Mental Health Reform

Annual Report 2024

Members

Governing Members

- 3ts turn the tide
- Barnardos – Because childhood lasts a lifetime
- DePaul
- Finglas Addiction Support Team
- Irish Penal Reform Trust
- A Lust for Life
- BeLonG To LGBTQ+ Youth Ireland
- dfi
- First Fortnight – The Art of Mental Health
- Irish Refugee Council
- ADHD Ireland – Support • Education • Acceptance
- Bodywhys – The Eating Disorders Association of Ireland
- Doras
- Focus Ireland
- ISPCC
- ahead – creating inclusive environments in education and employment for people with disabilities
- Care After Prison
- Dual Diagnosis Ireland
- mind. futures
- Jigsaw – Young people's health in mind
- AkiDwA – Network of Migrant Women
- Cairde – Challenging ethnic minority health inequalities
- Dublin Simon Community
- Gateway Mental Health Project
- KDYS – Kerry Diocesan Youth Service
- Alcohol Action Ireland
- Children's Rights Alliance
- Dyslexia Ireland
- Grow Mental Health
- Mental Health Ireland
- ALONE
- Chime – The National Charity for Deaf and Hard of Hearing People
- Dyspraxia DCD Ireland
- HAIL
- MQI – Merchants Quay Ireland – Homeless & Drugs Services
- The Alzheimer Society of Ireland
- Community Therapy Ireland
- Exchange House Travellers Service
- Helplink Mental Health
- MyMind – Centre for Mental Wellbeing
- Amnesty International
- Cork Mental Health – Founded in 1962
- Family Resource Centre National Forum – Supporting • Strengthening • Empowering
- HUGG – Healing Untold Grief Groups
- NWC – National Women's Council
- AsIAm – Ireland's Autism Charity
- Daughters of Charity Child and Family Service
- Fighting Blindness – Cure. Support. Empower.
- Huntington's Disease Association of Ireland
- NiteLine

Pavee Point Traveller and Roma Centre

spunout

Peer Advocacy in Mental Health – Finding your voice, discovering hope

Suicide or Survive

Peter McVerry Trust

Threshold Training Network

pieta

Traveller Counselling Service

RehabGroup – Investing in People, Changing Perspectives

turn2me.org – a lifeline online

respond – building homes, improving lives

USI – Union of Students in Ireland – Aontas na Mac Léinn in Éirinn

SAMARITANS

Vision Ireland

Shine – support | advocacy | education for mental illness

Youth Advocate Programmes Ireland

Slí eile – Growing together

Smashing Times – International Centre for the Arts & Equality

Associate Members

APPI

Irish Foster Care Association

AOTI – Association of Occupational Therapists of Ireland

Irish Society of Chartered Physiotherapists

Bloomfield Health Services

Kyrie Farm

Cork Counselling Services Est. 1982

napcp – National Association for Professional Counselling and Psychotherapy

European Association of Professional Hypnotherapists

The Psychological Society of Ireland – Cumann Síceolaithe Éireann

St John of God

FTAI

Irish Council for Psychotherapy

iacat – Irish Association of Creative Art Therapists

St Patrick's Mental Health Services

IASW – Irish Association of Social Workers

IASLT – The Irish Association of Speech + Language Therapists

Affiliate Members

Irish Online Counselling & Psychotherapy Service Est 2011

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Introduction

Reference and Administrative Information

Directors


Michele Kerrigan


Martin Markey


John Church


Nicola Byrne


Louise Jennings


Sean Sheridan


Stephanie Manahan


Ken Kilbride


Fiona Tuomey


Sheila Gilheany


Ciara Glynn

Chairperson	Michele Kerrigan
Charity Number	CHY19958
Charities Regulatory Authority Number	20078737
Company Registration Number	506850
Registered Office and Principal Address	Coleraine House Coleraine Street Dublin 7
Auditors	Whelan Dowling & Associates Chartered Accountants and Statutory Auditors Block 1, Unit 1 & 4 Northwood Court Santry Dublin 9
Principal Bankers	Bank of Ireland 2 College Green Dublin 2 Ireland
Solicitors	Dillon Eustace Solicitors 33 Sir John Rogerson's Quay Grand Canal Dock Dublin 2

For a list of directors who served during 2024 see the Governance section on page 57.

Michele Kerrigan
Chairperson
Mental Health Reform

Chairpersons Report

Financial year ended 31 December 2024

The 2024 annual report is my pleasure to present to you as the Chair of Mental Health Reform (MHR) on behalf of the Board of Directors. MHR is currently in the process of executing our strategic plan, “Making Mental Health Matter”, for the years 2023- 2028.

In 2024, we collaborated with our 86 member organisations to address a diverse array of issues, including mental health in the prison service, a topic that is particularly dear to me in Care After Prisons. On November 29, 2024, a general election took place in Ireland. We were successful in securing the inclusion of key commitments in the Programme for Government, which was significantly aided by the subsequent reappointment of Minister Mary Butler TD to the mental health portfolio and her elevation to Chief Whip. MHR was very active in our efforts to ensure that mental health was a political priority for all political parties. The Minister should also be commended for the increase in the mental health budget in 2024.

We are committed to providing assistance and support in the further development of government policy, including the enactment of the Mental Health Bill 2024, Sharing the Vision, and the associated policies on suicide prevention, research, and child and adolescent mental health policy.

Governance and sustainability continued to be major concerns for the MHR Board in 2024 and into 2025. We are grateful for the ongoing support of the HSE, the Department of Rural and Community Development, and Community Foundation Ireland for the work of MHR in 2024.

We will persist in our pursuit of the ambitious agenda outlined in our Strategic Plan in 2025. This encompasses the continued obligation to enhance the accessibility of mental health services in Ireland, foster greater collaboration and innovation, and ensure financial sustainability. Our health services are currently experiencing significant transformation and opportunity. MHR will persist in its collaboration with our members, the HSE/Department of Health, and the new health regions to assist in the development of mental health policies and priorities that are consistent with the sector's objectives and our strategic plan.

Lastly, I would like to extend my heartfelt appreciation for the honour of serving as the Chairperson of this Board. We have accomplished a great deal during my tenure. The Irish Mental Health Coalition, which is now known as Mental Health Reform, was established in 2006. It was initiated by five organisations: Shine, Bodywhys, Grow Mental Health, Irish Advocacy Network, and Amnesty International. Three service providers, an advocacy organisation, and a human rights organisation comprised the coalition. The pillars of service providers, advocacy, and human rights were present from the outset and remain so to this day. I have been fortunate enough to be a member of this exceptional organisation since its inception. I have observed the establishment of an organisation that is highly regarded for its dedication to the progressive reform of mental health services and supports.

This organisation achieves this through collective advocacy, accountability, research and innovation, and policy development and coordination. The dedication and collaborative spirit of our current and former Board members, our personnel, and our partners have enabled us to achieve these accomplishments.

This report is a testament to the dedication, hard work, and endeavours of the MHR staff, both past and present, as well as CEO Fiona Coyle and Interim CEO Philip Watt. We are deeply appreciative of their assistance.

I am deeply grateful to each member of this Board. Your dedication, wisdom, and insights have been indispensable. I am certain that this Board will continue to guide the organisation to significant success in the years ahead.

I would like to extend a warm welcome to Dr. Judith Malone, who will assume the role of Chair of Mental Health Reform. I extend my best wishes to her as she guides the organisation through its next stage of growth.

It has been an immense privilege to be a member of the Board of Directors of Mental Health Reform, and I am deeply grateful for the opportunity.

Michele Kerrigan

Michele Kerrigan
Chairperson, Mental Health Reform

Philip Watt
Interim CEO MHR

CEO Statement

for the financial year ended 31 December 2024

The further development of policy, resourcing and integration of mental health services, including those provided by the Voluntary and Community Sector (VCS) remained a continuing challenge for Mental Health Reform (MHR) and our membership in 2024.

In this context, there was much progress in 2024, but many remaining challenges, to ensure that Ireland meets its ambition to be fully compliant with international human rights standards. There was significant and welcome progress towards the enactment of the Mental Health Bill, 2024 although the legislative progress was interrupted by the general election we are optimistic the Bill will be implemented in 2025. This Bill seeks to integrate key human rights protections, in respect of acute and community mental services and addresses issues such as involuntary admission and involuntary therapies. The Bill will also broaden the oversight of the Mental Health Commission to community services. MHR has supported the development of the Bill over the past 5 years and more. Our role has included a plain English to the Bill; webinars on key issues linked to the Bill and helping to ensure those with lived experience were involved.

MHR played an active role in seeking to ensure mental health remained a priority during the general election in November 2024 and in the subsequent Programme for Government and the reappointment of Minister Mary Butler was welcomed.

Sharing the Vision (StV) is the main government policy on mental health, again there was much progress in 2024 culminating in the launch of a second implementation strategy in early 2025. MHR actively participated in the National Implementation and Monitoring Committee. MHR also actively participated in the development of the Mental Health Research Strategy launched in December 2024. This is the first national strategy focussing on mental health research and was developed by the Health Research Board with a wide range of collaborators.

Healthcare restructuring - with the 6 new health regions; devolution of decision making and the ambition to integrate services, is to be warmly welcomed. MHR took an active role in this process in 2024 including: participation in the Oversight Committee for the Health Regions; the Service Arrangement and Grant Aid Agreement (SAGAA) review that was subsequently successfully completed and the Dialogue Forum with Voluntary Bodies. MHR published a comprehensive update on the health regions in December 2024, along with an associated webinar, that was well received by our members.

MHR further published a major report in 2024 focussing on the challenges of those experiencing mental health challenges in Prison. Further progress was made in the development of the LSE (London School of Economics) report advocating the scaling up of early intervention in child and youth mental health services.

It has been a privilege to have been Interim CEO of MHR in 2024/2025. This report is reflective of the role and contribution of Fiona Coyle CEO, the present and former staff members of MHR our excellent Board and Chairperson Michele Kerrigan.

Philip Watt
Interim CHO, Mental Health Reform
September 2024 - July 2025

Directors' Annual Report

for the financial year ended 31 December 2024

The directors present their Directors' Annual Report, combining the Directors' Report and Trustees' Report, and the audited financial statements for the financial year ended 31 December 2024.

The financial statements are prepared in accordance with the Companies Act 2014, FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

The Directors' Report contains the information required to be provided in the Directors' Annual Report under the Statement of Recommended Practice (SORP) guidelines. The directors of the charity are also charity trustees for the purpose of charity law and under the charity's constitution are known as members of the board of trustees.

In this report the directors of Mental Health Reform present a summary of its purpose, governance, activities, achievements and finances for the financial year 2024.

The charity is a registered charity and hence the report and results are presented in a form which complies with the requirements of the Companies Act 2014 and, although not obliged to comply with the Statement of Recommended Practice applicable in the UK and Republic of Ireland FRS 102, the organisation has implemented its recommendations where relevant in these financial statements.

The charity is limited by guarantee not having a share capital.

Mission, Objectives and Strategy

Our Origins

Initially named The Irish Mental Health Coalition, MHR was founded in 2006. It began with five organisations; Shine, Bodywhys, Grow Mental Health, Peer Advocacy in Mental Health 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. Today, MHR is Ireland's leading national coalition on mental health.

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 Members

MHR was created by its member organisations as a place for them to come together and collectively provide a unified voice to Government, its agencies, the Oireachtas and the general public on mental health issues. MHR exists for its membership and its work is driven by its member organisations. Between 2011 and 2024, membership of MHR grew from 19 to 86 member organisations.

Our Vision

An Ireland with accessible, effective and inclusive mental health services and supports.

Our Mission

To be the unifying voice that leads progressive and wide reform towards human rights-based mental health services and supports in Ireland.

Our Values

Rights-based	MHR will consistently champion best international standards and human rights norms as the benchmark we aspire to and progressively deliver.
Collaboration	MHR will work as one with members, those with lived experience of mental health difficulties and other stakeholders on our shared goals to achieve our vision.
Inclusive	MHR will work constructively with all stakeholders with a particular emphasis on the active participation of those with lived experience of mental health difficulties and their family, friends, carers and supporters. MHR will strive, in particular, to listen to and include those voices that have previously not been heard.
Informed	MHR will root our recommendations in consultation with stakeholders and in international and national evidence of good practice.
Progressive	MHR will identify and support new approaches across legislation, policy and services that ensure better mental health outcomes for all.

Key Activities

The work of MHR is based on the values and experiences of our member organisations and of those with lived experience of mental health difficulties.

MHR's approach is to provide a unified voice to government, its agencies, the Oireachtas and the general public on mental health issues. MHR performs a key role in the sector by providing an information provision service, a space for members to share resources and collaborate, and a united voice when approaching policymakers.

In 2024, our approach was as follows:

Coordination & Policy Development	Research & Innovation	Accountability & Advocacy
• 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.	• 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.	• 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

MHR seeks to be part of and to help shape existing and future mental health policy and services in Ireland. In this context the following is a brief summary of the operating context in 2024 which will inform our work in 2025 and beyond. These include:

The ambition for further alignment of StV with the UN Convention on the Rights of People with Disabilities (UNCRPD) is to be warmly commended. However much remains to be done to integrate social determinants such as housing, education and employment into mental health policy and services. There are particular challenges for those most marginalised including those in poverty; minority ethnic groups including Travellers, the homeless, the elderly and those with poor literacy.

The development and resourcing of a longer-term capital (building and refurbishment) programme for mental health.

The adoption of electronic health records (EHR). At present, capacity to measure mental health outcomes systematically is limited. The absence of EHR's also impacts on the effective delivery of all health services.

It is important that VCS organisations are further integrated in the mental health system to provide effective and seamless clinical pathways resulting in better service user experience and outcomes. More sustainable and multi annual funding for VCS organisations remains a major issue of concern for all in the sector.

There remain many gaps in MH services and the approach to providing MH services tends to be reactive rather than pro-active. In 2024 MHR finalised a major independent report by the London School of Economics (LSE) that makes the rationale for early and sustained investment in mental health services provided by the VCS for children and young people. The report makes the economic and moral case that VCS is optimally placed to provide early intervention services for those with mild to moderate mental health conditions.

Ireland spends about 6% of its budget on mental health when according to Slaintecare, this should be increased to at least 10%.

It is essential that MHR and VCS partners/ member organisations continue to make the public case for additional resources for mental health services in Ireland, not least because clinical teams are often very constrained as to what they can say in public. Ireland spends about 6% of its budget on mental health when according to Sláintecare, this should be increased to at least 10%. The long waiting lists to access many mental health services remains a particular challenge

MHR will seek to further optimise participation in healthcare restructuring; StV; the Mental Health Research Strategy; the Connecting for Life Suicide Prevention Strategy and the National Office Plan on Children and mental health services among other strategic interventions.

2024 In Review - Highlights

Jan
Advocacy around MH Bill including media

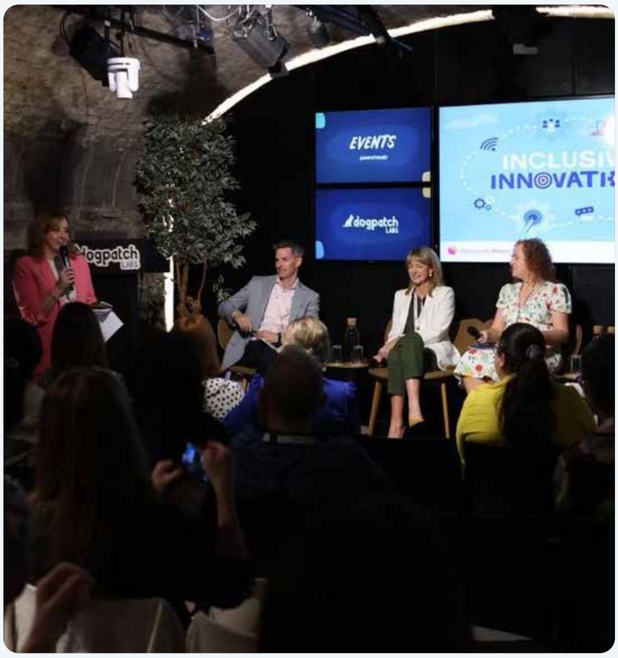
Feb
MHR presents to UN Committee monitoring the International Covenant on Economic, Social and Cultural Rights

Feb
Leaders in Lived Experience Conference

March
MHR met Minister for Mental Health, Ms Mary Butler TD in Government Buildings

April
Mental Health Services & Support in Prisons Research Launched

May
Innovation Showcase



June

PeacePlus in Derry

July

AGM in person

July

PBS and Mental Health Act (MHA) Campaign

September

Interim CEO appointment

September

Peace Plus in Monaghan

September

Oireachtas Meet & Greet and Language Briefing

August

PBS and Mental Health Act (MHA) Campaign

October

Coalition Conversations 2 - Suicide Prevention/ reduction

2024 In Review - Highlights

September

MHA Webinar for Lived Experience

September

Coalition Conversations 1 - Social Inclusion in Mental Health & Launch of 'Mental Health in the Workplace: A Guide to Your Rights'

October

Mental Health Act Webinar for Professionals

November

Galway - Regional Members' Showcase & Hustings & Seminar on MHA

November

General Election 2024 campaign to ensure the inclusion of mental health as a priority

December

Phase 2 of MHR's Interactive Mental Health Map

December

Preparation for the Programme for Government

January to December

Meetings related to Health regions

National Implementation and Monitoring Committee (NIMC) for StV

SAGAA

Funding for the VCS sector


MENTAL HEALTH ACT 2001
TOOLKIT
MENTAL HEALTH REFORM TEAM CHARTER
DECEMBER
JANUARY 2026
FEBRUARY
MARCH
APRIL
LP0018
LP0019

Our Work

Strategic Report

Strategic Goals	Key Performance Indicators	Progress 2024
1. Mobilise public and political support to address inadequacies in Ireland's mental health system	• Strengthen political and public awareness of mental health and human rights • Build public and political support to ensure resources (finances and resources) are in place to deliver to the high-quality, rights- based mental health services and supports • Grow and strengthen the participation of Service Users, Families, Friends, Carers and Supporters (SUFFCS) in the work of MHR	• 8% increase in social media audience growth. 82 media hits. • Pre-Budget 2025 campaign launched on 30th July. Investment of €143.5M in mental health services. Over 4,200 emails sent to TDs in support of the campaign. • 35 lived experience experts involved in our campaigns representing diverse experiences
2. Drives evidence-based innovation in mental health to promote better outcomes for service users	• Build strategic alliances with key stakeholders to strengthen and enhance the work of MHR • Facilitate and enable knowledge sharing and innovative projects within and between member organisations • Research is identified, initiated and commissioned to produce insightful and impactful research outputs to advance improvement of mental health services and supports throughout Ireland	• MHR Member Map launched, which shows where our governing members are located, where there are recovery colleges and where there are crisis cafes (now known as 'Solace Cates') • Fed into HSE Restructuring consultations • Research on Prisons launched in early 2024

3. Advance policies and practice towards high-quality, rights-based mental health services and supports for all	• Reform of the Mental Health Act • Hold the Government to account to honour its obligations under EU and UN commitments Mental Health Reform is an interface for the unified voice of our members to government, the public and key stakeholders • Hold Government and Departments to account for the implementation and development of national policies impacting mental health services and supports	• Organised 2 public webinars on the Mental Bill 2024 which attracted over 1,000 attendees • 21 policy submissions completed • Co-created Guide to Mental Health in the Workplace supported by Irish Human Rights and Equality Commission (IHREC launched with photoshoot in Merrion Square
4. MHR strives to be a functioning and well-resourced organisation	• Enhance the ethos of collective endeavour and cooperation within the coalition. • Grow and diversify unrestricted funding streams • Implement an organisational structure and approach that supports the delivery of this strategy	• 85% of member organisations attended at least one MHR event or briefing in 2024 compared to 82% of member organisations in 2023 • 60.6% increase in unrestricted income from 2023. • Compliance with the Charities Regulator's Governance code, CRO & CRA


WE ACT
FOR PRIDE
FOR INCLUSION
FOR COMMUNITY
Visit WeAct.ie to learn more
JERSEY WASHERS
MURAL PAINTERS
HOSPITAL DRIVERS
WHEN WE SPOT A GAP
WE VOLUNTEER
WE ACT
Visit WeAct.ie to learn more
WE STAND UP
WE VOLUNTEER

Strategic Priority 1 - Mobilise public and political support to address inadequacies in Ireland's mental health system.

1.1 Summary

The Government invested an additional €143.5m into mental health in Budget 2025, bringing the total mental health budget to €1.481m. This includes €16m of development funding and €127.5m to maintain existing levels of service (ELS). With a 2025 health budget allocation of €25.8bn, this means the mental health allocation for 2025 is 5.7% of the health budget. The 2025 mental health allocation exceeded the additional €120m called for by MHR and is the largest ever single-year additional allocation to mental health in the history of the state. However, MHR called for €80m of development funding and so the €16m development funding fell short of this, with an unprecedented level of funding allocated to ELS in 2025. We do recognise that any development funding is a positive step towards improving mental health service access.

A highlight for 2024 was the #GE2024 campaign which afforded MHR the opportunity to engage with candidates and make mental health a voting issue.

Key Figures 2024

30
Oireachtas Mentions of MHR
(by 17 different elected representatives)

21
Coordinated Policy Submissions

3
Oireachtas Visits
(CAMHS Gallery, Feb; MH Bill Gallery, Sept; Meet & Greet,Sept)

4
Party Conferences/ Ard Fheiseanna Attended

6
Oireachtas Briefing Papers

227
Designated Public Officials individually lobbied

Public Appearances with Mental Health Advocates:

Feb (Lived experience conference) – **10** lived experience speakers

Prisons Project launch – **1** lived experience speaker from Grassroots Forum (GRF)

Seanad appearance of GRF, April 2024 - **2** lived experience speakers from GRF

Photocall IHREC - **4** lived experience speakers (including consultant)

Innovation showcase - **1** lived experience speaker

Coalition Conversations 1 - Social Inclusion - **3** lived experience speakers

Coalition Conversations 2 - Suicide Prevention - **1** lived experience speaker

MHA Webinar 1 - **2** lived experience speakers

MHA Webinar 2 - **2** lived experience speakers

PBS photocall - **2** lived experience speakers

PBS Launch - **1** lived experience speaker

Language Briefing with Jigsaw advocates - Sept 2024 - **2** lived experience speakers

Oireachtas Meet & Greet with GRF - Sept 2024 - **4** lived experience speakers

35 individuals at 13 events

Summary

Key Figures 2024

30 Oireachtas Mentions of MHR (by 17 different elected representatives)

21 Coordinated Policy Submissions

3 Oireachtas Visits (CAMHS Gallery (Feb), MH Bill Gallery (Sept), Meet & Greet (Sept))

6 Oireachtas Briefing Papers

227 Designated Public Officials individually lobbied

4 Party Conferences/Ard Fheiseanna Attended

13 events, 35 individuals

March

Meeting with Minister of State Mary Butler

July

Meeting with Minister Paschal Donohoe

February

Meeting with Deputy Marylou McDonald (Sinn Fein Leader)

April

Meeting with Minister of State Joe O'Brien

1.2 Key Outcomes

1.2.1 Strengthened Political Engagement on Mental Health

In 2024, MHR aimed to continue to build on its engagement with the Government and Oireachtas members.

2024 was the second year that MHR attended the National Economic Dialogue (NED) Forum in Dublin Castle. This event provides access to the Ministers for Finance and Public Expenditure and Reform.

MHR organised an Oireachtas 'Meet & Greet' for our member organisations and people from our Grassroots Forum. MHR also provided a briefing on language and mental health to Oireachtas members, alongside Jigsaw Youth Advocates.

MHR also attended the Oireachtas Gallery for debates on Child and Adolescent Mental Health Services and on the Mental Health Bill 2024. MHR attended 4 party conferences/Ardfheiseanna and was mentioned 30 times in the Oireachtas in 2024 by 17 different elected representatives.

In total, MHR engaged with 97 public representatives in 2024, as well as sending multiple communications to all Oireachtas Members, strengthening mental health awareness across all parties.

1.2.2 Key Political Meetings in 2024
1.2.3 Growing Awareness of Mental Health and Human Rights

Growth in Audience Reach: 2021 - 2024

Year	Media Coverage	Social Media Follower Increase	Speaking Engagements
2021	85 media hits	8%	13
2022	81 media hits	9%	13
2023	96 media hits	10%	15
2024	82 media hits	8%	23

In 2024, MHR continued our goal of strengthening political and public awareness of mental health and human rights by communicating relevant information to the public.

MHR became an increasingly prominent commentator in the media on a range of mental health issues including the Mental Health Bill, Prisoner Mental Health, and CAMHS to name a few. As always, amplifying the lived experience voice was central to this media engagement.

Overall, our approach generated coverage in 40 media outlets including the Irish Examiner, RTE, Newstalk, the Irish Time and the Journal. With 82 overall hit media hits, we saw a slight decrease on our original target. MHR continued to invest in digital communications, increasing its output and reaching new audiences.

In 2024, Mental Health Reform experienced a modest dip in the growth rate of our social media following, with an increase of 8% compared to 10% the previous year. While this still represents healthy engagement, the slight decline reflects a broader sector-wide trend of reduced interaction and follower growth across digital platforms. We continue to adapt our strategy to maintain meaningful engagement and ensure our online presence remains a strong tool for advocacy and awareness.

1.2.4 Empowering People with Lived Experience

Case Study - I Am a Reason Campaign

On 30th July, MHR launched its 'I Am a Reason' campaign which called on the Government to invest €120 million in Ireland's mental health services for Budget 2024. This included €40M to maintain existing levels of services and €80M to develop new services to address unmet need.

The campaign focussed on the final year for the then programme for government, emphasising that is was their last opportunity to secure adequate investment for mental health before the general election.

We launched our pre-budget submission with a virtual launch featuring Rebecca O'Brien, a member of our Grassroots Forum who discussed the challenges she has encountered as a young person navigating mental health services. The online event brought together politicians, people with mental health difficulties, and organisations in the sector who discussed opportunities to strengthen mental health services in Budget 2025.

To promote awareness of the campaign, we organised a meet and greet with our members and our Grassroots Forum in Leinster House for public representatives. 35 elected representatives and staff attended the briefing including, Mary Butler, Minister for Mental Health and Older People. This was a powerful opportunity to educate politicians about the urgent need for reform in our mental health services.

To sustain momentum in the campaign, we sent an open letter to An Taoiseach, Simon Harris with signatures from over 60 mental health organisations. The letter highlights the importance of investment in prevention and early intervention services in the voluntary and community sector. The letter generated media coverage online and in regional media outlets.

The campaign encompassed digital communications and a partnership with Uplift Ireland, which provides a platform for members of the public to contact their TDs directly and call for better mental health services. A key objective was to increase the number of emails the public sent to their TDs compared to 2023. We achieved this by developing video content with our members and mental health advocates which helped to promote awareness of the campaign to a wider audience. This contributed to a 21% increase in emails from the previous year.

On 2nd October, we welcomed allocation of an additional €143.5M for mental health services in Budget 2025. This investment represented the largest ever single-year commitment to funding for mental health services in the history of the state. The funding included €127.5M to maintain existing levels of service and €16M for new developments to support the implementation of Ireland's national mental health policy, Sharing the Vision and Connecting for Life, Ireland's national suicide prevention strategy.

In 2025, we will continue to campaign for increased funding for the voluntary and community sector.

I Am A Reason Campaign in numbers

over
10,000
social media engagements

14
service users and family members represented

Engagements with over
40
elected representatives

840
new followers on social media: 35% increase from 2023

125
Participants at virtual pre-budget launch event

4,589
emails sent to TDs via Uplift: 9% increase from 2023

1.3 Key Challenges

Budget 2025 contains a significant lack of funding for early intervention and prevention programmes provided by MHR members, which could have a detrimental impact on those accessing services. It may also continue to put more pressure on statutory services.

In 2025, MHR will be launching research by the London School of Economics which will provide an evidence base on the economic value of investing in early intervention and prevention programmes. We will use this work in our campaigning and lobbying, particularly ahead of Budget 2026 to highlight the urgency of investing in the voluntary and community sector mental health services.

Strategic Priority 2 -

Drive evidence-based innovation in mental health to promote better outcomes for service users.

2.1 Summary

Through research and partnerships, MHR aims to identify promising practices that enhance outcomes for people with mental health difficulties.

In 2024, we worked towards the following goals:

- Build strategic alliances with key stakeholders to strengthen and enhance the work of MHR
- Facilitate and enable knowledge sharing and innovative projects within and between member organisations
- Research is identified, initiated and commissioned to produce insightful and impactful research outputs to advance improvement of mental health services and supports throughout Ireland.

MHR's relationships with member organisations, academic bodies and the HSE have allowed the coalition to publish innovative research to inform the design of modern and inclusive mental health services. In 2024, MHR published a large research piece on Mental Health Services & Support in Prisons, which is a key policy priority area in our national mental health policy, Sharing the Vision.

MHR hosted its first ever national mental health conference in February 2024 entitled 'Leaders in Lived Experience' in the LinkedIn offices in Dublin. This was an opportunity for the mental health sector to come together and explore leadership approaches in mental health and provided an opportunity for participants to learn, grow, and contribute to the ongoing conversation about mental health in Ireland.

Mental Health Reform also hosted the 'Inclusive Innovation Showcase' at DogPatch Labs in Dublin. This event demonstrated the vital contributions of the Voluntary and Community Sector.

MHR's Coalition Conversations series continued across 2024, with two successful webinars hosted to help facilitate knowledge sharing across the sector. These webinars focused on the topics of social inclusion and suicide prevention.

2.2 Key Outcomes

2.2.1 Mental Health Services & Support in Prisons

In April 2024, Mental Health Reform published research entitled 'Mental Health Services & Supports in Prisons: Service Mapping and Reflections from Lived Experiences'. The report sought to better understand the mental health services and supports available to adults detained in closed-prisons, including the pathways to accessing these resources and potential barriers.

It is increasingly acknowledged globally and in Ireland that many individuals in prison experience mental health difficulties and have a range of needs that are often complex. Despite an increased focus on this issue in recent years, in Ireland there remains an inadequate understanding of the services and supports available.

Ireland's national mental health policy, Sharing the Vision, commits to offering a range of tiered supports to individuals in the prison system. While much of the previous focus on mental health supports in prisons has been on specialised services, this study reflects the broad range of services available across tiers, in line with Sharing the Vision.

Drawing on the lived experience perspectives of men in custody, prison staff, and the voluntary and community sector, this research set out to contribute valuable insight to support key stakeholders in bringing transformative change in addressing the mental health needs of the prison population.

MHR launched this research at a webinar in April 2024 featuring contributions from Mr James Leonard (activist and expert by experience), Mr John Coonan (member of MHR's Grassroots Forum), Ms Kathleen Lynch (chair of High-Level Task Force, HLTF), and Ms Caron McCaffrey, Director General of the Irish Prison Service (IPS). There was a great response to the webinar with over 120 attendees.

2.2.2 Children and Young People's Mental Health (CYP-MH) Project

Further significant progress was made in 2024 on the development of the LSE (London School of Economics) report, which advocates for the scaling up of early intervention in child and youth mental health services, along with a linked 'Roadmap' outlining how this could be achieved. These reports were subsequently launched in March 2025 by Deputy Chief Medical Officer, and Mental health specialist, Professor Philip Dodd. The reports are in part a contribution towards the development of the HSE Child and Youth Mental Health Office Action Plan. The underlying rationale for these reports is that early intervention in child and youth mental health services makes sense from both an economic as well as policy/care perspective. The Voluntary and Community Sector provides 70% of the mental health services for children and young people in Ireland and has a key role to play in providing and supporting such services. A particular policy focus will be on identifying and helping to fill the gaps and weaknesses in present services, especially where services are not presently available.

2.2.3 Inclusive Innovation Showcase

On 21 May 2024, Mental Health Reform hosted the 'Inclusive Innovation Showcase' at DogPatch Labs in Dublin. This event demonstrated the vital contributions of the Voluntary and Community Sector, featuring engaging presentations, a dynamic panel discussion, and networking opportunities. The showcase highlighted innovative solutions in the mental health sector that these organisations have developed, underscoring their role as pioneers in the field. Some of the innovative supports showcased include:

Barnardos' presentation focused on their wellbeing model. This model aims to provide universal access to support in communities. It does this by embedding wellbeing and support for children into all aspects of their lives, be it sport, the classroom, or in the community at large.

The ISPCC discussed their digital Wellbeing Programmes. These programmes provide guided online Cognitive Behavioural Therapy (CBT) to young people between ages 14 to 18 experiencing anxiety, as well as programmes aimed at parents and carers of children and young people experiencing anxiety.

Jigsaw's presentation explored a new "single-session first" model of service delivery being developed at Jigsaw. This model aims to cut waiting times for young people accessing services while not compromising addressing mental health needs, and is based on a pilot conducted by Jigsaw on this model of service delivery.

Mental Health Ireland presented on their Thrive programme. This programme is based around community level interventions and showcased collaboration between the VCS and local authorities in addressing community mental health needs.

Pavee Point presented on the Mind Your Nuck website hosted at youngpavees.ie. It is focused on delivering information on mental health to young Travellers on their own terms. Through reaching under-served communities, in their own words, it seeks to break down barriers to accessing mental health support.

Shine discussed their Voice platform. This initiative brings together those with lived experience and their supporters with the aim of centering lived experience voices in policy-making. The goal of the initiative is to improve mental health support, services, policy and legislation in Ireland through ensuring input from those most impacted by them.

St Patrick's University Hospital presented on their digital mental health record Your Portal. The presentation focused on the support given to service users in accessing their records and the work that has been done in setting up a system which allows for service user voices to be heard in how their information is shared and used.

2.2.4 Coalition Conversations

Coalition Conversations connects with experts across the mental health sector and facilitates discussions on important topics.

The aim of this webinar series is to provide a space to explore topics that are important to the Voluntary and Community mental health services and those with lived experience.

In 2024, MHR hosted two webinars as part of this series; one on social inclusion and one on suicide prevention. Both of these webinars featured Irish Sign Language (ISL) interpretation.

The Social Inclusion webinar focused on employment and mental health. The webinar included speakers from HSE Mental Health Engagement and Recovery and AHEAD, as well as people with lived experience. There were 120 attendees at this webinar.

The Suicide Prevention webinar featured speakers including the Mental Health Champion of Northern Ireland, as well as speakers from Piela, Suicide or Survive, and the Irish Deaf Society. There were 97 attendees at this webinar.

Case Study: Leaders in Lived Experience

Effective leadership is essential for driving positive change in the mental health sector. MHR's 'Leaders in Lived Experience' event focused particularly on grassroots leadership, uniting leaders with lived experience of mental health difficulties who have been pivotal in reforming the mental health system from the ground up.

The conference was co-produced by Mental Health Reform's Grassroots Forum. This ensured that the event reflected diverse perspectives from individuals deeply connected to the challenges and opportunities in the mental health sector.

The conference featured keynote speakers, panel discussions and thematic workshops to encourage discussion and meaningful action. Attendees had the opportunity to engage with a wide range of experts, learn about the latest research and best practices, and connect with like-minded individuals from across the mental health community.

2.3 Key Challenges

The limited availability of new sustainable funding for the Voluntary & Community sector continues to be a challenge faced by MHR in its aim to drive evidence-based innovation in mental health. However, MHR was delighted to secure funding for a 3-year project under our innovation workstream in 2024. MHR looks forward to

Strategic Priority 3 -

Advance policies and practice towards high-quality, rights based mental health services and supports for all.

Key Figures 2024

1,200 attendees

at Mental Health Act Webinars

21 Coordinated Policy Submissions

over 100% ahead of target

51 attendees

at the online launch of 'Mental Health in the Workplace: A Guide to your Rights'

24 external advisory groups

199.5 hours across all groups in 2024

3.1 Summary

Mental Health Reform is at the forefront of mental health policy and law reform in Ireland. Our relationships with elected representatives, government departments and state agencies allow the coalition a unique opportunity to advocate for changes in legislation and policy.

In 2024, work was progress towards the following goals:

- Reform of the Mental Health Act, 2001
- Hold the Government to account to on our its obligations under EU and UN commitments
- Mental Health Reform is an interface for the unified voice of our members to government, the public and key stakeholders.
- Hold Government and Departments to account for the implementation and development of national policies impacting mental health services and supports.

The Mental Health Amendment Bill is expected to bring about the largest overhaul of the State's mental health laws in decades. In 2024, MHR engaged with elected representatives and members of the public to prioritise the reform of this crucial legislation. While the Mental Health Bill 2024 progressed to Second Stage debate in 2024, its progress was stalled with the dissolution of the 33rd Dail.

Significant transformations continued in the health sector with the ongoing restructuring of the HSE into six new health regions. MHR served as a key stakeholder in this process by facilitating dialogue between its members and the HSE. MHR also published a briefing on the HSE restructure in 2024 entitled 'HSE Health Regions Update for the Voluntary and Community Mental Health Sector'.

3.2 Key Outcomes

3.2.1 Moving towards Reform

One of the founding reasons for the coalition was to campaign to reform the Mental Health Act, 2001 ('the Act'). The current legislation governing mental health service provision in mental health facilities is long overdue reform. It was a commitment in the last Programme for Government ('Our Shared Future') to reform the Act.

After ongoing advocacy from MHR, the Mental Health Bill 2024 progressed on its legislative journey, with second stage debate taking place in September 2024. MHR was thanked by elected representatives during the debate for our work on the legislation, for example one TD said:

"I would like to take this opportunity to thank all those involved in making this legislation possible, particularly organisations such as Mental Health Reform, which has done mammoth work in mental health research, in scrutinising this Bill and in ensuring that all Members are well informed about this legislation's impact on people with mental health difficulties."

(Mental Health Bill 2024: Second Stage (Resumed), 19th September 2024)

While the Mental Health Bill 2024 progressed to Second Stage debate in September 2024, its progress was stalled with the dissolution of the 33rd Dail. It is a commitment of the Programme for Government 2025 ('Securing Ireland's Future') to progress the Mental Health Bill 2024, "the passage of which is essential to modernise our mental health services".[1]

Mental Health Reform was delighted to be able to raise awareness about the Mental Health Bill 2024 through a series of webinars, a seminar and a Plain English summary of the proposed changes throughout 2024.

MHR hosted two public webinars on the Mental Health Bill 2024; one aimed to support people with lived experience, as well as their family, friends, carers and supporters and one aimed at individuals working in mental health services. The first webinar was attended by 750 participants. The second was attended by over 500 participants. Panellists for these webinars included lived experience representatives (including peer support workers), voluntary and community sector organisations, academics, HSE staff, mental health professionals including occupational therapy, social work and psychiatry, as well as a representative from the Ombudsman for Children. MHR also hosted an in-person seminar on the Mental Health Bill 2024 in Galway in November 2024. There were around 35 participants at this event.

MHR published a Plain English 'Overview of key changes in the Mental Health Bill 2024' in September 2024. This was edited and approved by the National Adult Literacy Agency (NALA). The aim of this was to help people understand key proposed changes in the Mental Health Bill 2024.

MHR also established a Coalition to Reform the Mental Health Act in June 2024. It is a mailing list of people who are interested in the mental health act reform from a human rights based perspective, including individuals, family members and organisations both from within MHR members and organisations who are not members of MHR. MHR hosted 3 meetings of this coalition during 2024.

1 Programme for Government 2025: Securing Ireland's Future, p. 95.

3.2.2 UNCRPD, Employment and Mental Health

MHR is one of Ireland's leading organisations advocating on the rights of people with mental health difficulties under the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). It is not often well understood that mental health is covered under the category of 'disability' in the UNCRPD and under our Equality Legislation.

People with mental health difficulties meet more barriers in their lives than many other people. These barriers often stop them from accessing their rights, especially in the workplace. In 2024, Mental Health Reform launched a guide to help people with mental health difficulties to understand and access their rights in the workplace called 'Mental Health in the Workplace: A Guide to Your Rights'. The guide was co-produced and led by people with lived experience of mental health difficulties.

A key objective of this guide is to foster changes in understanding, attitudes and behaviour towards ableism in the workplace by promoting the rights of people with psychosocial disabilities. The guide also signposts readers to relevant resources and information to help them claim their rights if they experience discrimination.

The guide was launched publicly online on 17th September 2024, disseminated to attendees and disseminated across MHR's social media channels and mailing lists. There were 51 attendees at the launch. Hard copies of the guide were also distributed to 18 different addresses.

This guide was funded through the IHREC Grant Fund, and we would like to extend our thanks to IHREC. We would also like to acknowledge the lived experience Steering Committee of the guide, and the author of the guide Barbara Brennan.

"Persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability."
- Article 25, UNCRPD

3.2.3 Representing Members' Voices in Key Policy Implementation Spaces

In 2024, MHR took part in 24 external advisory groups convened by the Government, the HSE and the Voluntary and Community Sector. Of note this year was MHR's work in the following groups:

3.2.4 National Mental Health Research Strategy Expert Group

In December 2024, the Health Research Board (HRB) and Department of Health launched Ireland's first National Mental Health Research Strategy. Mental Health Reform sat on the Expert Group that oversaw the development of this strategy. The strategy is designed to be a national framework to help create a thriving mental health research system in Ireland. In 2025, the HRB plans to launch a call for the development of a Collaborative Research Network in Mental Health. MHR looks forward to continued engagement on this in 2025.

3.2.5 HSE Health Regions

The move to the HSE Health Regions is of significant importance to the delivery of mental health services. Based on our work on the 'Health Regions Programme Steering Group' throughout 2024, MHR published a briefing on the HSE restructure entitled 'HSE Health Regions Update for the Voluntary and Community Mental Health Sector'.

The aim of this briefing was to provide an update for our members on the implementation of the HSE Health Regions, with particular consideration to the impact on mental health services and the voluntary and community sector. It primarily focused on the progress of implementation and existing structures during 2024. This part of a broader work stream which MHR will progress in 2025, exploring integrated mental health service delivery approaches, reflecting on international best practise and the historical context for the HSE restructure.

Leaders in Lived Experience – Expert Panel

Groups engaged in during 2024:

- ADM MH Reference Group
- DFI's Health Forum
- Dialogue Forum with Voluntary Organisations
- Disability Participation and Consultation Network
- DSP customer forum
- EIP Model of Care Implementation Group
- International Initiative for Mental Health Leadership
- Loneliness Taskforce
- MHER Working Group on StV Rec 65 on Advocacy
- National Housing Strategy for People with Disabilities Implementation Monitoring Group
- National Implementation and Monitoring Committee Steering Committee
- National Mental Health Research Strategy Expert Group
- National Psychiatric Inpatient Reporting System Advisory Group
- Oireachtas Disability Group
- Peace Plus
- Health Regions Programme Steering Group
- Social Policy Network
- StV Specialist Group Digital Mental Health / Stv Digital Steering Group
- Women's Mental Health Network
- Recommendation 30 and 97 Working Group
- HSE ADM Transitional Oversight Group
- MHER IPS Steering Group
- National Mental Health Experience Survey Advisory Group
- SAGAA Oversight Group

3.2.6 Co-ordinated Policy Input

MHR completed a total of 21 submissions in 2024, over 100% above our 2024 target. This is reflective of how MHR's awareness raising work around mental health and the Voluntary and Community Sector has led to an increase in requests for MHR's input into a variety of consultation processes. Submissions in 2024 included a submission on the International Covenant on Economic, Social and Cultural Rights (ICESCR).

As a signatory to the ICESCR, Ireland has committed to respecting, protecting, and fulfilling these essential economic, social, and cultural rights, including the right to mental health. This commitment extends beyond ensuring access to quality mental healthcare; it also involves addressing underlying social determinants of mental health, such as poverty, housing insecurity, and discrimination. Following on from this submission, MHR participated in an online civil society meeting with the UN Committee in February 2024. In the Concluding Observations on the fourth periodic report of Ireland, concerns raised by MHR were highlighted by the Committee including concern about the low budget allocated to mental health compared with total government health spending and timely access to mental healthcare (particularly community based services).

In 2025, a key focus will be MHR's submission to the UNCRPD. In September 2025, the UN Committee will issue the 'List of issues' to Ireland, and MHR can proactively issue a submission to the Committee to help inform this process and highlight Ireland's concerns under UNCRPD in relation to mental health.

AGM 2023

Oireachteas Meet and Greet

VHI Mini-Marathon

Digital Innovation

3.3 Key Challenges

The reform of the Mental Health Act, 2001, remained as a key challenge in 2024. Due to repeated delays, the legislation was not reformed before the general election and its progress was stalled with the dissolution of the 33rd Dail. The urgency of progressing this reform cannot be overstated. People with mental health difficulties, along with their families, supporters, and carers, have already endured extensive delays. In 2025, the Mental Health Bill 2024 will be reintroduced at Committee Stage as part of the Government Legislative Programme for Spring 2025. Mental Health Reform looks forward to contributing to further discussion at Committee Stage and beyond, including consideration of amendments.

The transition to Health Regions has remained a challenge throughout 2024, as there has been a lack of clarity for the Voluntary and Community Sector about what the new funding structures will look like. MHR continues to raise our members concerns around this, as well as trying to seek clarity for our membership.

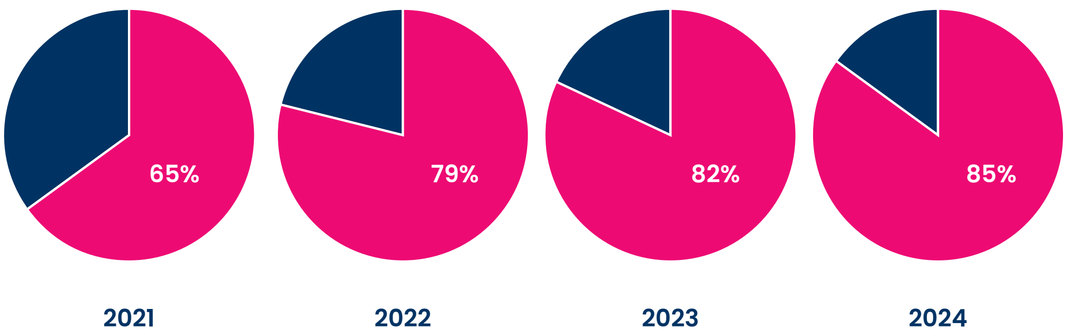
Strategic Priority 4 -

MHR strives to be a high functioning and well-resourced organisation.

4.1 Enhance the ethos of collective endeavour and cooperation within the coalition

From 2023 to 2024, member engagement in our events, both virtual and in-person, increased from 82% to 85%. This steady growth reflects a deepening commitment among our members to connect, collaborate, and drive forward our shared mission. The rise in participation underscores the strength of our coalition and espouses the ethos of collective endeavour and cooperation that lies at the heart of Mental Health Reform.

Attendance at least one event or briefing



4.2 Implement a sustainable funding model

Diversifying funding streams and increasing income is key to ensuring that MHR achieves sustainable growth in size, reach and influence. This is crucial for MHR to develop its team, advance its mission and effectively serve the needs of the coalition.

Alongside MHR's Fundraising Strategy, the Fundraising Advisory Subcommittee which is responsible for overseeing the implementation of MHR's fundraising strategy and reporting to the Board on fundraising performance, guided our work in 2024. The Subcommittee met three times in 2024 and played a significant role in advising MHR on its fundraising activities.

The continued success of our training offering was evident in 2024, with MHR providing Mental Health in the Workplace training to 32 organisations up from 21 in 2023. This training will form a key pillar of our unrestricted funding monetary target in 2025.

4.3 Implement an organisational structure and approach that supports the delivery of this strategy

As part of Mental Health Reform's commitment to fostering a values-led organisation and supporting the continuous development of its staff, we have embedded learning and development as a core element of our performance management framework.

In 2024, we revised our performance review processes to include training and coaching as key areas of focus within both mid-year and year-end reviews. This ensures that individual development goals are actively discussed and aligned with organisational priorities. Our aim is to support employees in realising their professional potential, within the limits of the resources available to us, while also enhancing the overall effectiveness of the organisation.

In parallel, a Board Skills Audit was completed in December 2024 to assess existing strengths and identify areas for growth.

The audit covered eleven key domains:

1. Strategic Planning

2. Organisational Development

3. Governance and Policy Development

4. Business Development

5. Communications/Media/Public Relations

6. Knowledge of Mental Health and Government Policy

8. HR/Training/Staff Development

9. Financial Management/Audit/Accountancy

10. Data Protection (including GDPR)

11. Marketing/Digital

12. Legal and Risk

Following this, the Nominations Subcommittee and the Board met in early 2025 to reflect on the Boardmatch recommendations and develop an action plan to address key gaps identified through the audit - specifically in the areas of fundraising and IT/technology. This process forms part of MHR's broader strategy to continuously strengthen its governance and leadership capability in service of its mission.

4.4 Impeccable Governance, financial and operational management and oversight in line with the organisational obligations as a registered charity

The aim of this goal is to ensure adherence and compliance with the Charities Regulator's Governance Code to ensure the highest standard of legal and sectoral regulation.

Mental Health Reform (MHR) is committed to maintaining strong governance and operational standards in line with its obligations as a registered charity. Each year, the organisation conducts a comprehensive review of the Charities Regulator's Governance Code, using a structured record form that is circulated to the Board for consideration and discussion. MHR ensures regulatory compliance by filing its Annual Report with the Charities Regulator Authority before the statutory deadline of 31st October 2024.

At the start of each year, an Operational Plan is prepared and shared with the Board, with responsibility for its implementation falling to the Senior Leadership Team. A thorough quarterly review of organisational processes is carried out to ensure alignment with strategic objectives, funder deliverables and to promote continuous improvement. In 2024, MHR reviewed and updated several key internal policies, including Leave for Medical Care Purposes, Domestic Violence Leave, and Flexible Working for Care Purposes, in line with legal requirements and best practice. These updates were designed to foster a more inclusive, supportive, and legally compliant working environment.

Reflecting the organisation's commitment to good governance, MHR was nominated for a Good Governance Award in November 2024, recognising its continued efforts to uphold excellence in governance practice.

Mental Health Reform follows the SORP in preparing its financial accounts and consistently meets it reporting compliance requirements as set out with the Companies Act 2014 and the Charities Regulatory Authority ensuring the highest level of transparency.

Future

Looking ahead, 2025 will mark a period of transition and opportunity for Mental Health Reform (MHR). Our long-standing Chairperson will step down after four years in the role and eight years of dedicated service on the Board. While leadership change can bring challenges, it also presents a valuable opportunity for reflection, fresh perspectives, and continued organisational growth.

In terms of financial sustainability, MHR has seen a positive increase in its unrestricted earned income since 2023. However, to further strengthen and diversify our funding model, we will be placing greater emphasis on developing corporate sponsorships and partnerships in line with our Fundraising Strategy, supporting the delivery of our Strategic Plan. One of the key initiatives in this effort will be MHR's first Fundraising Awareness Day, planned for May 2025, aimed at engaging wider public and corporate support.

The organisation also plans to review its 2023-2028 Strategic Plan in the coming year to ensure that its key objectives remain relevant and responsive to the evolving landscape of mental health policy and advocacy.

Additionally, work will begin on refreshing and updating MHR's website, with the goal of making it more accessible, user-friendly, efficient, and interactive for all stakeholders.

Challenges in 2024

One of the ongoing challenges for Mental Health Reform (MHR) is the reliance on statutory funding, which accounts for a significant portion of our income. Diversifying income streams remains a critical focus for the organisation, as we work to ensure long-term financial sustainability.

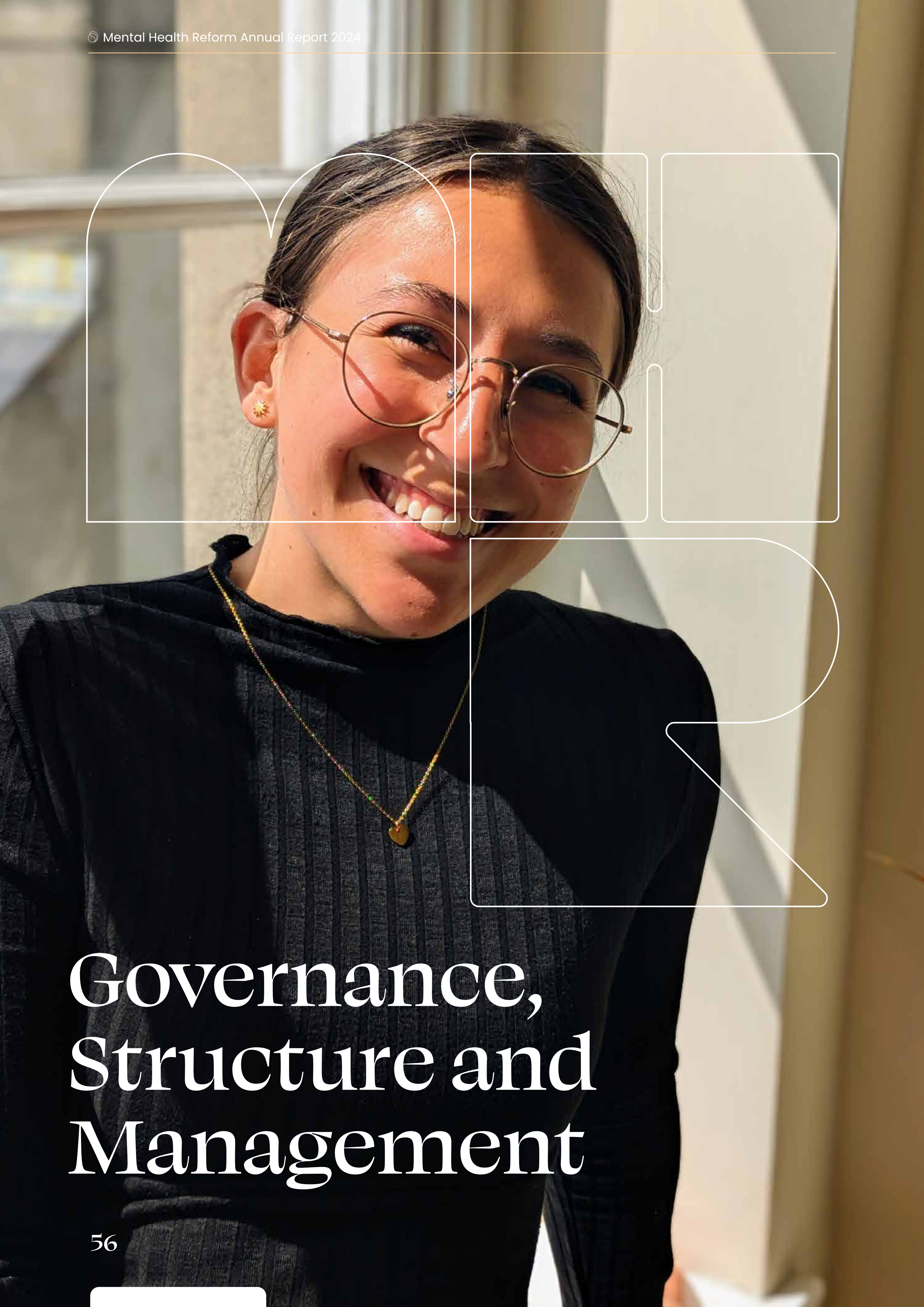
Staff retention has also been a concern, with a 45% turnover observed at the end of 2024 and into 2025, reflecting turnover across the entire team, all of whom are on fixed-term contracts. Contributing factors include the limited promotion opportunities within the organisation due to its size, the absence of permanent contracts, and constraints on salary growth and guaranteed salary scales. Addressing these challenges will require careful consideration of our staffing and retention strategies.

Additionally, MHR is working to execute its fundraising strategy without a dedicated fundraising team, which is compounded by the financial constraints associated with recruiting and hiring staff while also maintaining reserves in accordance with our policy.

While progress has been made in moving from manual systems to more efficient digital and cloud-based platforms for HR management, project and task tracking, we still rely on basic file storage and excel sheets for managing risk and board engagement. To improve efficiency and governance, MHR would benefit from implementing a Board portal or a secure file-sharing system for governance documents with built-in audit trails and reporting features. MHR is actively exploring digital solutions such as BoardEffect, Diligent, and OnBoard to address these needs

In 2023, MHR commissioned a cybersecurity firm to conduct vulnerability scanning and penetration testing, but given the ever-evolving risks of cyber threats, the organisation must remain vigilant. Developing a comprehensive cybersecurity framework remains a significant priority for the organisation. However, doing so within the constraints of a limited budget presents an ongoing challenge. Balancing the need for robust digital security with available resources requires careful planning, prioritisation, and phased implementation.


Mental
Health
Reform
HSE
Mental Health
Engagement
& Recovery
Mental Health Reform
Promoting Improved Mental Health Services
mentalhealthreform.ie
RTÉ DOES
COMIC RELIEF
The Community Foundation for Ireland
Rialtas na hÉireann
Government of Ireland



Governance, Structure and Management

Board of Directors:

Michele Kerrigan

Fiona Tuomey

Louise Jennings

Dr Sheila Gilheany

Sean Sheridan

Martin Markey

Ciara Glynn

John Church

Stephanie Manahan

Ken Kilbride

Nicola Byrne

Resignation:

Michael Culhane
(resigned January 2025)

Dr Joseph Duffy
(resigned July 2024)

Carol Spain
(served until October 2024)

Subcommittees

Finance & Audit Subcommittee

Michael Culhane

Martin Markey

Sean Sheridan

Nominations Subcommittee

Michele Kerrigan

Louise Jennings

Ciara Glynn

Joseph Duffy

Fundraising Advisory Subcommittee

Carol Spain

Martin Markey

Sheila Gilheany

Chairperson:

Michele Kerrigan

Company Secretary:

Michael Culhane

Chief Executive Officer:

Fiona Coyle

Philip Watt (Interim CEO 11th September 2024 - 4th July 2025)

Management Team

Ber Grogan - Policy & Research Manager

Niamh Fahy - Communications & Engagement Manager

Stephen Sheil - Interim Communications & Engagement Manager

Wendy Mitchell - Finance, Operations & Governance Manager

Charity Numbers

CYN 19958

Charity Registration Number 2007873

Registered number:

50685

Registered office:

Coleraine House, Coleraine Street, Dublin 7

Independent auditors:

Whelan Dowling & Associates, Block 1, Unit 1 & 4 Northwood Court, Santry, Dublin 9, D09 E348

Bankers

Bank of Ireland
2 College Green, Dublin 2

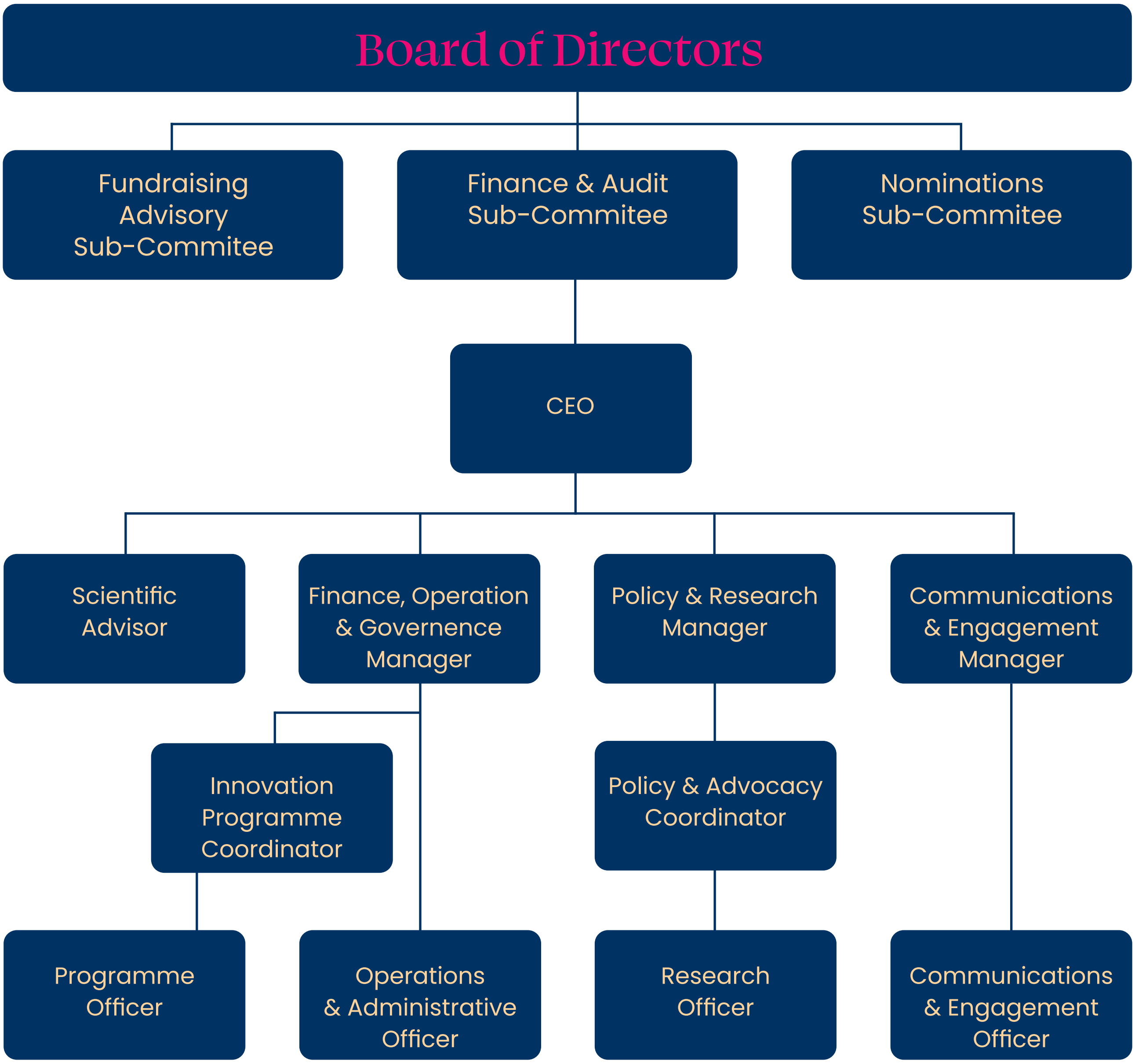
Solicitors:

Dillon Eustace
33 Sir John Rogerson's Quay, Grand Canal Dock, Dublin 2, D02 XK09

Legal name:

Mental Health Reform, a Company Limited by Guarantee

Organisational Map




Mental
Health
Reform

Name	Expertise	Biography
Michelle Kerrigan Chairperson Appointed 06/07/2021	Mental Health	Michele Kerrigan is CEO of Care After Prison, a national peer-led charity supporting people affected by imprisonment and their families. Previously, she was CEO of GROW in Ireland and Deputy CEO of the Multiple Sclerosis Society of Ireland, where she led national and international initiatives. Michele has extensive experience across the statutory and voluntary sectors. She is committed to recovery-based approaches to mental health and has shaped strategic plans, services, and advocacy efforts. Michele holds a diploma in Health and Social Care and Business Computing, and a Master's in Management in the Voluntary and Community Sector.
Nicola Byrne Director Appointed 06/07/2021	Psychology, Mental Health	Nicola Byrne is CEO of Shine, where she oversees the organisation's overall management and strategic direction. With nearly 30 years' experience across the statutory and voluntary sectors, Nicola has led impactful programmes that support community wellbeing. Her expertise spans programme and change management, social research, mental health, and adult education. Nicola previously held senior roles in the HSE and various charities. A registered Social Worker and former Mental Health Commission member, she holds a degree in Social Studies, a Master's in Applied Social Research, and a Master's in Cognitive Behavioural Therapy.

Name	Expertise	Biography
Fiona Tuomey Director Appointed 06/07/2021	Marketing, Communications	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 can share their experiences and gain support from each other. 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.
Louise Jennings Expert Legal Director Appointed 10/08/2021	Law	Louise Jennings is MHR's Expert Legal Director and a qualified Solicitor and Mediator. She currently serves as Head of In-House Legal Counsel and Data Protection at KPMG. Louise brings extensive legal and commercial expertise from in-house roles across Ireland, Europe, and the Middle East. She has also worked in private practice across diverse legal areas including commercial litigation, company law, family law, and insolvency. Louise holds a Master of Laws from Trinity College Dublin, a Bachelor of Corporate Law from University of Galway, and a Certificate in Negotiation and Leadership from Harvard Law School.
Ken Kilbride Director Appointed 18/07/2024	Mental Health	Ken Kilbride is CEO of ADHD Ireland, where he leads the implementation of the organisation's vision and strategic goals. With over 20 years' experience in senior management, Ken has worked across a wide spectrum of not-for-profit organisations in Ireland, ranging from large national bodies to smaller community-based groups. He brings a strong track record in organisational leadership, governance, and service delivery. At ADHD Ireland, Ken is committed to improving support, awareness, and advocacy for individuals and families affected by ADHD.

Name	Expertise	Biography
Dr Sheila Gilheany Director Appointed 14/06/2022	Policy & research, Science, Education and Advocacy	Dr Sheila Gilheany is CEO of Alcohol Action Ireland (AAI), the national independent advocate for evidence-based alcohol policy. Under her leadership since 2019, AAI has focused on issues such as pricing, marketing, and availability of alcohol, while also promoting trauma-informed services for those affected by alcohol harm, including children of parents with alcohol misuse. Sheila has previously led organisations in science, education, and autism. She serves on the Public Health Alcohol Research Group, advising the Minister for Health, and is a Board member of Eurocare, the European alliance for alcohol policy NGOs.
Sean Sheridan Public Affairs Expert Director Appointed 19/05/2022	Public service, Business, Governance	Sean Sheridan is a retired public servant who spent most of his career in local government, including ten years as Director of Corporate Services with Donegal County Council. He holds a Master's Degree in Business Innovation.He has also worked in the private sector on a range of consultancy projects. He is currently a Director of Pobal and of the Citizens Information Board and has experience in a wide variety of governance and leadership roles at local, regional and national levels.
Martin Markey Business Management Expert Director Appointed 19/05/2022	Business management, Marketing	Martin Markey has spent most of his career working with membership organisations and in the charity sector. He is CEO of Hardware Association Ireland - the trade association for builders, merchants and building material suppliers. Previously he worked as a consultant with charities in England. While there, his role was to help organisations position themselves to attract funding. Most of these organisations had promoting mental health as a core activity and for all of them it was a critical aspect of services 19/05/20221st term offered. A Fellow of the Institute of Management Consultants and Advisors, he served as President from 2017-2019.

Name	Expertise	Biography
Ciara Glynn Lived Experience Expert Appointed 10/10/2023	Advocacy, Community Mental Health, Service Innovation	Ciara Glynn is a peer support worker and a member of the Mental Health Reform Board since 2023. She was part of the first cohort of graded peer support workers employed by the HSE in 2017, marking a significant step in the recognition of lived experience within mental health services. Ciara has worked for nearly seven years on a community mental health team, offering support grounded in empathy and recovery. Her role reflects a commitment to person-centred care and the integration of peer-led approaches within Ireland's mental health system.
Stephanie Manahan Director Appointed 20/07/2023	Strategic Leadership, Corporate Governance	Stephanie Manahan is CEO of Pieta, leading the organisation's operations and services supporting individuals in suicidal distress and engaging in self-harm. Passionate about mental health, she places particular focus on the needs of children and young people. Stephanie brings extensive experience from senior executive and non-executive roles, with professional training in both mental health and corporate governance. She holds a BSc from Trinity College Dublin, an MSc from the University of London, and a Professional Diploma in Corporate Governance. A qualified Executive Coach.
John Church Director Appointed 20/07/2023	Strategic Organisation Development, Commercial Expertise	John Church joined the ISPCC in August 2018 having spent the previous 13 years in CEO roles within the not-for-profit sector. Prior to this, John spent 16 years in the private sector in various senior marketing roles in blue chip organisations such as The Bank of Ireland Group and The Coca-Cola Company. During an exciting and important period of change within the ISPCC, John brings significant experience in the area of strategy development, organisational change, planning and commercial focus as the organisation seeks to reposition its Childline service brand to expand supports to more children in the mental health and wellbeing area. John is a graduate of UCD and KUL in Belgium.

Current Board Members (as of 25th June 2025)

Board structure and composition

Mental Health Reform is governed by a Board of Directors consisting of no more than 13 members, including the Chairperson. In accordance with the organisation's constitution, the minimum number of Directors shall be three. The Board structure provides for up to five Expert Directors, five Member Appointed Directors, and additional Directors with lived experience or a background in service use. The CEO does not sit on the Board. The role of Company Secretary was held by the Expert Finance Director, Michael Culhane in 2024.

The Board is composed of individuals with diverse expertise spanning law, telecommunications, public affairs, business, finance, risk management, governance, marketing, psychology, and includes members who draw on personal experience as recipients of mental health services in Ireland. All Directors serve in a non-executive, voluntary capacity and do not receive remuneration for their contributions. In 2024, one Board member submitted an expense claim to cover travel costs associated with supporting the interview process for the Interim CEO position.

Directors are appointed for an initial term of three years and may be re-elected for up to two additional consecutive terms, bringing the maximum tenure to nine years. This term limit ensures a regular infusion of fresh perspectives, skills, and expertise to support the organisation's growth and development.

The Board also has the authority to temporarily fill vacancies in line with the organisation's specific needs. Any such appointments must be brought forward for ratification at the next Annual General Meeting (AGM), or an alternative nomination proposed for consideration.

At the AGM held in July 2024, Nicola Byrne and Ken Kilbride were elected and ratified as Member Appointed Directors. Ciara Glynn was also ratified, having been co-opted to the Board in 2023 as an Expert Director representing Lived Experience. Michael Culhane was re-elected for a second term, Michele Kerrigan was re-elected as Chairperson, and Fiona Tuomey was re-elected as a Non-Designate Director.

Following the AGM, Michael Culhane stepped down from his role as Expert Finance Director in January 2025.
To fill this vacancy, the Nominations Subcommittee met on 11th February 2025 and agreed to engage Boardmatch to support the recruitment process. Recruitment concluded in April 2025 with the appointment of Jennifer Owen* to the role of Expert Finance Director. This appointment will be brought forward for ratification at the upcoming AGM on 22nd July 2025. As part of ongoing board succession planning, we also recruited for the appointment of a new Chair, Judith Malone, whose nomination will likewise be brought to the AGM for ratification in July 2025.

*Jennifer Owen will be formally appointed as Finance Director at the upcoming AGM and will also take on the role of Company Secretary thereafter. Interim arrangements have ensured statutory duties were maintained.

Decision-Making and Governance

The Board of Mental Health Reform holds overall responsibility for the governance and financial stewardship of the organisation. It retains authority over key matters essential to the strategic direction and accountability of the charity. Specific areas reserved for Board decision include:

- Approval of the organisation's Strategic Plan
- Review and endorsement of the Annual Operational Plan
- Approval of annual budgets and monitoring of financial performance to ensure long-term stability and sustainability
- Endorsement of all company-wide policies
- Oversight of legal, ethical, and environmental compliance
- Approval of new staff roles
- Appointment, remuneration, and performance review of the Chief Executive Officer (CEO)
- Approval of new organisational members
- Review and approval of the Annual Report and Financial Statements
- Approval of procurement contracts exceeding €10,000
- Governance oversight, including the structure and composition of Board Subcommittees

The Board delegates the day-to-day management of the organisation, including operational delivery and staff oversight, to the Chief Executive Officer (CEO). While strategic and operational plans, policies, and budgets are developed by the Senior Management Team, they are presented to the Board for consideration and approval.

The CEO is accountable to the Board and plays a central leadership role in the delivery of the organisation's mission and objectives. The CEO's responsibilities include, but are not limited to:

- Implementing the Board's strategic decisions
- Executing the organisation's Risk Management Framework
- Preparing and presenting the Strategic Plan and Annual Operational Plan to the Board for approval
- Reporting regularly to the Board on progress against the strategic and operational goals
- Managing the Senior Management Team and ensuring all departments are adequately resourced
- Overseeing delivery of programmes and services in line with approved objectives
- Managing the organisation's financial and operational resources efficiently and effectively

Through regular reports and structured engagement with the CEO, the Board monitors progress against strategic goals and the operational plan. The Chairperson and, where appropriate, subcommittees provide guidance and support to the CEO to help ensure effective delivery of MHR's work.

All expenditure over €10,000 requires prior approval from the Finance & Audit Subcommittee. The Subcommittee also reviews a summary of all expenditures between €5,000 and €10,000 at each meeting. In addition, bank statements are reviewed by the Subcommittee, with the opportunity to question specific transactions. All other expenditure is subject to the organisation's Finance Procedures Manual and operates within defined discretionary limits.

Board Meetings & Reporting

The Board of Directors is required to convene a minimum of six times annually. In 2024, the Board met six times, in addition to the Annual General Meeting held on 18th July 2024. The overall average attendance rate for Board meetings during the year was 72.6%. Beyond these scheduled meetings, Board members remain available throughout the year to engage with the CEO on emerging issues requiring input between formal meetings. Any such matters are subsequently brought before the full Board for consideration or decision.

Board members receive a comprehensive meeting pack, including the agenda and supporting documentation, at least one week in advance of each meeting. This ensures that Directors have adequate time to review and prepare for informed discussion and decision-making. The Chairperson and CEO collaborate in advance of each meeting to agree the agenda, with Board members also able to submit items for consideration through the Chair, Company Secretary, or CEO.

Standing agenda items include a CEO report, conflict of interest declarations, updates on lobbying activities, finance update and approval of the bi monthly accounts, risk management including new or changing risk, and governance matters. The CEO's report outlines progress against the operational plan and strategic goals, as well as any significant challenges or developments affecting the organisation.

Board minutes are reviewed by the Chairperson and approved as the first item at the subsequent meeting. Attendance records are maintained by the Chair and CEO. However, in recognition of the Board's commitment to inclusivity and the presence of members with lived experience of mental health challenges, Mental Health Reform has chosen not to publish individual attendance records.

Leaders Lived Experience

Let's Talk About Suicide

Tesco Community Fund

Care in the Community Event

Digital Innovation

Galway Showcase

Board meeting summary:

27th February 2024

At the first meeting of the year, the Board:

- Reviewed and approved the 2023 year-end financial accounts
- Approved the 2024 Operational Plan
- Approved new membership applications and internal policies
- Agreed next steps for a Board skills assessment
- Provided feedback on the CEO's performance for the previous year

20th May 2024

At this meeting, the Board:

- Received an update on the organisation's Membership Engagement Strategy
- Received an update from the Chair of the Fundraising Advisory Subcommittee on plans for 2024
- Approved content for the 2023 Annual Report
- Approved updates to internal policies

18th June 2024

At this meeting, the Board:

- Received a presentation from the organisation's external auditors on the 2023 financial statements
- Approved the 2023 financial accounts and accompanying audit documents, including the Management Letter
- Approved the agenda for the 2024 AGM
- Approved the recruitment process for an Interim CEO to cover a period of maternity leave

27th August 2024

At this meeting, the Board:

- Approved the organisation's Affiliate Membership Plan
- Reviewed and approved new membership applications
- Received an update from the Chair Nominations Subcommittee on upcoming Board vacancies and next steps
- Met with the incoming Interim CEO, commencing in September 2024
- Sought expressions of interest from Board members to serve on the Nominations Subcommittee
- Reviewed the results of the 2024 Staff Survey and discussed follow-up actions

30th October 2024

At this meeting, the Board:

- Received a presentation on the organisation's Pre-Budget Submission (PBS) campaign and key performance indicators
- Reviewed income streams for the upcoming year
- Reviewed & approved the Compliance Record Form for submission to the Charities Regulator
- Approved the Annual Report for 2023
- Discussed the recruitment plan for the incoming Chairperson

10th December 2024

In the final meeting of the year, the Board:

- Approved the 2025 Annual Budget
- Considered new membership applications
- Received an update from the Chair of the Fundraising Advisory Subcommittee
- Reviewed the progress and future direction of the Children's Mental Health Commission Advisory Subcommittee
- Agreed the move from bi monthly management accounting to monthly management accounting

Governance Through Board Subcommittees

Finance & Audit Subcommittee

The Finance & Audit Subcommittee comprises four members: the Expert Finance Director, two additional Board members, and the CEO. The Subcommittee is tasked with governance oversight in several key financial and operational areas, including: reserves and deposits, financial reporting and external audit, internal financial controls and risk management, budgeting and financial performance, insurance, and procurement.

The Subcommittee reviews and makes recommendations to the Board on the annual budget, monthly management accounts, audited financial statements, and the organisational risk register. In 2024, the Finance & Audit Subcommittee met on six occasions.

Nominations Subcommittee

The Nominations Subcommittee includes four members of the Board, one of whom is the Chairperson. The subcommittee's responsibilities include:

- Reviewing the role description and person specification for the position of Chairperson
- Recommending suitable candidates for the Chairperson role
- Identifying and proposing suitable candidates for other Board vacancies
- Evaluating the balance of skills, knowledge, experience, and diversity on the Board annually to support effective succession planning
- Leading the recruitment and recommendation of candidates for the role of CEO

Fundraising Advisory Subcommittee

The Fundraising Advisory Subcommittee comprises four members, including the CEO. Its role is to provide oversight and guidance on the organisation's fundraising strategy and budget, identify new fundraising opportunities, monitor fundraising expenditure, and oversee implementation of the fundraising plan. The Subcommittee met twice in 2024.

In 2024, the Board agreed to increase the number of Board members sitting on each Subcommittee from two to three, to further strengthen governance, broaden representation, and enhance oversight.

Conflicts of Interest

Upon appointment, all members of the Board of Directors are provided with Mental Health Reform's Conflict of Interest Policy and are required to complete a Declaration of Interests. At the beginning of each Board meeting, members are invited to declare any actual, potential, or perceived conflicts of interest, or any developments that may affect their independence or loyalty, prior to the discussion of agenda items. Any such declarations are formally recorded in the meeting minutes.

In line with best governance practice, the Conflict of Interest Policy was reviewed by the Board during the first half of 2025 to determine whether any amendments or updates were required.

When a conflict of interest is identified, it must be disclosed at a Board meeting. The nature and extent of the conflict, as well as any steps taken to manage it, will be documented as part of the official record. Following disclosure, the Director concerned may be requested to abstain from discussions or voting on the matter, or, where appropriate, to withdraw from the meeting during the relevant deliberations.

In cases where a conflict is deemed significant or may inhibit a Director's ongoing participation in Board matters, the Board may consider whether continued membership is appropriate.

Board members are reminded of their responsibility to promptly inform the Company Secretary of any changes to their circumstances that may give rise to a conflict of interest.

Board Recruitment and Induction Process

Mental Health Reform (MHR) maintains a comprehensive recruitment and induction process for all incoming Directors, in line with the organisation's Memorandum and Articles of Association. The Board is composed of two categories of Directors:

1. **Member-Elected Directors**

   Nominated by MHR's governing members and elected at the Annual General Meeting (AGM).

2. **Expert Directors**

   Recruited through external networks such as Boardmatch, The Wheel, and Active/ink, with candidates selected based on relevant skills, experience, and competencies. Applicants submit a CV, and shortlisted individuals are invited to interview with the Nominations Subcommittee.

Prior to launching any recruitment campaign, the Chairperson initiates a skills audit of the Board to ensure the composition reflects governance best practice. This includes ensuring that:

- At least one Board member has relevant financial experience;
- The Board has an appropriate mix of sectoral and corporate expertise;
- Gender balance is considered and maintained.

MHR's Nominations Subcommittee is responsible for identifying and recommending suitable candidates for Board vacancies. In 2024, two new Directors joined the Board: Nicola Byrne, CEO of Shine and Ken Kilbride CEO of ADHD Ireland.

Board Induction

Newly appointed Directors attend an induction meeting with the CEO and Chairperson shortly before their first Board meeting. This session provides an overview of:

- MHR's mission, strategic objectives, and operational priorities;
- The history and recent achievements of the organisation;
- The structure of the Board and its subcommittees;
- Key roles and responsibilities of Board members.
- Prior to the induction meeting, new Directors receive an orientation pack that includes:
- A welcome and appointment letter from the Chairperson;
- MHR's Memorandum and Articles of Association;
- An organisational chart;
- Minutes from the previous six Board meetings;
- A schedule of upcoming Board meetings;
- The most recent Annual Report and financial statements;
- MHR's Strategic and Operational Plans;
- The Charities Regulator's Governance Code (Charities Regulatory Authority);
- MHR's Financial Procedures and Policies Manual;
- MHR's Governance Handbook;
- The Code of Conduct and Conflict of Interest Policy.

Following induction, Directors are required to sign a declaration acknowledging their understanding of the Code of Conduct and their responsibilities as Board members.

Ongoing Development and Commitment to Governance Excellence

Throughout the year, Directors are encouraged to undertake training and development to strengthen their governance skills, deepen their understanding of the sector, and stay informed on emerging best practices. Relevant learning opportunities are shared via email and noted at Board meetings.

In December 2024, a Board Skills Assessment Survey was completed in partnership with Boardmatch. This assessment not only provided valuable insights into the Board's existing strengths and expertise but also reflected the Directors' collective commitment to continuous improvement, development of new competencies, and ongoing learning in service of MHR's mission.

Risk management

In line with best practices in governance, Mental Health Reform (MHR) actively manages its principal risks through a structured and transparent process. A comprehensive Risk Register is maintained to identify key financial, reputational, operational, strategic, legal, environmental, and other relevant risks. Each risk is assessed for likelihood and impact, and appropriate mitigation controls are implemented to manage them effectively.

Risk oversight is embedded within MHR's governance structures at all levels:

- Senior Leadership team reviews the full Risk Register on a bi-monthly basis, ensuring that risks across all operational areas are actively monitored and addressed.
- The Finance & Audit Subcommittee reviews the Risk Register at each of its meetings, with a particular focus on the identification of new risks, changes to the likelihood or impact of existing risks, and the effectiveness of current mitigation measures.
- The Board of Directors receives updates on key changes to the Risk Register at every Board meeting. This includes recommendations for any necessary adjustments to internal procedures, policies, or resource allocation in response to emerging or evolving risks.

Key Risk Themes in 2024

One of the key risk areas identified during 2024 relates to MHR's ability to grow and diversify its fundraising income, which is critical to maintaining and strengthening its unrestricted reserves. While the organisation continued to prioritise the development of both existing and new income sources, MHR was not in a position to expand its internal fundraising capacity during the year. This was primarily due to the lack of available unrestricted income beyond the reserves balance to cover additional salary costs.

To mitigate this risk, MHR engaged a fundraising consultant through 2into3, who worked closely with the team to focus limited internal resources on high-impact strategies. This targeted approach aimed to optimise fundraising outcomes while operating within existing budgetary constraints.

This reflects the dynamic nature of risk management within MHR, where emerging financial and operational challenges are addressed proactively through strategic interventions.

In 2024, staff retention emerged as a significant risk for the organisation due to the increasingly competitive nature of recruitment across the sector, particularly as pay disparities between Section 39 organisations and HSE-employed staff continued to draw attention. While the WRC-recommended pay restoration agreement was publicly announced, delays in the actual transfer of funds created the impression that organisations were not implementing the increases. To address this challenge and maintain staff trust, the organisation prioritised transparent and regular internal communications, clearly explaining the funding process and timelines. It engaged proactively with sector representative bodies such as The Wheel to stay informed and advocate for timely implementation. Staff were also encouraged to access reliable information sources and were regularly reassured of the organisation's commitment to fair pay. These

steps were part of a broader effort to retain valued employees and reinforce the organisation's role as an advocate, not a barrier, in securing fair conditions.

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

The Board of Directors at Mental Health Reform is firmly committed to upholding the highest standards of corporate governance, accountability, and transparency.

As part of our continuous governance improvement, the Board undertakes an annual self-assessment to identify development needs and strategic priorities for the year ahead. This process helps ensure the Board remains effective, informed, and responsive to the evolving needs of the organisation and its stakeholders.

In October 2024, Mental Health Reform completed its annual return in full compliance with the Charities Regulator's Governance Code. As a complex charity, MHR adheres to the additional governance requirements set out in the Code. An annual self-assessment against the Code is conducted to evaluate governance practices, with policies reviewed, updated, and formally approved by the Board as required.

In recognition of our strong governance framework, Mental Health Reform was shortlisted for the Good Governance Awards under Category 3 in 2024.

Beyond the Charities Regulator's Governance Code, MHR remains committed to adhering to all relevant legal and regulatory standards, including:

- The Charities Regulator's Guidelines for Charitable Organisations on Fundraising from the Public, which inform and guide all fundraising activities;
- The Companies Act 2014;
- The Charities SORP (FRS 102), governing financial reporting for charities.

In alignment with its commitment to good governance and sustainability, Mental Health Reform will undertake an ESG (Environmental, Social, and Governance) review in 2025. This review will assess current practices and set a structured roadmap using the following focus areas:

1. Assessing existing ESG alignment across all operational and strategic areas;

2. Setting targeted ESG goals to promote sustainability, inclusivity, and accountability;

3. Embedding ESG principles into governance structures, including board reporting and risk management;

4. Enhancing transparency through regular stakeholder reporting on ESG progress.

Director's remuneration

No remuneration or other benefits were paid, either directly or indirectly, to any member of the Board of Directors. In 2024, one expense claim was submitted in relation to travel costs incurred while supporting the interview process for the Interim CEO.

The key management personnel for Mental Health Reform in 2024 included Fiona Coyle (CEO}, Philip Watt (Interim CEO}, Niamh O'Connor (Communications and Engagement Manager), Stephen Sheil (Interim Communications & Engagement Manager}, Ber Grogan (Policy and Research Manager}, and Wendy Mitchell (Finance, Operations, and Governance Manager). The average number of employees over the 12-month period was 10.5. While the total number of employees who worked for the organisation during the year exceeded this figure, 10.5 represents the average on a yearly basis. There were no volunteers during the year.

The CEO's salary for 2024 was €89,959.00, with an additional 5% employer contribution into a defined contribution pension on her behalf. The interim CEO's salary for the year was €24,615, with no employer contributions made due to the short-term nature of the appointment.

The CEO and Interim CEO are appointed by the Board of Directors but are not board members. During the financial year, the number of employees whose total remuneration (excluding employer pension & PRSI contributions) fell into the following salary bands:

- €0.00 - €19,999: 1 employee
- €20,000 - €29,999: 3 employees
- €30,000 - €39,999: 3 employees
- €40,000 - €49,999: 0 employees
- €50,000 - €59,999: 4 employees
- €60,000 - €69,999: 1 employee
- €70,000 - €79,999: 0 employees
- €80,000 - €89,999: 1 employee

The remuneration figures include one-off back pay issued during the year as a result of a Workplace Relations Commission (WRC) decision. In some cases, this resulted in employees being reported in a higher salary band than their standard annual salary would typically reflect.

The Board reviews and approves the CEO's and staff remuneration packages as part of the annual budget process.

Performance Management

Mental Health Reform is dedicated to creating an environment that nurtures and supports its employees in reaching their full potential. To facilitate this, the CEO and Board of Directors allocate an annual budget for training and development activities. As part of this commitment, the management team has been encouraged to participate in the Carmichael Mentorship Programme and The Wheel Leadership Breakfast to further enhance their leadership and professional development.

To ensure staff members can excel in their roles, the CEO and senior management team regularly engage in discussions with team members about their development needs and career aspirations. These discussions include setting objectives at the start of the year, with scheduled reviews throughout the year to assess progress against both individual and organisational goals. Together, the employee and management identify future training and development needs, with both parties actively involved in the process.

All staff participate in the organisation's performance management process. The Chairperson of the Board, alongside two other board members, is responsible for reviewing the performance of the CEO.

Additionally, MHR uses a CRM system to track performance management reviews, training requests, and general HR management. The CRM system also helps the organisation track which staff members have undertaken training to address any identified skills gaps. This enables MHR to align staff skills with organisational strengths, further supporting the development of a high-performing team. The use of the CRM system has strengthened the organisation's processes throughout 2024.

Financial Review

The financial results for 2024 are outlined in the Statement of Financial Activities.

Total income for the year amounted to €866,161, representing an 18.8% increase compared to 2023. This growth reflects the positive impact of MHR's new fundraising strategy.

Fundraising and donations generated €22,181, an increase of 29.6% from 2023. In addition, MHR generated €20,643 in income during the year, the majority of which arose from successful tender submissions and fees received for speaking engagements.

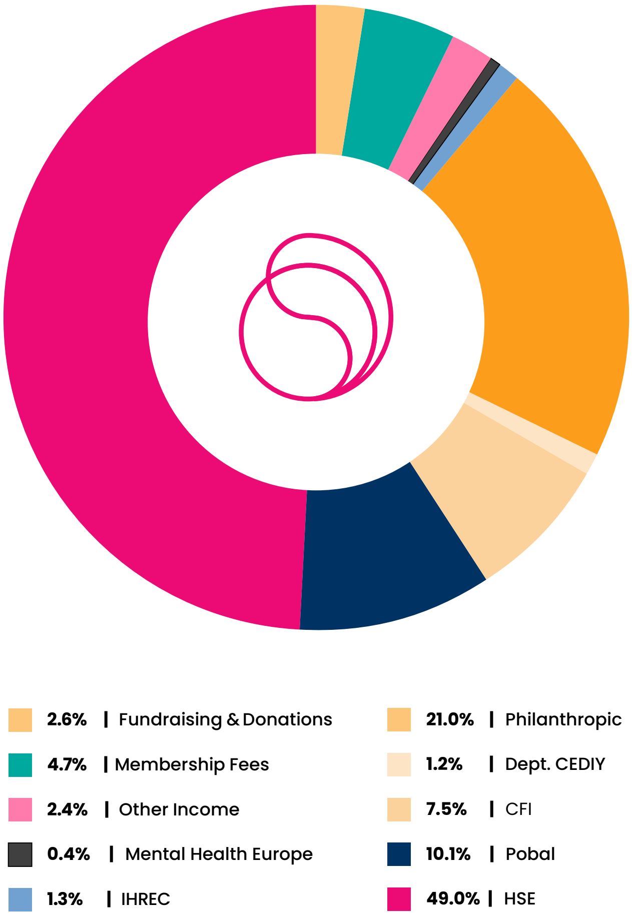
A significant portion of this income growth 42.4% was generated through the delivery of our Mental Health in the Workplace training programme to public sector employees, which aligns with our mission to promote improved mental health and wellbeing. Mental Health Reform aims to expand this programme between 2025 and 2027, setting incremental income targets and extending its reach across the wider public sector and into the private sector.

Membership income exceeded expectations, with total fees rising to over €40,000, reflecting strong engagement from member organisations and continued support for MHR's mission.

Total expenditure in 2024 was €855,444, reflecting a 20.7% increase on the previous year. This includes:

- Programme activity costs totalled €113,646 in 2024, representing a 71.3% increase from the previous year and accounting for 13.3% of total expenditure. This increase primarily reflects expanded investment in the organisation's Children and Young People Mental Health project and coloration with the London School of Economics
- Staff costs on €651,451 representing a 19.1% increase from 2023 and 76.2% of total expenditure.

As MHR prepares its accounts on an accrual basis, €102,719 in income has been deferred into 2025. This deferral reflects funding received in advance for projects continuing or launching in 2025, including the publication of a report under the Children and Young People Mental Health strand of the Innovation Programme, as well as other new initiatives set to commence early in the new year.



Funders and income sources

In 2024, MHR received funding from a number of sources, including government grants, philanthropic grants and other income streams. The Board of Directors has been cognisant of the need to develop diverse and sustainable funding channels in order to reduce our reliance on government funding.

Reserves policy

To uphold robust financial controls and ensure the effective internal management of its resources, Mental Health Reform (MHR) operates under a Board-approved reserves policy. This policy requires the organisation to maintain unrestricted reserves equivalent to a minimum of four months' average expenditure. These reserves serve as a financial safeguard to:

- Cover shortfalls in income, given MHR's lack of long-term guaranteed funding;
- Address funding delays or reductions from existing funders;
- Support operational continuity during unforeseen events or crises.

The Finance & Audit Subcommittee and the Board review the organisation's reserve levels on a bi-monthly basis, making it a core component of MHR's planning, budgeting, and forecasting cycle. This ensures that the reserves strategy informs all strategic and financial decision-making.

As of December 31st, 2024, MHR held unrestricted reserves of €192,062, against an average monthly core expenditure of €61,692. While this reflects steady growth from €171,284 in 2022 and €181,345 in 2023, the current reserves still fall short of the four-month target outlined in the reserves policy.

This shortfall is partly attributable to the organisation's support for paid maternity leave for two staff members during the year-an important investment in staff retention and wellbeing. Additionally, as MHR has expanded operations and strategically invested in building its fundraising capacity, operational costs have increased. This includes the allocation of additional staff time and resources toward income generation, making it more challenging to fully close the reserves gap in the short term.

The Board remains fully committed to financial stability and recognises the vital role of adequate reserves in ensuring MHR's long-term resilience. As such, the organisation will undertake a review of its reserves policy in 2025 to assess its suitability and ensure alignment with MHR's evolving financial position and strategic needs.

Going Concern

The organisation has cash and cash equivalents of (€313,988.00) as at 31st December 2024. 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.

The Auditors

Whelan Dowling & Associates was appointed as MHRs appointed as auditor for the organisation at the AGM on 18th July 2024 The auditors, Whelan Dowling & Associates, Chartered Accountants and Statutory Audit Firm, continue in office in accordance with the provisions of section 383(2) of the Companies Act 2014.

Statement on Relevant Audit Information

In accordance with section 330 of the Companies Act 2014, so far as each of the persons who are directors at the time this report is approved are aware, there is no relevant audit information of which the statutory auditors are unaware. The directors have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and they have established that the statutory auditors are aware of that information.

Compliance Statement

The directors are responsible for securing the company's compliance with its relevant obligations (compliance with both company and tax law) and with respect to each of the following three items, we confirm that it has/has not been done.

We confirm:

- the existence of a compliance policy statement;
- appropriate arrangements or structures put in place to secure material compliance with the company's relevant obligations;
- a review of such arrangements and structures has taken place during the financial year

Accounting Records

To ensure that adequate accounting records are kept in accordance with Sections 281 to 285 of the Companies Act 2014, the directors have employed appropriately qualified accounting personnel and have maintained appropriate computerised accounting systems. The accounting records are located at the company's office at Coleraine Houe, Coleraine Street, Dublin 7.

Approved by the Board of Directors on 24th June 2025 and signed on its behalf by:

Michele Kerrigan
Director

Sheila Gilheany
Director

Directors' Responsibilities Statement for the financial year ended 31 December 2024

The directors are responsible for preparing the Directors' Annual Report and Financial Statements in accordance with the Companies Act 2014 and applicable regulations.

Irish company law requires the directors to prepare financial statements for each financial year. Under the law the directors have elected to prepare the financial statements in accordance with FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" issued by the Financial Reporting Council. Under company law, the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the charity as at the financial year end date and of the net income or expenditure of the charity for the financial year and otherwise comply with the Companies Act 2014. In preparing these financial statements, the directors are required to:

- select suitable accounting policies and apply them consistently; make judgements 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 charity will continue in operation.

The directors confirm that they have complied with the above requirements in preparing the financial statements.

As explained in note 4, state whether the applicable in the UK and Republic of Ireland FRS 102 has been followed;
The directors are responsible for ensuring that the charity keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the charity, enable at any time the assets, liabilities, financial position and net income or expenditure of the charity to be determined with reasonable accuracy, enable them to ensure that the financial statements and the Directors' Annual Report comply with Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Approved by the Board of Directors on 24th June 2025 and signed on its behalf by:

Michele Kerrigan

Michele Kerrigan
Director

Sheila Gilheany
Director

Independent Auditors' Report

Report on the audit of the financial statements

Opinion

We have audited the charity financial statements of Mental Health Reform ('the Charity') for the financial year ended 31 December 2024 which comprise the Statement of Financial Activities (incorporating an Income and Expenditure Account), the Balance Sheet, the Statement of Cash Flows and the notes to the financial statements, including the summary of significant accounting policies set out in note 2. The financial reporting framework that has been applied in their preparation is Irish law and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with FRS 102.

In our opinion the financial statements:

- give a true and fair view of the assets, liabilities and financial position of the Charity as at 31 December 2024 and of its surplus for the financial year then ended;
- have been properly prepared in accordance with FRS 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 below in the Auditor's responsibilities for the audit of the financial statements section of our report.

We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of financial statements in Ireland, including the Ethical Standard for Auditors (Ireland) 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 charity's ability to continue as a going concern for a period of at least twelve months from the date 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 Auditor's 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 course of the audit, or otherwise appears to be materially misstated. Ifwe identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2014

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

- the information given in the Directors' Annual Report is consistent with the financial statements;
- the Directors' Annual Report has been prepared in accordance with the Companies Act 2014; and
- the accounting records of the charity were sufficient to permit the financial statements to be readily and properly audited and the financial statements are in agreement with the accounting records.

We have obtained all the information and explanations which, to the best of our knowledge and belief, are necessary for the purposes of our audit.

In our opinion the accounting records of the charity 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 charity and its environment obtained in the course of the audit, we have not identified any material misstatements in the Directors' Annual 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 complied with by the charity. We have nothing to report in this regard.

Respective responsibilities

Responsibilities of directors for the financial statements

As explained more fully in the Directors' Responsibilities Statement set out on page 83, the directors are responsible for the preparation of the financial statements in accordance with the applicable financial reporting framework that give a true and fair view, and for such internal control as they 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 charity'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 they either intend to liquidate the charity or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditor's Report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (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.

Further information regarding the scope of our responsibilities as auditor

As part of an audit in accordance with ISAs (Ireland), we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the charity's internal control.

Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by directors.

Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the charity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our Auditor's Report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion.

Our conclusions are based on the audit evidence obtained up to the date of our Auditor's Report. However, future events or conditions may cause the charity to cease to continue as a going concern.

Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

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

Our report is made solely to the charity's members, as a body, in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the charity's members those matters we are required to state to them in an Auditor's Report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's members, as a body, for our audit work, for this report, or for the opinions we have formed.

Sean Whelan

Sean Whelan FCA for and on behalf of

WHELAN DOWLING & ASSOCIATES
Chartered Accountants and
Statutory Audit Firm Block 1, Unit 1 & 4
Northwood Court Santry,
Dublin 9

Statement Of Financial Activities

(Incorporating an Income and Expenditure Account) for the financial year ended 31 December 2024

	Notes	Unrestricted Funds 2024 €	Restricted Funds 2024 €	Total Funds 2024 €	Unrestricted Funds 2023 €	Restricted Funds 2023 €	Total Funds 2023 €
Income							
Donations and Membership Fees	6.1	42,277		42,277	36,230	-	36,230
Charitable activities – Statutory and Philanthrophic Grants	6.2		782,779	782,779	-	674,274	674,274
Other trading activities	6.3	41,105		41,105	15,690	-	15,690
Total income		83,382	782,779	866,161	51,920	674,274	726,194
Expenditure							
Raising funds	7.1	1,491		1,491	-	991	991
Charitable activities	7.2	79,125	774,828	853,953	33,908	673,283	707,191
Total Expenditure		80,616	774,825	855,444	33,908	674,274	708,182
Net income/ (expenditure)		2,766	7,951	10,717	18,012	-	18,012
Transfers between funds					-	-	-
Net movement in funds for the financial year		2,766	7,951	10,717	18,012	-	18,012
Reconciliation of funds							
Total funds beginning of the year	17	189,296	(7,951)	181,345	171,284	(7,951)	163,333
Total funds at the end of the year		192,062		192,062	189,296	(7,951)	181,345

The Statement of Financial Activities includes all gains and losses recognised in the financial year. All income and expenditure relate to continuing activities.

Approved by the Board of Directors on 24th June 2025 and signed on its behalf by:

Michele Kerrigan

Michele Kerrigan
Director

Sheila Gilheany
Director

Balance Sheet
as of 31 December 2024

	Notes	2024 €	2023 €
Current Assets			
Debtors	11	5,765	2,385
Cash at Bank and in hand	12	313, 988	326,830
		319,753	329,215
Creditors: Amounts falling due within one year	13	(127,691)	(147,870)
Net Current Assets		192,062	181,345
Total Assets less Current Liabilities		192,062	181,345
Funds			
Restricted Funds		–	(7,951)
General Fund (Unrestricted)		192,062	189,296
Total Funds	17	192,062	181,345

The Statement of Financial Activities includes all gains and losses recognised in the financial year. All income and expenditure relate to continuing activities.

Approved by the Board of Directors on 24th June 2025 and signed on its behalf by:

Michele Kerrigan

Michele Kerrigan
Director

Sheila Gilheany
Director

Statement of Cash Flows

for the financial year ended 31 December 2024

	Notes	2024 €	2023 €
Cash flows from operating activities			
Net movement in funds		10,717	18,012
		10,717	18,012
Movements in working capital			
Movement in debtors		(3,380)	24,038
Movement in creditors		(20,179)	(161,604)
Cash used in operations		(12,842)	(119,554)
Net decrease in cash and cash equivalents		(12,842)	(119,554)
Cash and cash equivalents at the beginning of the year		326,830	446,384
Cash and cash equivalents at the end of the year	12	313,988	326,830

The Statement of Financial Activities includes all gains and losses recognised in the financial year. All income and expenditure relate to continuing activities.

Approved by the Board of Directors on 24th June 2025 and signed on its behalf by:

Michele Kerrigan

Michele Kerrigan
Director

Sheila Gilheany
Director

Notes to the Financial Statements

for the financial year ended 31 December 2024

1. GENERAL INFORMATION

Mental Health Reform is a company limited by guarantee incorporated in Ireland. The registered office of the charity is Coleraine House, Coleraine Street, Dublin 7 which is also the principal place of business of the charity. The financial statements have been presented in Euro (€) which is also the functional currency of the charity.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the charity's financial statements.

Basis of preparation

The financial statements have been prepared under the historical cost convention, modified to include certain items at fair value. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland FRS 102".

The Charity has applied the Charities SORP on a voluntary basis as its application is not a requirement of the current regulations for charities registered in the Republic of Ireland. As permitted by the Companies Act 2014, the charity has varied the standard formats in that act for the Statement of Financial Activities and the Balance Sheet. Departures from the standard formats, as outlined in the Companies Act 2014, are to comply with the requirements of the Charities SORP and are in compliance with section 4.7, 10.6 and 15.2 of that SORP.

Statement of compliance

The financial statements of the charity for the financial year ended 31 December 2024 have been prepared on the going concern basis and in accordance with the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland FRS 102".

Fund accounting

The following are the categories of funds maintained:

Restricted funds

Restricted funds represent income received which can only be used for particular purposes, as specified by the donors. Such purposes are within the overall objectives of the charity.

Unrestricted funds

Unrestricted funds consist of General and Designated funds.

- General funds represent amounts which are expendable at the discretion of the board, in furtherance of the objectives of the charity.

- Designated funds comprise unrestricted funds that the board has, at its discretion, set aside for particular purposes. These designations have an administrative purpose only, and do not legally restrict the board's discretion to apply the fund.

Income

Income is recognised by inclusion in the Statement of Financial Activities only when the charity is legally entitled to the income, performance conditions attached to the item(s) of income have been met, the amounts involved can be measured with sufficient reliability and it is probable that the income will be received by the charity.

Donations and membership

Income is recognised at the fair value of the donations received or receivable. Donations with restrictions or conditions attached shall be recognised as income if the restrictions and conditions are under the Company's purview and it is probable that these restrictions and conditions will be met. Otherwise, these donations are recognised as deferred income until the above criteria are fulfilled or when the restrictions or conditions expire.

Income from charitable activities

Income from charitable activities include income earned from the supply of services under contractual arrangements and from performance related grants which have conditions that specify the provision of particular services to be provided by the charity. Income from government and other co-funders is recognised when the charity is legally entitled to the income because it is fulfilling the conditions contained in the related funding agreements. Where a grant is received in advance, its recognition is deferred and included in creditors. Where entitlement occurs before income is received, it is accrued in debtors.

Grants from governments and other co-funders typically include one of the following types of conditions:

Performance based conditions: whereby the charity is contractually entitled to funding only to the extent that the core objectives of the grant agreement are achieved. Where the charity is meeting the core objectives of a grant agreement, it recognises the related expenditure, to the extent that it is reimbursable by the donor, as income.

Time based conditions: whereby the charity is contractually entitled to funding on the condition that it is utilised in a particular period. In these cases, the charity recognises the income to the extent it is utilised within the period specified in the agreement.

In the absence of such conditions, assuming that receipt is probable and the amount can be reliably measured, grant income is recognised once the charity is notified of entitlement.

Grants received towards capital expenditure are credited to the Statement of Financial Activities when received or receivable, whichever is earlier.

Expenditure

Expenditure is analysed between costs of charitable activities and raising funds. The costs of each activity are separately accumulated and disclosed, and analysed according to their major components. Expenditure is recognised when a legal or constructive obligation exists as a result of a past event, a transfer of economic benefits is required in settlement and the amount of the obligation can be reliably measured. Support costs are those functions that assist the work of the charity but cannot be attributed to one activity. Such costs are allocated to activities in proportion to staff time spent or other suitable measure for each activity.

Allocation of support funds

Support costs are those functions that assist the work of the Charity but do not directly undertake charitable activities. Support costs include general management and back office costs, IT, finance, HR, payroll and governance costs which support the Charity's programmes and activities. These costs have been allocated between cost of raising funds and expenditure on charitable activities. The bases on which support costs have been allocated are set out in note 6.

Debtors

Debtors are recognised at the settlement amount due after any discount offered.

Prepayments are valued at the amount prepaid net of any trade discounts due. Income recognised by the charity from government agencies and other co-funders, but not yet received at financial year end, is included in debtors.

Trade and other creditors

Trade and other creditors are initially recognised at fair value and thereafter stated at amortised cost using the effective interest rate method, unless the effect of discounting would be immaterial, in which case they are stated at cost.

Cash at bank and in hand

Cash at bank and in hand comprises cash on deposit at banks requiring less than three months' notice of withdrawal.

Taxation

No current or deferred taxation arises as the charity has been granted charitable exemption, charity number 20078737 (CHY number: 19958). Irrecoverable valued added tax is expensed as incurred.

Grants receivable

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.

Pensions

The charity operates a defined contribution pension scheme for employees. The assets of the scheme are held separately from those of the charity. Annual contributions payable to the charity's pension scheme are charged to the income and expenditure account in the period to which they relate

Financial Instruments

The Company only enters into basic financial instrument transactions that result in the recognition of financial assets and liabilities like trade and other debtors and creditors, loans from banks and other third parties, loans to related parties and investments in ordinary shares.

Debt instruments (other than those wholly repayable or receivable within one year), including loans and other accounts receivable and payable, are initially measured at present value of the future cash flows and subsequently at amortised cost using the effective interest method. Debt instruments that are payable or receivable within one year, typically trade debtors and creditors, are measured, initially and subsequently, at the undiscounted amount of the cash or other consideration expected to be paid or received. However, if the arrangements of a short-term instrument constitute a financing transaction, like the payment of a trade debt deferred beyond normal business terms or in case of an out-right short-term loan that is not at market rate, the financial asset or liability is measured, initially at the present value of future cash flows discounted at a market rate of interest for a similar debt instrument and subsequently at amortised cost, unless it qualifies as a loan from a director in the case of a small company, or a public benefit entity concessionary loan.

Financial assets that are measured at cost and amortised cost are assessed at the end of each reporting period for objective evidence of impairment. If objective evidence of impairment is found, an impairment loss is recognised in the Profit and Loss Account.

For financial assets measured at amortised cost, the impairment loss is measured as the difference between an asset's carrying amount and the present value of estimated cash flows discounted at the asset's original effective interest rate. If a financial asset has a variable interest rate, the discount rate for measuring any impairment loss is the current effective interest rate determined under the contract.

For financial assets measured at cost less impairment, the impairment loss is measured as the difference between an asset's carrying amount and best estimate of the recoverable amount, which is an approximation of the amount that the Company would receive for the asset if it were to be sold at the balance sheet date.

Financial assets and liabilities are offset and the net amount reported in the Balance Sheet when there is an enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

3. SIGNIFICANT ACCOUNTING JUDGEMENTS 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.

4. 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.

5. CRITICAL ACCOUNTING JUDGEMENT AND ESTIMATES

Useful economic lives of tangible fixed assets

The annual depreciation on tangible fixed assets is sensitive to changes in the estimated useful economic lives and residual values of the assets. The useful economic lives and residual values are reviewed annually. They are amended when necessary to reflect current estimates, based on technological advancement, future investments, economic utilisation and the physical condition of the assets. See note 8 for the carrying amount of the tangible fixed assets.

Income recognition

In applying the income recognition principles of the Charities SORP, judgements are occasionally required to ascertain whether a grant agreement is performance or non-performance based. This is done using established criteria that are applied consistently across all funding instruments and from one period to the next. Furthermore, where grant agreements are found to be performance based, judgements are required as to the level of income that should be recognised for the year. All judgements are made at the individual grant level and are subject to appropriate review and approval processes.

Assisted Decision Making Mentorship Event

DFI Think On Budget

Good Governance Awards

IHREC Think In DFI

Leaders in Lived Experience – Expert Panel

Oireachtas Language Briefing with Jigsaw

Income

6.1	DONATIONS AND MEMBERSHIP FEES	Unrestricted Funds	Restricted Funds	2024	2023
		€	€	€	€
	Donations	Unrestricted	2024	42,277	36,230
	Membership		782,779	782,779	-
		41,105		41,105	15,690

6.2	CHARITABLE ACTIVITIES	Unrestricted	Restricted	2024	2023
	Grants from Government and other co-founders				
	HSE Grant	–	424,104	424,104	394,698
	Mental Health Europe	–	3,083	3,083	–
	IHREC 2023-2024	–	10,870	10,870	–
	The Giving Circle	–	3	3	–
	Children & Young People MH Project (CYPMH)	–	182,161	182,161	86,849
	Hospital Sunday Fund	–	–	–	2,870
	Community Foundation Ireland (CFI-BNC)	–	55,155	55,155	44,270
	Community Foundation Ireland (Social Inclusion)	–	9,624	9,624	–
	Department of Children, Equality, Disability, Integration and Youth	–	9,999	9,999	19,568
	HSE Digital Divide	–	–	–	17,761
	Pobal funding SSNO 2022-2025	–	87,762	87,762	93,852
	Strategy Development Support CFI	–	–	–	1,038
	HSE Inflation Fund	–	–	–	13,368
		–	782,779	782,779	674,274

6.3	OTHER TRADING ACTIVITIES	Unrestricted	Restricted	2024	20234
		20,643	–	20,643	1,233
		20,462	–	20,462	14,457
		41,105	–	41,105	15,690

Expenditure

7	RAISING FUNDS	Direct Costs	Other Costs	Support Costs	2024	2023
		€	€		€	€
7.1	Raising Funds	–	–	1,491	1,491	991

7.2	CHARITABLE ACTIVITIES	Direct Costs	Other Costs	Support Costs	2024	2023
		€	€	€	€	€
	Expenditure on charitable activities	–	–	846,888	846,888	702,468
	Governance Costs (Note 7.3)	–	–	7,065	7,065	4,723
		–	–	853,953	853,953	707,191

7.3	GOVERNANCE COSTS	Direct Costs	Other Costs	Support Costs	2024	2023
		€	€	€	€	€
	Audit fees	–	–	3,690	3,690	1,730
	Internal audit and governance	–	–	3,375	3,375	2,993
				7,065	7,065	4,723

7.4	SUPPORT COSTS	Costs of Raising Funds	Charitable Costs	Governance Costs	2024	2023
		€	€	€	€	€
	Running Costs	–	81,791	7,065	88,856	93,981
	Staff Costs	–	651,451	–	651,451	546,861
	Consultation, education and advocacy costs	1,491	113,646	–	115,137	67,340
		1,491	846,888	7,065	855,444	708,182

Expenditure (contd.)

8	ANALYSIS OF SUPPORT COSTS	2024	2023
		€	€
	Running Costs	88,856	93,981
	Staff Costs	651,451	546,861
	Consultation, education and advocacy costs	115,137	67,340
		855,444	708,182

9	EMPLOYEES AND REMUNERATION	2024	2023
		Number	Number

The average number of persons employed (including executive directors) during the financial year was as follows:

	2024	2023
Employee	10	10
The staff costs comprise:	2024	2023
	€	€
Wages and salaries	574,467	480,945
Social security costs	56,289	48,848
Pension costs	20,695	17,068
	651,451	546,861

10 EMPLOYEE BENEFITS

The number of employees whose total employee benefits (excluding employer pension costs) for the reporting period fell within the bands below were:

	2024	2023
	Number	Number
€0 - €60,000	11	11
€60,000 - €70,000	1	–
€80,000 - €90,000	1	1

The CEO of Mental Health Reform was the only staff member whose employment benefits were in excess of €70,000. During the year there was in Interim CEO employed. The CEO's salary for 2024 was €89,959.00, with an additional 5% employer contribution into a defined contribution pension on their behalf. The interim CEO's salary for the year was €24,615, with no employer contributions made due to the short-term nature of the appointment.

The key management personnel for Mental Health Reform in 2024 included Fiona Coyle (CEO), Philip Watt (Interim CEO), Niamh O'Connor (Communications and Engagement Manager), Stephen Sheil (Interim Communications & Engagement Manager), Ber Grogan (Policy and Research Manager), and Wendy Mitchell (Finance, Operations, and Governance Manager). No employee of the company acts as a director. There was no compensation paid to the directors of the company in the year ended 31st December 2024.

While the total number of employees who worked for the organisation during the year exceeded this figure, 10.5 represents the average on a yearly basis. The difference is primarily due to factors such as a maternity leave position where both the person on leave and their cover were on payroll simultaneously, as well as recruitment changes where turnover in certain roles meant that more than one person filled the same position over the course of the year.

11	DEBTORS	2024 €	2023 €
	Other Debtors	3,222	917
	Prepayments	2,543	1,468
		5,765	2,385

12	CASH AND CASH EQUIVALENTS	2024 €	2023 €
	Cash and bank balances	313,988	326,830

13	CREDITORS	2024 €	2023 €
	Trade creditors	1,538	5,318
	Taxation and social security costs	18,962	12,340
	Other creditors	1,601	142
	Pension accrual	(817)	(311)
	Accruals	3,690	3,690
	Deferred Income	102,717	126,691
		127,691	147,870

Expenditure (contd.)

14 PENSION COSTS - DEFINED CONTRIBUTION

The charity operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in an independently administered fund. Pension costs amounted to €20,695 (2023 - €17,068).

The Company allocates the defined contribution plan pension liability and expense between restricted and unrestricted funding depending on whether the funding for the employment is restricted or unrestricted.

15 STATE FUNDING

AGENCY	Pobal
Government Department	Department of Social Protection
Grant Programme	Statutory Scheme for National Organisations
Purpose of the Grant	To fund the CEO position, Finance, Operations and Governance Manager, and Policy & Research Manager, along with a contribution to overhead costs and staff training and development. The positions will contribute to increased representation and/or advocacy plans developed and actioned; strengthened research/policy development and implementation; and strengthened community and voluntary sector with improved collaborations and partnerships among organisations.
Term	01/07/2022 until 30/06/2025
Total Fund	€272,828
Expenditure	€87,762
Fund deferred or due at financial year end	€3,472
Received in the financial year	€91,234
Capital Grant	No
Restriction on use	Yes - restricted to use defined in SLA

AGENCY	Department of Health
Government Department	HSE
Grant Programme	Mental Health Community Operations
Purpose of the Grant	Fund core services
Term	1st January 2024 until 31 December 2024
Total Fund	€460,428 - €425,069 core funding - €4,659 inflation grant - €30,700 additional income in relating to WRC pay agreement.
Expenditure	€424,104
Fund deferred or due at financial year end	€36,324
Received in the financial year	€460,428
Capital Grant	No
Restriction on use	Yes - restricted to use defined in SLA

AGENCY	Department of Health
Government Department	HSE
Grant Programme	Digital Divide
Purpose of the Grant	Deliver Digital Divide Report
Term	1st January 2022 until 31 December 2022
Total Fund	–
Expenditure	–
Fund deferred or due at financial year end	€124
Received in the financial year	€NIL
Capital Grant	No
Restriction on use	Yes - restricted to use defined in SLA

AGENCY	The Department Of Children, Equality, Disability, Integration And Youth
Government Department	DCEDIY
Grant Programme	Disability Participation and Consultation Network
Purpose of the Grant	The purpose of acting as a Grant-Funded Member of the Disability Participation and Consultation Network.
Term	1st January 2024 until 31 December 2024
Total Fund	€10,000
Expenditure	€9,999
Fund deferred or due at financial year end	€1
Received in the financial year	€10,000
Capital Grant	No
Restriction on use	Yes - restricted to use defined in SLA

Note 1 The State's investment is protected and will not be used as security for any other activity without prior consultation with the HSE.

Note 2 The charity is compliant with Circular 44/2006 "Tax clearance procedures: grants, subsidies and similar type payments".

Note 3 The charity is compliant with Circular 13/2014 "Management of and Accountability for Grants from Exchequer Funds".

16	RESERVES	2024 €	2023 €
	At the beginning of the year	181,345	163,333
	Surplus for the financial year	10,717	18,012
	At the end of the year	192,062	181,345

17 FUNDS

17.1	RECONCILIATION OF MOVEMENT IN FUNDS	Unrestricted Funds €	Restricted Funds €	Total Funds €
	At 1 January 2023	171,284	(7,951)	163,333
	Movement during the financial year	18,012	–	18,012
	At 1 January 2023	189,296	(7,951)	181,345
	Movement during the financial year	2,766	7,951	10,717
	At 31 December 2024	192,062	–	192,062

17.2 ANALYSIS OF MOVEMENTS ON FUNDS

	Balance 1 January 2024 €	Income €	Expenditure €	Transfers Between Funds €	Balance 31 December 2024 €
Restricted	(7,951)	782,779	774,828	–	–
Unrestricted funds					
Unrestricted General	189,296	83,382	80,616	–	192,062
Total funds	181,345	866,158	855,444	–	192,062

17.3	ANALYSIS OF NET ASSETS BY FUND	Current Assets	Current Liabilities	Total
		€	€	€
	Unrestricted funds	319,753	(127,691)	192,062
		319,753	**(127,691)**	**192,062**

18	STATUS	The charity is limited by guarantee not having a share capital. The liability of the members is limited. Every member of the company undertakes to contribute to the assets of the company in the event of its being wound up while they are members, or within one financial year thereafter, for the payment of the debts and liabilities of the company contracted before they ceased to be members, and the costs, charges and expenses of winding up, and for the adjustment of the rights of the contributors among themselves, such amount as may be required, not exceeding € 1.
19	CAPITAL COMMITMENTS	The charity had no material capital commitments at the financial year-ended 31 December 2024.
20	CONTINGENT LIABILITIES	The company had no contingent liabilities at the financial year-ended 31 December 2024.
21	RELATED PARTY TRANSACTIONS	No remuneration or other benefits were paid, either directly or indirectly, to any member of the Board of Directors. In 2024, one expense claim was submitted in relation to travel costs incurred while supporting the interview process for the Interim CEO.
22	POST-BALANCE SHEET EVENTS	There have been no significant events affecting the Charity since the financial year-end.

23	Deferred Income	2024 €	2023 €
	Community Foundation Ireland (CFI-Brave New Connections 2.0)	2,253	55,760
	Community Foundation Ireland (2024-2026)	28,608	–
	Community Foundation Ireland (Adapt/Respond/Coll)	–	1,648
	SSNO - Pobal	3,472	292
	HSE Core Funding	36,324	24,515
	Giving Circle of Ireland	–	3
	IHREC 2023-2024	405	4,510
	Dept. of Children DYCA 2021-2022	–	715
	Other (EMEN, Hospital Saturday Fund & Digital Divide)	545	544
	Children & Young People Mental Health Project	30,989	38,151
	HSE Digital Divide	124	124
	Dept. of Children DCEDIY 2022-2023	-	432
		102,719	126,692

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.


Mental
Health
Reform

Supplementary Information relating to the Financial Statements

For the Financial Year Ended 31 December 2024

Not Covered by the Report of the Auditors

SUPPLEMENTARY INFORMATION RELATING TO THE FINANCIAL STATEMENTS
OPERATING STATEMENT for the financial year ended 31 December 2024

	Schedule	2024	2023
		€	€
Income			
Donations and membership		42,277	36,230
Grant 1 from charitable activities		788,151	674,274
Fundraising income		15,090	14,457
Income from charitable activities 2		15,271	1,233
Income from charitable activities 3		5,372	–
		866,161	726,194
Charitable activities and other expenses	1	(855,444)	(708,182)
Net surplus		10,717	18,012

SUPPLEMENTARY INFORMATION RELATING TO THE FINANCIAL STATEMENTS SCHEDULE 1 : CHARITABLE ACTIVITIES AND OTHER EXPENSES
for the financial year ended 31 December 2024

	2024	2023
	€	€
Expenses		
Wages and salaries	574,467	480,945
Social security costs	56,289	48,848
Staff defined contribution pension costs	20,695	17,068
Staff training	2,649	2,694
Workshops, seminars and study tours	9,241	1,856
Sundry advocacy expenses	74,787	45,412
Research costs	5,700	–
Communication supports	6,256	3,389
Rent, rates and utilities	28,508	29,368
Fundraising events	1,491	991
Insurance	3,194	3,525
Computer bureau costs	2,214	2,214
Office equipment	13,086	19,462
Printing, postage and stationery	2,593	2,083
Publications and materials	15,448	13,478
ICT (Telephone)	2,749	5,921
Travel and subsistence	2,193	–
Legal and professional	3,202	1,989
Consultancy fees	5,446	6,723

	2024	2023
	€	€
Accountancy and payroll	12,159	10,265
Internal audit costs/ Governance	3,375	2,993
Auditor's/Independent Examiner's remuneration	3,690	1,730
Bank charges	104	142
Bad debts	–	1,629
Staff welfare	492	407
General expenses	(1)	1
Sundry staff expenses	–	292
Subscriptions	5,417	4,757
	855,444	708,182

Mental Health Reform
Financial Statements 31st December 2024

Task	Staff	Status	Completed	Narration
Books Requested		Not Started		
Books Received		Not Started		
Draft TB		Not Started		
Partner Review		Not Started		
Adjustments		Not Started		
Adjusted Profit Comp		Not Started		
Final Adjustment		Not Started		
Ready for Signing		Not Started		
Accounts Filed		Not Started		
Closedown		Not Started		

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