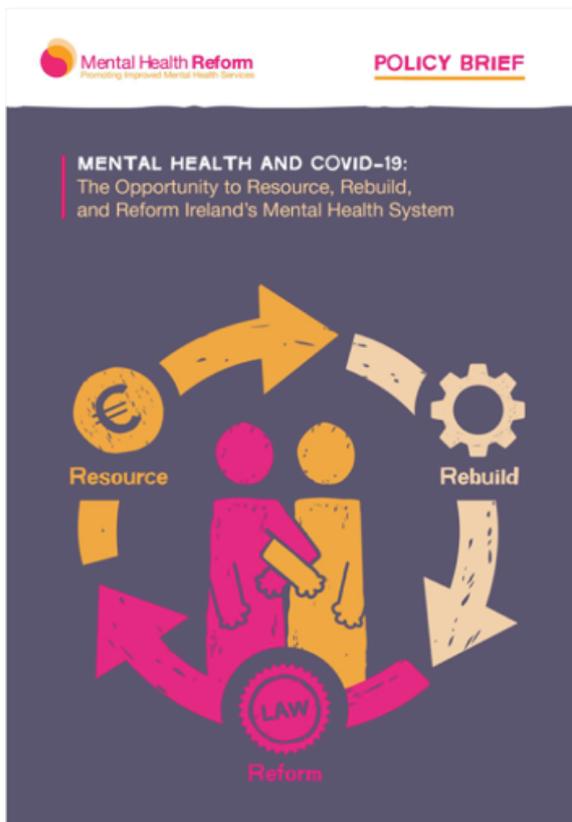
Findings indicate the Irish public hold very favourable attitudes towards mental health issues and value greater government investment in addressing mental health needs.



Resource, Rebuild, Reform

In May, MHR launched a communications campaign calling on the Government to 'Resource, Rebuild and Reform' Ireland's mental health system. The campaign included the publication of an infographic and policy briefing on mental health and COVID-19 which was shared with Oireachtas members. The policy briefing highlights the need for additional resources for mental health services and urges the Government to place mental health at the core of Ireland's COVID-19 recovery. The campaign had a strong social media presence with over 855 social media engagements as well as coverage on national media including Newstalk.

The coalition engaged regularly with Oireachtas members on issues relating to mental health and COVID-19. In September, MHR and Mental Health Ireland provided an update to the Joint Committee on Health and the Oireachtas Sub-Committee on Mental Health on the need for investment in mental health services arising from the COVID-19 pandemic.



Case Study

Brave New Connections Project

In 2021, work commenced on the Brave New Connections (BNC) project, a collaborative initiative led by MHR and funded by an RTE Does Comic Relief grant. The project is supporting capacity-building for non-profit Voluntary and Community Sector (VCS) mental health organisations, focusing on areas where they have adapted and responded to the challenges of the COVID-19 pandemic.

Conducted between April and May 2021, the first phase of the project involved a survey which gathered information about how organisations have adapted/responded, the challenges they experienced, and what capacity-building supports they would consider useful going forward. 58 organisations responded to the survey, a response rate of just over 75% which was a fantastic response.

The survey findings revealed how the sector rose to the challenge by adapting the ways it worked and how it delivered its services and supports. For example, 95% of the surveyed organisations moved some or all of their services and activities to online or remote modes of delivery. While this shift ensured that key mental health supports were available throughout the pandemic, ongoing challenges remained. 66% reported that lack of technology/connectivity was an ongoing challenge affecting access to online services for some of the user groups they worked with. These survey findings were published in a first BNC report which was shared with the sector at a launch event in September.

Based on these findings and continued consultation with the sector, work commenced on the development of a programme of capacity-building activities in the second half of the year. As part of this work, two roundtable discussions were held in November with relevant organisations on the theme of online/remote service provision, to identify current challenges and identify possible solutions.

Work will continue into 2022, and planned activities include fostering greater knowledge sharing and collaboration across the sector, the development of best-practice guidance for online service provision and seed-starting other innovative responses and sub-projects. A second more strategically-oriented report will also be released, outlining the role played by the non-profit mental health sector in the overall ecosystem of mental health in Ireland.

3.2 Key Challenges

A challenge encountered across our digital innovation projects in 2021 was understanding organisations' and service-user needs in a fast-changing context, where restrictions were lifted and re-introduced throughout the year. For example, the return of some face-to-face services presented new challenges for organisations such as the design and delivery of blended models of care. Gaining these important insights required ongoing consultation with, and involvement from member organisations and key stakeholders throughout 2021.



STRATEGIC PRIORITY 4

Strengthen the capacity outreach and sustainability of MHR



4.1 Summary

In order for MHR to deliver on its strategic objectives, it must continue to build a strong membership and ensure that it has the right people, systems, structures and resources in place.

In 2021, MHR continued to diversify its funding base, strengthen member engagement and ensure the highest standards of governance and accountability while developing the capacity of its staff and board.

In 2021, two new members, HUGG and ALONE joined the coalition and four members left the coalition which represented an overall decrease in members from the previous year. Despite this, MHR's membership base is set to increase in 2022.

A membership survey was conducted in January. The survey indicated that members desired more meetings, events and knowledge-sharing opportunities. MHR drew on these survey findings to develop a member engagement strategy which proposes new meetings and activities to encourage greater collaboration in the coalition. The membership strategy will be implemented in 2022.

4.2 Key Outcomes

Strengthening Member Engagement

MHR relies on its membership to deliver its mission to be the unifying voice that drives progressive reform of mental health services and supports in Ireland. As a coalition, MHR's success depends on the participation and support of its members both through their fees and engagement with the network.

A capacity review conducted in 2020 highlighted the need for a dedicated membership staff function within the organisation to enhance engagement with the coalition's members. In 2021, a Communications and Membership Officer and a Communications and Engagement Manager were recruited to fulfil this objective.

Ensuring the Highest Standards of Governance

In 2021, MHR conducted a detailed review of the charities governance code and self-assessment for full compliance. MHR continued to comply with the Charities Governance Code and all registration requirements of the Charities Regulator.

Strengthening MHR's Internal Capacity

Since 2020, MHR has experienced significant change, most notably, key positions vacated over a short period of time, and the severe impact of the COVID-19 pandemic on the organisation's focus and ways of working. In 2021, the board took time to review MHR's internal structure and processes to ensure that the organisation was efficiently set up to achieve its ambitious goals in early 2021.

An external consultant was engaged to undertake a review of organisational capacity. An Organisational Development Task Group consisting of board members and senior MHR management was established to implement the recommendations of the report and support the CEO in the re-configuration of the organisation.

Key developments in 2021 include;

- * Establishment of a senior management team comprising of the CEO, a Communications & Engagement Manager and a Policy & Research Manager
- * Creation of a dedicated membership function
- * Development and approval of definition of central roles and salary ranges

Key Challenges

In 2021, MHR increased its income through increasing project income. As an advocacy group it's important that MHR continues to grow its unrestricted income sources. The COVID-19 pandemic continued to have a direct negative impact on MHR's public fundraising. All face to face fundraising activities, which constituted over 70% of projected fundraising income in 2020, were discontinued.

In 2021, MHR plans to review its current fundraising model and develop a new fundraising strategy with a view to increasing un-restricted income.



Future Plans

The development of a new Strategic Plan will be a key focus for MHR in 2022. In 2021, MHR commissioned an independent evaluation of the 2018-2020 strategic plan. In 2022, MHR will also continue to strengthen its internal capacity by reviewing and updating the terms of membership, the Grassroots Forum and the Research & Advisory Committee. Ensuring sustainable funding also continues to be a high priority, MHR plans to diversify its funding base and in 2022 will develop a fundraising strategy to ensure the organisation is able to develop on the ambitions of its new strategic plan.

COVID-19 has exposed gaps in an already stretched mental health system. Thousands of people are experiencing difficulties in accessing mental health treatment and care, with uneven service provision across the country and for different disadvantaged groups. However, discourse around the pandemic also led to an increased public profile for mental health issues including increased public recognition on the need to reform our services and the laws governing those services.

As we begin to emerge from the pandemic, we have a truly historic opportunity to achieve the necessary step-change in core aspects of the Irish mental healthcare system. MHR is ideally placed to continue to be the unifying voice that drives progressive reform of mental health policies, supports and legislative landscape in Ireland.

In line with the 2021- 2022 statement of strategic intent in 2022 MHR will work towards;

- * Human rights compliant mental health legislation
- * Increased investment in mental health in Budget 2023
- * Supporting member organisations to adapt and innovate to COVID-19 and changing operational context
- * Greater awareness of MHR's work among the public

3

GOVERNANCE, STRUCTURE & MANAGEMENT





COMPANY INFORMATION

Bord of Directors:	<p>Michele Kerrigan Michael Culhane Conor Daly Robert McCafferty Joseph Duffy Mark Kennedy Pádraig Love Ali Rochford Aisling Farrell Fiona Tuomey Louise Jennings</p>	<p><i>Resigned:</i> Agnes Higgins (6.7.2021) Lochlann Scott (3.9.2021) Anne Ellis (17.2.2022) Aisling Farrell (17.2.2022) Elizabeth Cogan (10.8.2021)</p>
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Board subcommittees:	Finance & Audit	Nominations	Strategic Planning
	Michael Culhane Conor Daly Pádraig Love	Michele Kerrigan Elizabeth Cogan Pádraig Love	Michele Kerrigan Mark Kennedy

Charity Numbers:	CYN 19958 Charity Registration Number 20078737
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Registered number:	506850
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Registered office:	Coleraine House Coleraine Street Dublin 7
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Independent auditors:	Duignan Carthy O'Neill Limited Chartered Accountants & Registered Auditors, 84 Northumberland Road Ballsbridge, Dublin 4
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Bankers:	<table> <tr> <td>Bank of Ireland 34 College Green, Dublin 2</td> <td>KBC Bank Ire. Plc Sandwith Street Dublin 2</td> <td>Ulster Bank P.O. Box 145 33 College Green</td> </tr> </table>	Bank of Ireland 34 College Green, Dublin 2	KBC Bank Ire. Plc Sandwith Street Dublin 2	Ulster Bank P.O. Box 145 33 College Green
Bank of Ireland 34 College Green, Dublin 2	KBC Bank Ire. Plc Sandwith Street Dublin 2	Ulster Bank P.O. Box 145 33 College Green		

Solicitors:	Mason Hayes & Curran Barrow Street Dublin 4
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Legal name:	Mental Health Reform, a Company Limited by Guarantee
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Name	Role	Bio	Appointed
Michelle Kerrigan	Chairperson	<p>Michele Kerrigan has been the Chief Executive Officer of GROW in Ireland – World Community Mental Health Movement since 2007.</p> <p>Prior to this, she was Deputy CEO of Multiple Sclerosis Society of Ireland with special responsibility for the MS Care Centre.</p> <p>She was involved at both a European and International level representing MS Ireland.</p> <p>She was instrumental in producing two booklets aimed at supporting people with new diagnoses of the MS.</p> <p>She has considerable experience of the statutory and voluntary sector.</p> <p>Michele Kerrigan has contributed to the development of new structures within GROW in Ireland as well as the development, implementation and monitoring of strategic plans. She campaigns for improved mental health services and has a strong focus on a recovery- based approach to mental health provision, which, is in line with GROW in Irelands’ Program of Recovery. Michele holds a diploma in Health and Social Care and Business Computing and a Masters in Management in the Voluntary and Community Sector.</p>	06/07/2021 – 3 rd term

Michael Culhane	Company Secretary & Expert Finance Director	<p>Michael Culhane is Mental Health Reform’s Expert Finance Director and acts as Company Secretary.</p> <p>Michael has held senior positions in the area of finance, audit and financial analysis.</p> <p>He represented An Garda Síochána at Europol and other EU funded programmes and served a term as the chairperson of the Europol Finance Committee.</p> <p>Michael has held senior position in the area of finance, audit and financial analysis.</p> <p>He holds a Bachelor of Commerce Degree from UCD and is Fellow of the Institute of Chartered Accountants in Ireland.</p>	24/11/2020 – 1 st term
Conor Daly	Expert Business Management Director	<p>Conor Daly is our Expert Business and Management Director. Conor is an independent management consultant who provides strategic development advice to a variety of international companies and organisation in the telecoms and high-tech sector. He has expertise in consulting on regulatory and competition issues in the telecoms and postal sector.</p> <p>Conor has held senior management positions with East Telecom in the area of marketing, project management and business and commercial development in Ireland and throughout Europe.</p> <p>Conor holds a PhD in Slavic Language and Literature from University of California, Berkeley and received a Diploma in Applied Finance from the Irish Management Institute in 2002.</p> <p>He is also a member of the of Institute of International and European Affairs (IIEA).</p>	22/07/2020 – 2 nd term

<p>Robert McCafferty</p>	<p>Board Member</p>	<p>Robert McCafferty is MHR's Service User Director. Robert is passionate about fairness and equality for service users and in recent times, he has been passionate about how people in crisis access mental health services through A&E. These passions, and his belief in recovery led Robert to get involved in mental health activism. He has previously been a member of Amnesty International's Experts By Experience Group, and this is where he first came into contact with MHR. He has been a member of MHR's Grassroots Forum for the past 7 years.</p>	<p>06/07/2021 – 2nd term</p>
<p>Michael Joseph Duffy</p>	<p>Board Member</p>	<p>Dr Joseph Duffy is a Member Appointed Director and has been the CEO of Jigsaw – The National Centre for Youth Mental Health since 2016.</p> <p>Dr Duffy has over 25 years' experience as qualified Clinical Psychologist and has worked in the area of mental health managing and delivering services across all age groups and within institutional and community settings. He began his career as a Clinical Psychologist with the Department of Justice/Irish Prison Service where he worked with long term serious offenders for almost 10 years. He held senior positions with the Psychological Society of Ireland and the Granada Institute. He holds a BSc (Hons) in Applied Psychology from the University of Ulster (UU), a Doctorate in Clinical Psychology from Trinity College Dublin (TCD), a Postgraduate Diploma in Statistics (TCD) and an MBA in Health Services Management from the Smurfit Graduate Business School, University College Dublin (UCD). In addition to being a board member of MHR, he is a member of the Executive of the International Association for Youth Mental Health (IAYMH) and is a member of the Advisory Board of the Irish Probation Journal (IPJ).</p>	<p>22/07/2020 – 1st term</p>

Mark Kennedy	Board Member	<p>Mark Kennedy is a Member Appointed Director. He has held a number senior management roles in Ireland, the U.S. and Eastern Europe and has spanned sectors including industry, mental health and social care. Mark places an emphasis on supportive leadership, constant improvement and healthy team dynamics.</p> <p>Mark is a Certified Accountant (ACCA) and holds a HDip in Psychology and has a keen interest in research within the drug and alcohol field, attaining an MSc. in Drug & Alcohol Policy from Trinity College in 2014.</p>	22/07/2020 – 2nd term
Pádraig Love	Expert Public Affairs Director	<p>Pádraig Love is MHR’s Expert Public Affairs Director. Pádraig is an Independent Consultant with extensive experience working in the human resources industry. He has a strong background in recruitment and is skilled in negotiation, international relations, training delivery and management.</p> <p>Pádraig has held a number of senior positions across a number of sectors, including the Public Appointments Service, the European Personnel Selection Office (EPSO), Brussels, the Civil Service and Local Appointments Commission and the Accounts Division of the Department of Agriculture and Food.</p> <p>He holds a Master’s Degree focused in Innovation Management in the Public Service from University of Ulster/Letterkenny Institute of Technology.</p>	22/07/2020 – 2nd term
Ali Rochford	Board Member	<p>Ali Rochford is a lived experience Director on the Board of MHR. Ali has previously worked as a project worker with Gateway Mental Health Project. She is a Mental health advocate and WRAP (Wellness Recovery Action Plan) trainer.</p>	10/07/2019 – 2nd term

<p>Louise Jennings</p>	<p>Expert Director</p>	<p>Louise Jennings is a qualified Solicitor and Mediator and is MHR's Expert Legal Director. Louise has held a number of in house counsel positions and gained significant legal and commercial experience in the Irish, European and Middle East markets.</p> <p>Louise has worked in private practice delivering advice on matters in the areas of Commercial litigation, Company Law, Family Law, Personal Injury, Debt Collection, Insolvency and restructuring matters within the jurisdictions of District Court, Circuit Court, High Court and Supreme Court.</p> <p>Louise received a certificate in Negotiation and Leadership from Harvard Law School, has a Masters of Law from Trinity College Dublin, and Bachelor of Corporate law from University of Galway.</p>	<p>10/08/2021 – 1st term</p>
<p>Fiona Tuomey</p>	<p>Board Member</p>	<p>Fiona Tuomey is a Member Appointed Director and the CEO of HUGG, an organisation which provides a safe, confidential environment for those who are bereaved by suicide who can share their experiences and gain support from each other.</p> <p>Fiona has a strong background in sales and marketing, formerly running her own publishing company; and working with the commercial radio station Today FM and in Alumni Relations with UCD. She has an MSc in Loss & Bereavement from RCSI, which she was awarded in 2018.</p>	<p>06/07/2021 – 1st term</p>

Board Composition

MHR's Board of Directors should not exceed 13 (including the Chairperson). It shall consist of up to 5 Expert Directors, 5 Member Appointed Directors and lived experience/ service user Directors. All Directors are non-executive and sit on the board on a voluntary basis, receiving no remuneration for their time and contribution. The Board is made up of individuals with experience in law, telecommunications, public affairs, business, finance, marketing, psychology and those who have been recipients of mental health services in Ireland and can draw on their personal experiences.

At its AGM in July 2021, Michele Kerrigan was ratified as Chairperson, replacing Agnes Higgins on foot of her resignation. Fiona Tuomey and Aisling Farrell were elected and ratified as member appointed Directors. In August 2021, following a competitive recruitment process, the Nominations Committee recommended Louise Jennings for the position of Expert Legal Director, replacing Elizabeth Cogan. Louise was co-opted until the next AMG. Lochlann Scott resigned as a member appointed director on 3rd September 2021.

Since the last AGM, Aisling Farrell stepped down as CEO from a member organisation, as she held a member appointed Director position on the board, Aisling Farrell offered her resignation from the board of MHR, which was accepted in February 2022. Anne Ellis also offered her resignation from the Board of Directors on 17th February 2022. The board position vacated since the last AGM are due to be filled in the course of 2022.

A Board member's term of office is for 3 years; however, a Director is eligible for re-election for a further two consecutive three years. The maximum term of office for a Director is three consecutive three-year terms. The purpose of applying a limit to the number of terms a Director can hold is to ensure a cycle of new ideas, skills and expertise.

The Board has three sub committees:

The Finance & Audit Committee consists of four members including the Finance Expert Director, two other members and the CEO. The Finance & Audit Committee's responsibilities relate to governance oversight of: reserves and deposits, financial reporting and external audit, internal financial control and financial risk management, budgeting and financial performance, insurance and procurement. The committee has a Terms of Reference approved by the Board.

The Nominations Committee consists of four members of the Board, including the Chairperson of the Board. The Nominations Committee's responsibilities are: to review the role description and person specification for the role of Chairperson; to recommend suitable candidates for the position of Chairperson and to identify and recommend to the Board suitable candidates for other vacancies to the Board. The committee has a Terms of Reference approved by the Board.

The Strategic Planning Committee is an ad-hoc committee which was established in 2020. The purpose of the committee is to conduct a review of MHR's strategic plan, and to guide the development of Mental Health Reform's interim strategic plan.

In 2021, the Board of Directors disbanded the Fundraising Committee to allow for a fundraising analysis to be carried out. It is MHR's intention to re-establish this committee in 2022 during which the Fundraising Committee will be responsible for considering MHR's fundraising strategy, fundraising budget and monitoring fundraising spend, identifying suitable fundraising opportunities and monitoring implementation of the fundraising plan.

Board Meetings

The Board of Directors is required to meet at a minimum six times a year. The board met a total of 7 times in 2021. The CEO prepares a report for each Board meeting, which reports on outcomes and activities against the operational plan. The CEO also prepares a financial report for each Board meeting, which is reviewed and approved at a meeting of the Finance & Audit Committee.

Minutes of the Board are reviewed by the Chairperson and approved as the first order of business at the following Board meeting. The CEO and Chair monitor and maintain an attendance record of board members, however as the Board of Directors includes individuals with lived experience of mental health difficulties we have taken the decision not to provide details of individual board members' attendance records.

Conflicts of Interest

MHR has a conflicts of interest policy. The Board of Directors are required to complete a conflicts of interest declaration when taking up their position on the Board. At the beginning of each board meeting, members have the opportunity to disclose any conflicts of interest which may arise before any agenda items are considered by the board and if any events have arisen which may impact their independence and/or loyalty. Any instances which may arise can be recorded in the minutes. All Board members are reminded that they must update the Company Secretary on any changes in this regard. Mental Health Reform's conflicts of interest policy is due for review in April 2022.

Board recruitment and induction

MHR have a comprehensive recruitment and induction plan for all new Directors as set out in our Corporate Governance Handbook. There are two board categories; 1) Member elected board members which are recruited by way of nomination from all governing members and democratically elected at the AGM and 2) Expert board members which are recruited using Boardmatch and other networks, such as The Wheel and Activelink, selecting candidates based on their skill set, experience and competencies.

Prior to initiating the recruitment process the Chairperson will instigate an audit for the Board Directorship, with a view to ensuring that the Board meets the following good practice guidelines:

- a. The Board has at least one member with relevant financial experience;
- b. The Board has an appropriate mix of experience including both sectoral and corporate, and;
- c. The Board has an appropriate gender balance.

MHR's Nominations Committee is responsible for identifying and recommending suitable candidates for vacancies to the board. In 2021 three new Board Directors joined the Board (Louise Jennings, Fiona Tuomey and Aisling Farrell).

New Directors attend an induction meeting with the CEO and the Chairperson of the board prior to attending their first board meeting and receive coaching on the activities of MHR; its aims, history and success. Prior to this meeting new Directors will receive; a copy of the corporate governance handbook; the organisation's strategic and operational plan; minutes of the previous six Board meetings; a copy of the financial procedures and policies manual, and a copy of Articles and Memorandum of Association. Upon joining the board, new Directors must sign a Code of Conduct declaration and acknowledgement letter in respect of their role and responsibilities as board members.

On an annual basis board members are afforded the opportunity and encouraged to undertake training and development in support of their role as board members to learn new skills and maintain and grow specific areas of expertise. A calendar of training dates is circulated at the first board meeting of the year and each board member carries out a self-assessment of their individual needs.

MHR have agreed a clearly defined mission statement which is communicated to all stakeholders through our formal communication channels via MHR's website and social media platforms and supported by MHR policy documents published on line.

Engagement and communication with stakeholders

It's important that all of our key stakeholders understand what we do and have the utmost trust and respect for the integrity of our

work. As identified through the development of MHR's strategic plans, MHR's key stakeholders include members, those who engage with the mental health services, policy makers and the media. MHR have agreed a clearly defined mission statement which is communicated to all stakeholders through our formal communication channels via MHR's website and social media platforms and supported by MHR policy documents published online.

Risk management

MHR uses its Risk Register to monitor and mitigate controls arising from the risk across the full range of its activities. All legal, financial, strategic, operational and reputational risk are reviewed by the organisation's senior management team on a bi-monthly basis. The Risk Register is examined by the Financial, Audit and Risk Committee at each meeting with a particular focus on any new risks, or increases in the likelihood of a risk occurring. The Board are updated at each meeting on proposed changes to the Risk Register and any updates to internal procedures and policies which will need to be introduced in order to reduce or mitigate new or existing risks. In 2021, the Finance & Audit committee reviewed the risk register, updating the risks and developing an easy to follow traffic light system.

MHR's risk register identifies risks under the following themes:

- * ICT systems fail to meet operational need or compliance requirements, open to cybercrime, theft or fraud
- * Risk of a major incident interrupting operations
- * Loss or reduction in core funding
- * Projects not delivered on time and to standards required due to loss of skilled & knowledgeable staff
- * Significant loss of MHR members

Measures identified and taken to mitigate such risks include:

- * ICT external support in place who provide advice on security and encryption processes which are reviewed regularly, including delivery of annual cybercrime and information security training to all staff.
- * Development of continuity plan to provide for critical incidents, including disaster recovery procedures.
- * Develop multiple funding streams, including corporate funding revenue.
- * Adequate scoping of projects, including capacity assessment should be regularly reviewed and updated. Formal Exit Policy being developed for the transfer of skills and knowledge.
- * Undertake member's meetings and one to one CEO calls to the membership, strengthen relationships and ensure members' views are incorporated in MHR positions and campaigns.

On joining MHR and prior to carrying out activities on its behalf, all staff members are afforded time to read the organisation's key policies and procedures which sets out the rights, responsibilities and conduct required of employees and of the organisation. All employees are required to sign a declaration acknowledging they have read and understood the organisation's policies and procedures.

MHR utilises an external HR consultant ARRA to ensure it remains compliant with employment legislation and ensure remuneration and benefits are benchmarked against industry standard.

Decision making

The Board has full responsibility for the governance and finances of the organisation. The board has several matter that are specifically reserved for its decision including strategic plans, annual operational plan,

annual budgets, approval of all policies, approval of new staff roles, performance review of the CEO, approval of members, approval of annual reports/accounts, procurement contracts above €10,000 and all governance issues including the composition of sub-committees.

The board delegates' day to day management of the business and its operations including all staff matters to the CEO.

At each Board Meeting, the CEO report gives an overview of finances, operations, HR and staffing, fundraising, services and strategy implementation. The board monitors the CEO and the organisation's progress against its annual operational plan, provides feedback and direction to the CEO as the need arises. The Board, represented by the Chairperson, will support the CEO in delivering on all aspects of these duties and if necessary can establish sub committees to assist in or oversee specific tasks.

All spending for goods or services in excess of €10,000 must be referred to the Finance and Audit subcommittee for approval prior to the expenditure being incurred and the subcommittee is provided with a list of all expenditure between €5,000 - €10,000 at each subcommittee meeting for that period.

Investment policy

MHR does not hold any fixed or cash assets for the purposes of investing, therefore the organisation does not have an Investment Policy.

Governance code compliance

The Board of Directors are committed to maintaining the highest levels of corporate governance and transparency. In October 2021, MHR are in compliance with the Charities Regulators Governance Code and completed our annual return in 2021. MHR conducts an annual self-assessment against the Code, reviewing and updating its policies accordingly. MHR's direct fundraising

activity is guided by the Charities Regulator’s “Guidelines for Charitable Organisations on Fundraising from the Public.”

Director’s remuneration

No remuneration or other benefits were paid to any directors directly or indirectly. No expenses were incurred by the directors in 2021.

Key Management Team

Key management personnel includes Fiona Coyle (CEO), Niamh O’Connor (Communications and Engagement Manager), and Audry Deane (Policy and Research Manager). The average number of employees in 2021 was 12. The average number of volunteers was 0.

The CEO’s salary for the year was €80,000. In addition, 5% of her salary was paid as employer contribution into a defined contribution pension on her behalf. The CEO is appointed by the Board of Directors however is not a board member.

In 2021, all other staff members fell within the following bands:

€30,000-€39,000	5
€40,000-€49,000	6
€50,000-€64,000	1

Performance Management

One week prior to each board meeting, the Board of Directors receive a pack which includes the agenda and supporting documents which will be up for discussion, this allows the Directors to adequately prepare. They also engage in a Board performance review annually which assists in identifying specific development needs of the board for the forthcoming year.

MHR is committed to providing the right conditions and support for everyone to achieve excellent performance and to achieve their full potential. On an annual basis MHR’s CEO and the Board of Directors agree to allocate a budget for training and development activities. All staff members take part in the organisation performance management process.

In order to ensure staff members can perform their roles to the highest of standards, MHR’s CEO and senior management carry out regular discussions with members of their team about their development needs and aspirations. This includes ensuring that reviews are scheduled throughout the year to monitor an individual’s progress against individual and organisational objectives set and jointly evaluating future training and development needs, with both parties taking the initiative.

4

FINANCIAL REVIEW



FINANCIAL REVIEW

The financial outcome for 2021 is set out in the statement of financial activities.

Income in 2021 was €815,992 which was a 25% increase on 2020. This increase is reflective of the expansion of MHR’s innovation workstream which became a focus of work during the pandemic.

Fundraising and Donations totalled less than 1% of MHR’s overall revenue in 2021.

In 2021, MHR continued to face challenges in meeting its fundraising targets as activities continued to be impacted by COVID-19.

Fundraising and Donations totalled less than 1% of MHRs overall revenue in 2021. This is below the yearly target. MHR exceeded its membership income target and secured one additional unrestricted funding source. This additional income offset the deficit in fundraising income.

Total expenditure totalled €792,694, a 23% increase on 2020. This includes:

- * Programme costs were €242,416, which was a 219% increase on programme costs last year. This number reflects a number of research projects, which were carried out in 2021. Programme costs represented 30% of overall expenditure
- * Staff costs totalled €550,278, which was a 2% increase on 2020, and represents 70% of total expenditure.

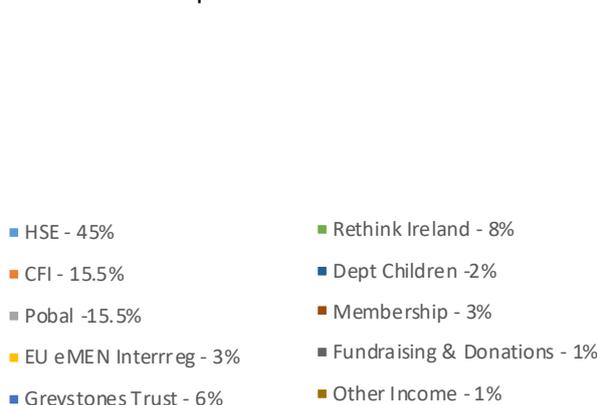
As we account on an accrual basis, we have also deferred over €187,611 in revenue.

This figure accounts for programmes that did not happen in 2021 including €42,785 under our HSE grant for our prison research project. This figure also reflects projects that have been extended into 2021 including capacity building activities under our CFI Comic Relief funded Brave New Connections project. Our accounts are also compliant with SORP this figure also represents several projects in which we received funding for in 2021 but with the project period expanding into 2022 – €25k HSE funded digital divide project and funding of 20k from DCEDIY to support activities in relation to the Disability Participation and Consultation Network.

Funders and income sources

In 2021, MHR received funding from a number of sources, including government grants, philanthropic grants and other income streams. The Board of Directors is cognisant of the fact that 61% of MHR’s funding comes from government agencies and the need to develop diverse and sustainable funding channels in order to reduce our reliance on government funding. As a result, MHR’s operational plan for 2022 places an emphasis on identifying alternative funding sources for the coming year and the development of a corporate fundraising strategy.

Funding and Income Streams



Reserves policy

MHR has a board approved reserves policy as part of its good governance requirements and to ensure strong financial controls and the internal management of its resources. MHR's reserves policy stipulates that the organisation must hold a **minimum of 3 months' reserves** equal to its average expenditure, this would facilitate the remuneration of employees and maintain the organisation's running costs for the period until new funding can be sourced.

As per the policy, the reserves can be used to:

- * Cover gaps in available funding as MHR does not have any long term guaranteed annual income
- * Fund shortfall in income being received from funders
- * In the event of unexpected difficulties or crisis.

Both the Finance & Audit subcommittee and the Board consider the level of reserves MHR has in place on a bi-monthly basis. It is a fundamental part of the organisation's planning, budget and forecasting cycle. It informs our strategic and budgetary planning and future activities.

As of the 31st December 2021, MHR had unrestricted reserves of €220,587, based on an average monthly expenditure of €66,456. MHR is in compliance with its minimum reserves policy.

Going Concern

Throughout 2021, the Directors of MHR have carefully monitored the impact of COVID-19, on current and future work. In particular, noting the uncertainty over the duration of this disruption. The Directors have also recognised that two core funding streams will come to an end in 2022.

The organisation has cash and cash equivalents of (€418,599) at the 31 December 2021.

Additional grants have been identified and applications made. The Directors are in a position to manage the activities of the organisation such that existing funds available together with committed funding will be sufficient to meet the organisation's obligations and to continue as a going concern for a period of at least 12 months from the date of the financial statement. On that basis, the Directors do not consider that a material uncertainty exists in relation to going concern and have deemed it appropriate to prepare the financial statements on a going concern basis. The financial statements do not include any adjustments that would result if the organisation was unable to continue as a going concern.

Research and Development

There were no research and development costs incurred during the year.

Post Balance Sheet Events

There have been no significant events affecting the company since the year end and the directors do not envisage any substantial changes to the nature of the business.

Political Contributions

No political donations were given by the company during the year.

Accounting Records

The measures taken by the directors to ensure compliance with the requirements of Sections 281 to 285 of the Companies Act 2014 regarding adequate accounting records are the implementation of necessary policies and procedures for recording transactions, the employment of competent accounting personnel with appropriate expertise, and the provision of adequate resources to the financial function. The accounting records are maintained at Coleraine House, Coleraine Street, Dublin 7.

Statement on relevant audit information

Each of the persons who are directors at the time when this Directors' report is approved has confirmed that:

- * so far as the director is aware, there is no relevant audit information of which the Company's auditors are unaware, and
- * the director has taken all the steps that ought to have been taken as a director in order to be aware of any relevant audit information and to establish that the Company's auditors are aware of that information.

Auditors

In accordance with Section 383(2) of the Companies Act 2014, the auditors, Duignan Carthy O'Neill Limited, Chartered Accountants, have indicated their willingness to continue in office.

On behalf of the Board



Michele Kerrigan
Director



Michael Culhane
Director

19 May 2022

5

INDEPENDENT AUDITORS' REPORT



DIRECTORS

The Directors present their annual report and the audited financial statements for the year ended 31 December 2021.

Directors' responsibilities statement

The Directors are responsible for preparing the Directors' Report and the financial statements in accordance with Irish law and regulations.

Irish company law requires the Directors to prepare the financial statements for each financial year. Under the law, the Directors have elected to prepare the financial statements in accordance with the Companies Act 2014 and Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (including Charities SORP (FRS 102)).

Under company law, the Directors must not approve the financial statements unless they are satisfied they give a true and fair view of the assets, liabilities and financial position of the Company as at the financial year end date, of the surplus or deficit for that financial year and otherwise comply with the Companies Act 2014.

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

- * select suitable accounting policies for the Company's financial statements and then apply them consistently;
- * make judgments and accounting estimates that are reasonable and prudent;
- * state whether the financial statements have been prepared in accordance with applicable accounting standards, identify those standards, and note the effect and the reasons for any material departure from those standards; and

- * prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Company will continue in business.

The Directors are responsible for ensuring that the Company keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the Company, enable at any time the assets, liabilities, financial position and profit or loss of the Company to be determined with reasonable accuracy, enable them to ensure that the financial statements and Directors' Report comply with the Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the Company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

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

Directors

The Directors who served during the year were:

Ali Rochford

Pádraig Love

Conor Daly

Robert McCafferty

Michael Joseph Duffy

Mark Kennedy

Michele Kerrigan

Louise Jennings (appointed 10 August 2021)

David Keegan (resigned 16 February 2021)

Aisling Farrell (appointed 10 August 2021,
resigned 17 February 2022)

Laurence Malone (resigned 16 February 2021)

Michael Culhane (appointed 16 February 2021)

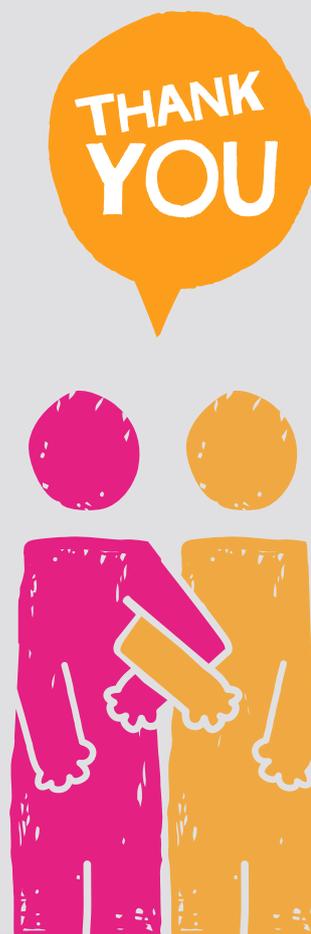
Fiona Tuomey (appointed 10 August 2021)

Agnes Higgins (resigned 10 August 2021)

Elizabeth Cogan (resigned 10 August 2021)

Anne Ellis (resigned 17 February 2022)

Lochlann Scott (resigned 17 February 2022)



REPORT ON THE AUDIT OF THE FINANCIAL STATEMENTS

Opinion

We have audited the financial statements of Mental Health Reform (the 'Company') for the year ended 31 December 2021, which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows, the Statement of Changes in Funds and the notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is Irish law and Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'.

In our opinion, the accompanying financial statements:

- * give a true and fair view of the assets, liabilities and financial position of the Company as at 31 December 2021 and of its surplus for the year then ended;
- * have been properly prepared in accordance with Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'; and
- * have been properly prepared in accordance with the requirements of the Companies Act 2014.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are

independent of the Company in accordance with the ethical requirements that are relevant to our audit of financial statements in Ireland, including the Ethical Standard issued by the Irish Auditing and Accounting Supervisory Authority (IAASA), and we have fulfilled our other ethical responsibilities in accordance with these requirements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the directors' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Directors with respect to going concern are described in the relevant sections of this report.

Other information

The directors are responsible for the other information. The other information comprises the information included in the Annual report, other than the financial statements and our Auditors' report thereon. Our opinion on the financial statements does not cover the

other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on other matters prescribed by the Companies Act 2014

Based solely on the work undertaken in the course of the audit, we report that:

- * in our opinion, the information given in the Directors' Report is consistent with the financial statements; and
- * in our opinion, the Directors' Report has been prepared in accordance with applicable legal requirements.

We have obtained all the information and explanations which we consider necessary for the purposes of our audit.

In our opinion the accounting records of the Company were sufficient to permit the financial statements to be readily and properly audited, and the financial statements are in agreement with the accounting records.

Matters on which we are required to report by exception

Based on the knowledge and understanding of the Company and its environment obtained in the course of the audit, we have not identified any material misstatements in the Directors' Report.

The Companies Act 2014 requires us to report to you if, in our opinion, the disclosures of directors' remuneration and transactions required by sections 305 to 312 of the Act are not made. We have nothing to report in this regard.

Respective responsibilities and restrictions on use

Responsibilities of directors

As explained more fully in the Directors' Responsibilities Statement on page 1, the Directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Directors determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditors' responsibilities for the audit of the financial statements

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

A further description of our responsibilities for the audit of the financial statements is located on the IAASA's website at: <https://www.iaasa.ie/Publications/Auditing-standards>. This description forms part of our Auditors' Report.

The purpose of our audit work and to whom we owe our responsibilities

This report is made solely to the Company's members in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the Company's directors 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 Company and the Company's members for our audit work, for this report, or for the opinions we have formed.

Elizabeth Murphy

for and on behalf of
Duignan Carthy O'Neill Limited

Chartered Accountants
Registered Auditors

84 Northumberland Road
Ballsbridge
Dublin 4

19 May 2022

**STATEMENT OF FINANCIAL ACTIVITIES
(INCLUDING INCOME & EXPENDITURE ACCOUNT)
AS AT 31 DECEMBER 2021**

		Restricted funds	Unrestricted funds	Total funds	<i>Total funds</i>
		2021	2021	2021	2020
	Note	€	€	€	€
<u>Income from:</u>					
Donations & Membership			26,845	26,845	28,321
<i>Charitable Activities</i>					
Statutory and philanthropic grants		778,569		778,569	616,783
Other Activities			10,508	10,508	6,412
Investments			147	147	22
Total Incoming Resources	4	778,569	37,500	816,069	651,538
<u>Expenditure on:</u>					
Raising funds, Events & campaigns			134	134	1,437
Charitable Activities		770,100	13,991	784,091	641,780
Governance Costs		8,469		8,469	6,435
Total Resources Expended		778,569	14,125	792,694	649,652
Net Income/(expenditure)			23,375	23,375	<u>1,886</u>
Transfer between funds					
Net movement in funds			23,375	23,375	1,886
Reconciliation of funds					
Total funds brought forward		(7,951)	197,212	189,261	187,375
Total funds carried forward		<u>(7,951)</u>	220,587	212,636	189,261

All activities relate to continuing operations. There are no other recognised gains or losses other than those listed above and the net income for the financial year.

**BALANCE SHEET
AS AT 31 DECEMBER 2021**

	Note	2021 €	2020 €
Current assets			
Debtors: amounts falling due within one year	8	14,906	26,746
Cash at bank and in hand	9	418,599	565,512
		<u>433,505</u>	<u>592,258</u>
Creditors: amounts falling due within one year	10	(220,869)	(402,997)
Net current assets		212,636	189,261
Total assets less current liabilities		<u>212,636</u>	<u>189,261</u>
Net assets		<u>212,636</u>	<u>189,261</u>
Capital and reserves			
Reserves		212,636	189,261
Shareholders' funds		<u>212,636</u>	<u>189,261</u>

The financial statements were approved and authorised for issue by the board:

Michele Kerrigan
Director

Michael Culhane
Director

Date: 19 May 2022

The notes on pages 53 to 62 form part of these financial statements.

**STATEMENT OF CHANGES IN FUNDS
FOR THE YEAR ENDED 31 DECEMBER 2021**

	Income and expenditure account	Total funds
	€	€
At 1 January 2020	187,375	187,375
Comprehensive income for the year		
Deficit for the year	1,886	1,886
At 1 January 2021	189,261	189,261
Comprehensive income for the year		
Surplus for the year	23,375	23,375
Total comprehensive income for the year	23,375	23,375
At 31 December 2021	<u>212,636</u>	<u>212,636</u>

**STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2021**

	2021	2020
	€	€
Cash flows from operating activities		
Surplus/(deficit) for the financial year	23,375	1,886
Adjustments for:		
Interest received	(147)	(22)
Decrease in debtors	11,840	14,693
(Decrease)/increase in creditors	(183,689)	276,749
Increase in amounts owed to participating ints	1,561	-
Net cash generated from operating activities	(147,060)	293,306
Cash flows from investing activities		
Interest received	147	22
Net cash from investing activities	147	22
Net (decrease)/increase in cash and cash equivalents	(146,913)	293,328
Cash and cash equivalents at beginning of year	565,512	272,184
Cash and cash equivalents at the end of year	418,599	565,512
Cash and cash equivalents at the end of year comprise:		
Cash at bank and in hand	418,599	565,512
	418,599	565,512

The notes on pages 53 to 62 form part of these financial statements.

1. General information

Mental Health Reform is a company limited by guarantee, incorporated in the Republic of Ireland. The Registered Office is, Coleraine House, Coleraine Street, Dublin 7, which is also the principal place of business of the company. The nature of the company's operations and its principal activities are set out in the Director's Report.

2. Accounting policies

2.1 Basis of preparation of financial statements

The Financial statements have been prepared in accordance with accounting standards generally accepted in Ireland and Irish Statute comprising the Companies Act 2014, and the Charities SORP (FRS102). Accounting Standards generally accepted in Ireland in preparing financial statements giving a true and fair view are those published by Chartered Accountants Ireland and issued by the Financial Reporting Council.

Mental Health Reform is constituted under Irish company law as a company limited by Guarantee and is a registered charity and has adopted and reported its performance in accordance with the format provided for in the Charities SORP and in particular reports its performance for the financial year in the format of the SORP's Statement of Financial Activities (SOFA).

Companies Act 2014 which became effective in law on 1 June 2015 and from that date applied the format and content of financial statements requirements appropriate for a company trading for the profit of its members to a company that is not for profit organisation. In order to provide information relevant to understanding the stewardship of the directors and the performance and financial position of the charity, Mental Health Reform has prepared its financial statements in accordance with the formats provided for in the Charities SORP (FRS102) consistent with the prior year.

The directors consider the adoption of the SORP requirements is the most appropriate accounting to properly reflect and disclose the activities of the organisation. Had the Companies Act format and content of financial statements requirements suitable for a company trading for the profit of its members been presented instead, a profit and loss account with related notes showing items such as Turnover and Cost of Sales would have been reported with a "profit" on ordinary activities showing before taxation.

2.2 Company name

The company received approval under Section 1180(1) of the Companies Act 2014 to omit the word 'Company Limited by Guarantee' from its name.

2.3 Income

The income shown in the income and expenditure account represents grants from funders, donations, payments for research services, deposit interest, training and membership income invoiced during the period. Income not applied or expended in the period is deferred to future accounting periods.

2.4 Debtors

Short term debtors are measured at transaction price, less any impairment. Loans receivable are measured initially at fair value, net of transaction costs, and are measured subsequently at amortised cost using the effective interest method, less any impairment.

2.5 Cash and cash equivalents

Cash is represented by cash in hand and deposits with financial institutions repayable without penalty on notice of not more than 24 hours. Cash equivalents are highly liquid investments that mature in no more than three months from the date of acquisition and that are readily convertible to known amounts of cash with insignificant risk of change in value.

In the Statement of Cash Flows, cash and cash equivalents are shown net of bank overdrafts that are repayable on demand and form an integral part of the Company's cash management.

2.6 Financial instruments

The company only enters into basic financial instruments transactions that result in the recognition of financial assets and liabilities like trade and other accounts receivable and payable, loans from banks and other third parties and loans to related parties.

2.7 Creditors

Short term creditors are measured at the transaction price. Other financial liabilities, including bank loans, are measured initially at fair value, net of transaction costs, and are measured subsequently at amortised cost using the effective interest method.

2.8 Government grants

Grants are accounted under the performance model as permitted by FRS 102. Grants relating to expenditure on tangible fixed assets are credited to the statement of financial activities at the same rate as the depreciation on the assets to which the grant relates. The deferred element of grants is included in creditors as deferred income.

2.9 Pensions

The Company operates a defined contribution plan for its employees. A defined contribution plan is a pension plan under which the Company pays fixed contributions into a separate entity. Once the contributions have been paid the Company has no further payments obligations.

The contributions are recognised as an expense in the Income Statement when they fall due. Amounts not paid are shown in accruals as a liability in the Balance Sheet. The assets of the plan are held separately from the Company in independently administered funds.

2.10 Interest income

Interest income is recognised in profit or loss using the effective interest method.

3. Judgments in applying accounting policies and key sources of estimation uncertainty

The preparation of these financial statements requires management to make judgements, estimates and assumptions that affect the application of policies and reported amounts of assets and liabilities, income and expenses.

Judgements and estimates are continually evaluated and are based on historical experiences and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

The company makes estimates and assumptions concerning the future. The resulting accounting estimates will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

Going Concern

The directors have prepared budgets and cash flows for a period of at least twelve months from the date of the approval of the financial statements which demonstrate that there is no material uncertainty regarding the company's ability to meet its liabilities as they fall due, and to continue as a going concern. On this basis the directors consider it appropriate to prepare the financial statements on a going concern basis. Accordingly, these financial statements do not include any adjustments to the carrying amounts and classification of assets and liabilities that may arise if the company was unable to continue as a going concern.

COVID-19: Mental Health Reform assesses the current impact of the pandemic on a continuous basis as part of its ongoing risk management. The company is continuing to deliver planned services in 2022 and as a result of contact with our funders, we understand that all planned funding will be received in 2022 with some of this funding received in advance in 2021.

The Directors have assessed and continue to assess the risks associated with the pandemic and are satisfied that Mental Health Reform is a going concern.

4. Analysis of income

	2021	2020
	€	€
HSE Grant	367,581	<i>366,174</i>
eMental Health Project (Interreg/ Greystones)	36,334	<i>55,364</i>
Pobal Funding	83,622	<i>82,521</i>
Community Foundation for Ireland	38,209	<i>54,675</i>
Adapt/Respond/Coll	88,098	-
Slainte Care	43,109	<i>4,987</i>
DCYA	18,617	-
Rethink Ireland	67,483	-
The Digital Project	35,516	<i>21,706</i>
The Greystones Trust-eMEN	-	<i>18,369</i>
The Giving Circle	-	<i>4,997</i>
Hospital Sunday Fund	-	<i>3,000</i>
Other Grant Income	-	<i>4,990</i>
Membership	22,785	<i>23,125</i>
Donations	4,060	<i>5,196</i>
Fundraising Income	495	<i>6,412</i>
Other Income	10,013	-
Interest income	147	<i>22</i>
	<u>816,069</u>	<i><u>651,538</u></i>

5. Auditors' remuneration

	2021	2020
	€	€
Fees payable to the auditor	<u>4,612</u>	<i><u>4,612</u></i>

6. Employees

Staff costs were as follows:

Wages and salaries	484,563	457,157
Employer PRSI	53,526	50,384
Staff pension costs - defined contribution schemes	10,960	13,667
	<u>549,049</u>	<u>521,208</u>

The average monthly number of employees, including the Executive Director, during the year was as follows:

	2021	2020
	No.	No.
Employees	<u>12</u>	<u>11</u>

	2021	2020
	No.	No.
Employment benefits breakdown		
€0 - €60,000	11	10
€60,000 - €80,000	-	-
€80,000 - €89,999	1	1
	<u>12</u>	<u>11</u>

The CEO of Mental Health Reform was the only staff member whose employment benefits were in excess of €80,000.

7. Taxation

The company is exempt from taxation due to its charitable status, charity number 20078737 (CHY number:19958)

8. Debtors

	2021	2020
	€	€
Other debtors	3,068	2,957
Prepayments	1,368	1,853
Accrued income	10,470	21,936
	<u>14,906</u>	<u>26,746</u>

9. Cash and cash equivalents

	2021	2020
	€	€
Cash at bank and in hand	418,599	565,512
	<u>418,599</u>	<u>565,512</u>

10. Creditors: Amounts falling due within one year

	2021	2020
	€	€
Trade creditors	4,749	2,170
Amounts owed to other participating interests	1,561	-
Taxation and social insurance	15,471	15,429
Pension	2,939	1,444
Other creditors	2,938	-
Accruals	5,600	9,107
Deferred income	187,611	374,847
	<u>220,869</u>	<u>402,997</u>

11.

Deferred income

	2021	<i>2020</i>
	€	<i>€</i>
Community Foundation	8,431	<i>11,640</i>
SSNO - Pobal	2,941	<i>11,569</i>
HSE	42,785	<i>42,665</i>
Slainte Care - Pobal	-	<i>43,145</i>
Giving Circle of Ireland	3	<i>3</i>
Demand Digital - CFI	-	<i>4,900</i>
Social Innovation (from Rethink Ireland)	-	<i>54,000</i>
Adapt/Respond/Coll	78,902	<i>167,000</i>
Dept of Children	20,000	<i>20,000</i>
Emen (Interreg) the Greystones Trust	19,841	<i>5,631</i>
Demand Digital - the Greystones Trust	14,708	<i>14,294</i>
	<u>187,611</u>	<i><u>374,847</u></i>

The above amounts comprise monies received in respect of specific projects where the performance related tasks have not been completed at year-end. The funders are aware and have agreed to the deferral of these grants at year-end.

12. **Company status**

The company is limited by guarantee and consequently does not have share capital. Each of the members is liable to contribute an amount not exceeding €1 towards the assets of the company in the event of liquidation.

13. **Contingent liabilities**

As outlined in Note 2.8, the company has received government grants for revenue purposes. Should these assets not be used for the purpose specified, the grants will become repayable in whole or in part.

14. Reconciliation of movements in funds

	Opening Surplus 01/01/21	2021	<i>Closing Surplus at 31/12/21</i>	<i>2020</i>
	€	€	€	€
Closing Reserves allocated as follows:				
Restricted Funds	(7,951)	-	<i>(7,951)</i>	<i>(7,951)</i>
Unrestricted Funds	197,212	23,375	<i>220,587</i>	<i>197,212</i>
	<u>189,261</u>	<u>23,375</u>	<i><u>212,636</u></i>	<i><u>189,261</u></i>

15. Pension commitments

The company operates a defined contribution pension scheme for all employees. The assets of the scheme are held separately to the assets of the company. Contributions to the scheme are charged to the statement of financial activities as they become payable.

16. Pobal grant

During the financial year, Mental Health Reform (MHR) received a grant from the Department of the Environment, Community and Local Government, dispensed by Pobal, for the period from 1 July 2019 to 30 June 2022. The grant is for the Scheme to Support National Organisations (SSNO). The total monies that will be awarded in respect of the grant are €269,835 of which €90,000 was in respect of the current year. The grant has been awarded and restricted to assist with staffing and core overhead costs and is not capital in nature. No capital grant was received from Pobal during the year or from any other source. The grant was used by MHR in accordance with the signed agreement between Pobal and themselves, dated 14 June 2019. MHR have obtained an up to date Tax Clearance Certificate as in compliance with the relevant Circulars, including Circular 44/2006.

Pobal grant	
	2021
	€
Opening balance	11,569
Amount due for 2020	(52)
Amount received	74,994
Amount due at year-end	52
Released to income	(83,622)
Deferred at 31 December 2021	<u>2,941</u>

17. HSE grant

Mental Health Reform (MHR) received a grant from the HSE for the calendar year 2021. The total monies that were awarded in respect of the grant in 2021 were €385,367, including deferred income carried forward. The grant has been awarded and restricted to assist with staffing, core overhead costs and direct project costs of the eMEN project, and is not capital in nature. No capital grant was received from the HSE during the year or from any other source. The grant was used by MHR in accordance with the signed agreement between the HSE and themselves, dated November 2020. MHR have obtained an up to date Tax Clearance Certificate as in compliance with the relevant Circulars, including Circular 44/2006.

HSE grant	
	2021 €
Opening balance - deferred	42,665
Amount due for 2020	-
Amount received	367,702
Released to income	(367,581)
Deferred at 31 December 2021	<u>42,785</u>

18. Related party transactions

Payments made to directors in respect of services rendered during the year were €Nil (2020: €Nil). During the year €775 was reimbursed to the Chief Executive Officer for expenses paid on behalf of Mental Health Reform during the year.

No other related party transactions occurred during the year.

19. Key Management Personnel Remuneration

The total management remuneration for the senior management team was €111,383, comprising of 3 individual team members in 2021 (2020: €166,235, comprising of 4 team members). No director received remuneration from the company during the year.

20. Post balance sheet events

There have been no significant events affecting the company since the year-end.

21. Controlling party

The company is controlled by its members. It is the members responsibility to elect management to look after the affairs of the company.

22. Approval of financial statements

The board of Directors approved these financial statements for issue on 19 May 2022

**DETAILED INCOME AND EXPENDITURE ACCOUNT
FOR THE YEAR ENDED 31 DECEMBER 2021**

	2021	2020
	€	€
Income	815,922	651,516
	<u>815,922</u>	<u>651,516</u>
Less: overheads		
Staff costs	(550,278)	(539,027)
Consultation, education and advocacy costs	(158,176)	(27,851)
Running Costs	(84,240)	(82,774)
Operating surplus/(deficit)	23,228	1,864
Interest receivable	147	22
Surplus/(Deficit) for the year	<u>23,375</u>	<u>1,886</u>

	2021	2020
	€	€
Income		
Community Foundation for Ireland	38,209	54,675
HSE Grant	367,581	366,174
Pobal Funding	83,622	82,521
eMental Health Project	36,334	55,364
Other Grant Income	-	4,990
The Greystones Trust-eMEN	-	18,369
Slainte Care	43,109	4,987
The Giving Circle	-	4,997
The Digital Project	35,516	21,706
Adapt/Respond/Coll	88,098	-
DCYA	18,617	-
Rethink Ireland	67,483	-
Hospital Sunday Fund	-	3,000
Membership	22,785	23,125
Donations	4,060	5,196
Fundraising Income	495	6,412
Other Income	10,013	-
	<u>815,922</u>	<u>651,516</u>

	2021	2020
	€	€
Staff costs		
Staff salaries	484,563	457,157
Employer PRSI	53,526	50,384
Staff pension costs - defined contribution schemes	10,960	13,667
Staff training	(1,485)	11,675
Motor running costs	62	276
Hotels, travel and subsistence	537	3,264
Sundry Staff Expenses	1,938	829
Advertising and promotion	177	-
eWorking costs	-	1,775
	<u>550,278</u>	<u>539,027</u>

	2021	2020
	€	€
Consultation, education and advocacy costs		
Workshops, seminars and study tours	5,190	20,960
Networking events	-	512
Publications and materials	16,634	800
Computer costs	2,205	2,205
Sundry Advocacy Expenses	59,208	437
Research costs	68,816	864
Communication Support	6,123	2,073
	<u>158,176</u>	<u>27,851</u>

	2021	2020
	€	€
Running Costs		
Auditors' remuneration	5,556	5,190
Accountancy fees	7,973	7,858
Internal audit costs/ Governance	2,913	1,245
Fundraising Events	134	1,436
ICT (Telephone and fax)	3,075	2,915
Insurances	3,583	3,176
Legal and professional	17,234	19,783
Rent, rates and utilities	27,152	24,032
Sundry Office Expenses	17,917	15,177
Bad debt expense	(1,297)	1,962
	<u>84,240</u>	<u>82,774</u>

	2021	2020
	€	€
Interest receivable		
Bank interest receivable	147	22
	<u>147</u>	<u>22</u>



The Scheme to Support National Organisations is funded by the Government of Ireland through the Department of Rural and Community Development.

