

**Annual Report  
And  
Financial Statements  
For the year ended 30 November 2025**



**Current Management Committee.**

Mark Jamieson (Trustee/Chair)	Re-appointed 11 <sup>th</sup> June 2025 at AGM
Abid Haq (Trustee/Secretary)	Re-appointed 11 <sup>th</sup> June 2025 at AGM
Amadou Soura (Trustee/Treasurer)	Re-appointed 11 <sup>th</sup> June 2025 at AGM
Dawn Peakman (Trustee)	Re-appointed 11 <sup>th</sup> June 2025 at AGM
Deepak Gill (Trustee)	Re-appointed 11 <sup>th</sup> June 2025 at AGM
Tasneem Akhtar (Trustee)	Re-appointed 11 <sup>th</sup> June 2025 at AGM

**Secretary**

Abid Haq

**Registered Office**

16 Oakridge Crescent  
Paisley  
PA3 1RS

**Registered Charity Number**

SC043604

**Bankers**

Clydesdale Bank PLC

**Independent Examiner**

Scott Johnston Accountant  
48 Caledonia Street  
Paisley

**The management committee presents their report and financial statement of the charity for the period ended November 2025.**

**Objects, principal activities and organisation.**

**Constitution**

The charity was constituted on 28<sup>th</sup> November 2012, charity number SC043604 and is a Scottish Charitable Incorporated Organisation (SCIO) with the election of a Board of Trustees/Members.

The Trustees of the management committee may be drawn from the membership, as defined in the Constitution.

**Recruitment and Appointment of Trustees**

All of the charity trustees are appointed or reappointed by the members at our annual general meeting which is held in June. MCASS has a diverse board, four out of six Trustees are BME with a range of skills, expertise and lived experiences that enables the charity to deliver the charity's aims and objectives outlined in our constitution.

**Remuneration of Charity Trustees**

Our Trustees/members will be paid out of pocket expenses whilst on organisation business, unless they are employed by the organisation in which case, they will be paid under an employment contract. The charity trustees did not receive any remuneration or expenses during the year.

**Trustees who served during the year**

Mark Jamieson  
Abid Haq  
Amadou Soura  
Dawn Peakman  
Deepak Gill  
Tasneem Akhtar

## **Risk Management**

The management committee assess the major risks to which the charity is exposed on a regular basis and have established procedures to mitigate those risks that are identified as a result of these reviews.

## **Reserves Policy**

The management team is aware and continues to recognise that there is a need to follow the guidelines of our reserves policy.

Since all Funding this year has been Restricted Funding, we have under 3 months operational costs reserved of £15,523.48. The Trustees will encourage and support the team to jointly develop and implement programmes and activities that will help build reserves.

## **Organisation Aim's & Objectives**

Minority Communities Addiction Support Services (MCASS) SCIO delivers Community Outreach Support services to families affected by Drugs and Alcohol Misuse. Community Training and Workshops, Events and Activities, Stronger Together Groups, Emergency packages to relieve the impact of the cost -of living crisis to people from the Black Minority Ethnic (BME) Communities in the Greater Glasgow area.

The charity is established to pursue the following objectives

- To advance health by establishing a community-based counselling, advice and support centre offering a dedicated, professional accessible support and guidance to those with addictions or their families, primarily aimed at minority communities;
- To provide a social support service for the relief of those in need to assist with recovery from addiction;
- To advance education by raising awareness of alcohol, drugs and gambling issues and educate about addiction and related issues and providing support to existing services through training and adopting strategies for recognising and screening for addiction issues;
- To promote equality and diversity by supporting and aiming to eradicate cultural barriers through the delivery of these services.

## Annual Report

### Chairperson's report

As an organisation MCASSs delivers needs-based support to people in the Black Minority Ethnic Communities in the Greater Glasgow areas. We deliver our projects on a Grassroots level in the heart of these communities. Helping and supporting those affected.

MCASS projects and activities have continued to develop in response to our monitoring and evaluation. We have identified that people are struggling with multiple challenges, we are able to navigate potential barriers and encourage engagement to allow us to continue delivering our projects.

Our partnerships with Glasgow City Health and Social Care Partnerships (HSCP) Alcohol and Drugs Partnerships (ADP) Glasgow Council on Alcohol, Elevate Glasgow, Community Addiction Teams (CAT) NHS Health Improvement teams, Scottish Drugs Forum, Families Outside, Scottish Families Affected by Alcohol and Drugs and with Community Recovery Networks for our addiction support services. Women's Health Network, Equality and Human Rights Team. Greater Pollok Community Hub, South West Arts and Music Project (SWAMP) We have made use of local community hubs and venues regularly throughout the year.

I would like to thank all our management team, staff and volunteers who have worked incessantly throughout the year for their diligence, commitment and dedication in the most challenging of times. They have been imperative in the development, design and delivery of our projects and have been instrumental in the day-to-day running of the charity and have worked hard to ensure MCASS services and activities have been delivered.

Year 2023-2024 MCASS supported 631 people  
Year 2024-2025 MCASS supported 669 people

We are extremely grateful and thankful to all our funders, listed in the Receipts and Payments Account and all our Partners who have supported MCASS to deliver our projects and activities to the BME communities with confidence and helping make a positive impact to people's lives.



Mark Jamieson (Chair of Trustees)

21<sup>st</sup> January 2026

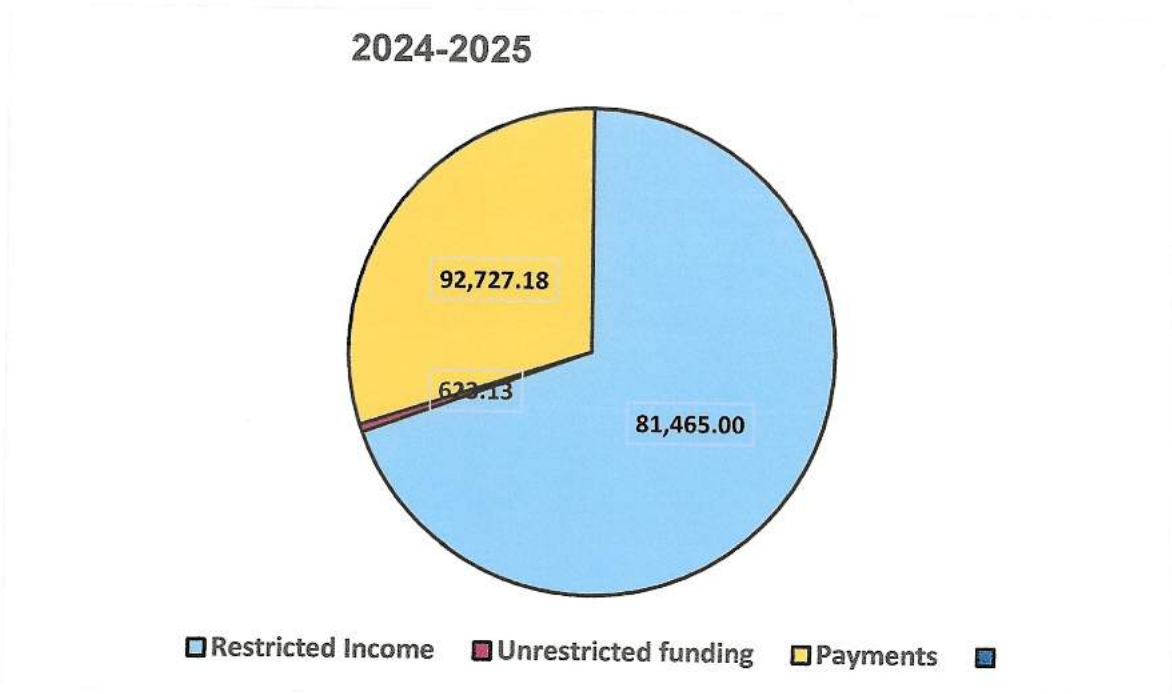
### Treasurer's Report

We brought forward £477,180.17 from the financial year ending 30/11/2024.

During the year 01/12/2024 to 30/11/2025, the charity raised £81,465.00 from funding and £623.13 in other income, making a total of £82,088.13

We spent £92,727.18 Our Receipts and Payments Account, on Page 20 of this report, provides a detailed breakdown of our spending under each category. There is a small deficit, however we had money in the bank that we were able to use.

As in previous years, we sought competitive prices for all of our expenditure. MCASS continues to apply for funding on a regular basis to help us deliver our projects.



Amadou Soura (Treasurer)

23<sup>rd</sup> January 2026

## **Report to the Trustees**

MCASS delivered needs-based projects to support people from the Black & Minority Ethnic (BME) communities in the Greater Glasgow areas. We support people who have been impacted by Drug and Alcohol Misuse, Mental health, Physical Health, Isolation and Loneliness and poor Health and Well-being. Additional daily challenges this year included more people struggling with Food Poverty and the Cost-of-Living Crisis.

Our projects work by providing a bridge between existing services. 95% of the people we supported were from the Pakistani and Indian population and 5% from mixed ethnic groups African, mixed Arab and Middle Eastern population. Our support allows people to have equal access to help, support and treatment services without any cultural, language barriers and help them and communities to achieve longer lasting positive legacies and outcomes.

### **We encourage engagement by being:**

- Accessible to people from all Protected characteristics
- Culturally sensitive, no language barriers
- Gender sensitive e.g. women only events and activities
- Non-judgment all Inclusive to all
- Confidential
- Person centred

### **Achievements and performance Our Projects**

Family Life Matter Project

Stronger Together Groups

Rapid Response Project

### **The key activities we delivered:**

- Outreach services – Prevention, Harm Reduction, and Recovery Support. One-one sessions, family mediation, family reviews.
- Working in partnership with statutory organisations for ongoing referral routes and signposting.
- Training and workshops to enhancing the skills, capabilities and knowledge and up-skill staff, volunteers and service users
- Peer support Groups, Gender appropriate to bring women together to share experiences and create a safe place to support each other better.
- Volunteer led community engagement activities to learn, build skills and promote inclusion.
- Cost of Living response - emergency food & essential packages, food and produce delivered suitable to BME people in need.

## **MCASS Projects**

### **Family Life Matters Project**

Family Life Matters project supports Black Minority Ethnic individuals and families whose lives have been impacted by Drug and Alcohol misuse in the Greater Glasgow areas. Our key activities focused on assessment, management, Information, help and support, harm reduction and maintaining recovery.

#### **We offered:**

- One-One support sessions help and support people to work through their issues and be better equipped and prepared for prevention, reduction and their recovery journey and treatment with signposting and referrals.
- Family support and mediation works with family members, supporting them to understand addiction and addiction related behaviours, strengthening their resilience, empowering them to be able to cope better and support each other better. Referrals and signposting them for any additional support they may need.
- We have a large range of partners and networks we can access and work with because of the different needs of people and the areas they live. We worked in partnerships with Glasgow City Health and Social Care Partnerships (HSCP) Alcohol and Drugs Partnerships (ADP) Glasgow Council on Alcohol, Elevate Glasgow, Community Addiction Teams (CAT) NHS Health Improvement teams, Scottish Drugs Forum, Families Outside, Scottish Families Affected by Alcohol and Drugs and with other Community Recovery Networks for our addiction support services. for referrals, signposting and sharing information and resources.

#### **Outcomes Achieved**

- Families have better understanding of addiction and have tools to cope.
- All service users have better access to holistic support
- All service users are more confident, feel safer, less isolated
- People are better informed how to seek help & support
- People have better psychological well-being

Number of people supported in Family Life Matters Project

2023-2024 number of People supported 228

2023-2024 number of People supported 232

**Feedback from service users on the difference our project has made.**

Feedback from people who use drugs and family members we supported speaking about the impact MCASS has made to their lives.

*"I have found MCASS very easy to engage with and to talk to, there was no judgments and I felt comfortable opening up. I had been consumed in carrying so much guilt and with Nas I was able to work through it and let it go and start seeing and doing things better. (male 50's in early recovery)*

*"I lost everything and I still did not stop using, taking drugs recreationally at first became a huge problem, was the worst thing I did. My family did not understand and all we did was shout at each other and fight. I contacted MCASS for help and they did. I was able to speak openly and did not feel judged, I was respected and I mattered, I was able to ask questions and learn what recovery means. I learned how to have faith in myself. I am not using now and in recovery, I take each day at a time, it's not been easy but it is easier with MCASS and I have learned that my family are not my enemy and we are having some good times together." (male, 30's, in early recovery)*

*"For years I thought I was cool and having fun, I did not want to stop. I loved the whole drugs scene and thought I was enjoying that lifestyle. As my drug friends started to leave this, I could not and I carried on. What my family said did not matter, I did what I wanted to do and did not think of the consequences. Things got really bad for me. I have taken the step to contact MCASS and found them easy to talk to and they understood me. The support is benefitting me and I am beginning to make small changes (Male 30s Individual in early recovery)*

*"I have finally left my husband who had been using drugs since we got married, I had three children with him and I was carrying him too, I was tired, scared, living in fear and scared what my children were enduring. All family members were against my choice to leave him; they said I need to have patience and what will this act do to our family honour. I was adamant to make my own choice and with the support from MCASS I have been able to navigate this and start living a life for me and my kids. (Female family member 30s)*

## Case Studies x 3

### 1<sup>st</sup> Case Study

Person misusing, Male, Early 30s.

Presenting issues;

Misusing Alcohol, amphetamines, LSD, cocaine, ecstasy, opiates and opioids, a mixture of benzodiazepines misuse, a mixture of hallucinogenic and synthetic cannabinoids misuse, alcohol.

Using drugs and alcohol for many years, unemployed, had temporary jobs in past frequently making wrong choices, waking up in unfamiliar places even in peoples back gardens or outdoors. Little self-care, low mental health and physical health poor. Overdosed twice and hospitalised due to being unresponsive. Family breakdown, totally isolated from them.

He was referred to the community addiction team for additional help, making slow progress mental health improving, physical health better and starting to look after himself a little better.

Aims and goals set and working towards them at his own pace, one of which will be to reconnect with his family in the next few months.

### 2<sup>nd</sup> Case Study

Person misusing, Female, 20s.

Presenting issues;

Misusing cocaine, opiates and opioids, a mixture of benzodiazepines misuse. Unsafe prescription medication misuse.

Unemployed, Lonely, isolated, poor mental health and self-care, struggling to stay clean. Family breakdown led to being homeless.

With our support and a referral to local CAT team but struggled to engage and city homeless team, she is taking small steps each day and hoping to move into her own flat soon. She has reduced her drug intake and hoping to be clean but finds it difficult on days.

There is an improvement in her mental healthy and has more better days now. Her drinking and drug taking has significantly reduced. She has started speaking with her sister.

### 3<sup>rd</sup> Case Study

Person misusing, Male, Late 50s.

Presenting issues;

Misusing Alcohol, takes a mixture of prescription drugs and marijuana.

unemployed, living in poverty within family home. Stays in his own space totally isolated from family. They will feed him and do his washing but he does not come out into family communal areas.

We supported the family too, we supported him to visit his GP and start the assessment process, he did not want a referral to a CAT team.

We have supported him towards reduction with alcohol and drugs, making small positive changes each day.

He now takes his medication regularly with the GPs supervision, he cleans his own living space, is eating better and feels less isolated. He has started going for short walks and beginning to re-connect with his family.

## **Rapid Response Project**

The Rapid Response Project was developed in direct response to the escalating Cost-of-Living Crisis and its disproportionate impact on Black, Asian and Minority Ethnic (BME) families and individuals. Many of the people we support are experiencing food poverty, financial insecurity, poor health, and social isolation, often alongside additional barriers such as language difficulties, discrimination, and limited access to statutory support.

This is a volunteer-led initiative, delivered with the support of donations and in-kind contributions from local partners, community organisations, and supporters. The project provides timely, practical assistance to families and individuals who are struggling to meet their basic needs. Support is offered through emergency food and essential supply packages that are tailored to meet dietary, religious, and cultural requirements, ensuring that assistance is both dignified and appropriate.

By responding quickly to urgent need, the project helps prevent crises from escalating, reducing stress, anxiety, and the immediate impacts of poverty. In addition to practical support, volunteers and staff build trusted relationships with individuals, offering reassurance, peer support, and signposting to additional services where appropriate. This strengthens community resilience and ensures people feel supported rather than isolated during periods of hardship.

The project has demonstrated sustained impact:

### **Number of people supported in Rapid Response Project**

- 2023–2024: 360 people supported
- 2024–2025: 387 people supported

### **Outcomes and Difference Made**

Through the Rapid Response Project:

- People experience improved health and wellbeing, with reduced stress and anxiety linked to food insecurity.
- People experience reduced poverty-related hardship through access to essential food and supplies.
- People and communities are better able to support one another, strengthening social connections and collective resilience.

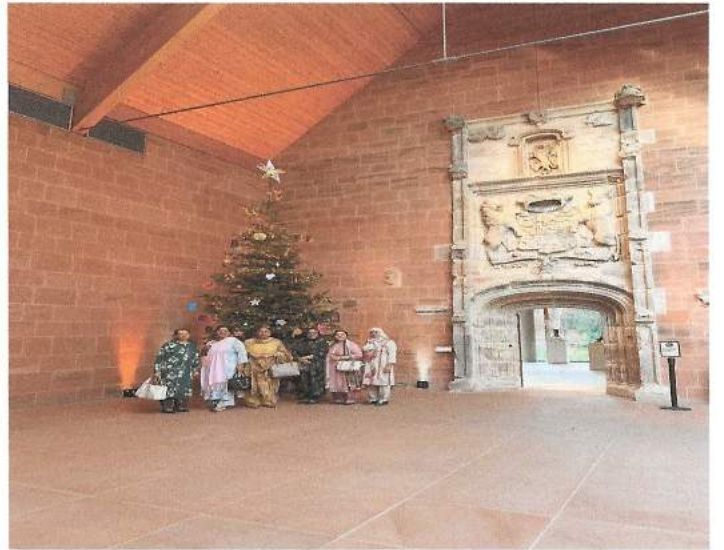
The Rapid Response Project demonstrates the effectiveness of community-led, culturally responsive action in addressing urgent need while contributing to longer-term wellbeing and reduced inequalities.

# STRONGER TOGETHER GROUPS

We deliver two peer-led support groups for Black, Asian and Minority Ethnic women in the Greater Glasgow area: one online and one face-to-face. These groups provide a vital lifeline for vulnerable older women experiencing isolation, poor mental and physical health, trauma, and the impacts of drug and alcohol misuse. Many participants are also affected by poverty, food insecurity, and the cost-of-living crisis, which compounds existing health inequalities. Sessions are delivered by bi-lingual workers, reducing language barriers and enabling inclusive, culturally sensitive engagement. This peer-led approach supports improved wellbeing, reduced isolation, and stronger access to support networks.

- [Paratha In the Park Project](#)
- [Kush Project](#)

## PARATHA IN THE PARK



The project is structured to provide regular, purposeful engagement that strengthens social connection, participation, and personal development among women who face barriers to inclusion. Weekly sessions create a consistent, trusted space where women can engage meaningfully, build relationships, and contribute to a shared programme of activity

Women are actively involved in shaping the project through participatory planning, shared decision-making, and peer leadership. This approach increases confidence, develops transferable skills, and supports progression into leadership and mentoring roles. Support is delivered through a combination of peer support and targeted one-to-one engagement, ensuring that individual needs are recognised and addressed without stigma.

The programme prioritises inclusion, accessibility, and empowerment, enabling women to increase their confidence, self-advocacy, and sense of belonging. By embedding opportunities for collaboration and knowledge-sharing, the project strengthens collective capacity and supports women to work together more effectively.

### **PARATHA IN THE PARK – ACTIVITY**



### **PLANT POT PAINTING – OUTSIDE MY WINDOW**

The painting of plant pots was used as a purposeful, creative activity to support positive mental health outcomes and strengthen the skills developed through the workshops. Engaging in a hands-on, creative process provided women with a calm and focused environment that helped reduce stress and anxiety, offering a therapeutic break from daily pressures. The activity encouraged mindfulness, allowing participants to concentrate on colour, texture, and design, which supported emotional regulation and improved mood. Working at their own pace within a supportive group setting increased confidence and self-esteem, particularly for women who may not usually view themselves as “creative.” Sharing ideas, offering encouragement, and celebrating finished pieces strengthened social connection and peer support, reinforcing a sense of belonging and achievement. The act of caring for a plant after the session also promoted a sense of responsibility, routine, and hope, contributing to longer-term emotional wellbeing.



### **MUGDOCK COUNTRY PARK AND MILNGAVIE RESERVOIR**

The visit to Mugdock Country Park and the Milngavie Reservoir was designed to address health inequalities, reducing barriers to physical activity, access to green space, and social participation. These women often are from low-income backgrounds limiting their access to safe outdoor environments, contributing to poorer physical and mental health outcomes. The visit provided an accessible, culturally safe opportunity to engage in gentle physical activity within a natural setting, helping to build confidence, reduce anxiety, improve overall wellbeing. By removing practical and psychological barriers and introducing women to new experiences to enjoy the activity increased awareness of free, local resources supported their long-term health and wellbeing, strengthening social connection, reduced isolation, and promoted positive health behaviours, contributing to a reduction in health inequalities and reducing their isolation.



### **THE SCOTTISH PORTRAIT GALLERY AND THE PALESTINE MUSEUM - EDINBURGH**

The visit to the Scottish National Portrait Gallery and the Palestine Museum was designed to address cultural exclusion and health inequalities by increasing access to cultural spaces that are often underused by women from minority ethnic and low-income backgrounds. Participating in facilitated visits supported women to engage with art, history, and representation in ways that affirmed identity, encouraged reflection, and promoted emotional wellbeing. Exposure to stories of resilience, identity, and heritage supported positive mental health outcomes, including increased confidence, reduced feelings of marginalisation, and a stronger sense of belonging. The shared experience encouraged discussion, peer connection, and critical engagement, strengthening social bonds and collective understanding. Measurable outcomes included: increased confidence in accessing cultural venues independently; improved self-reported wellbeing and mood following the visits; strengthened social connections as evidenced by continued peer engagement; and increased participation in cultural activity beyond the project. These outcomes demonstrate how inclusive cultural engagement can reduce inequalities by supporting mental wellbeing, social inclusion, and long-term participation in community and cultural life.

### **KUSH PROJECT**

We deliver a peer-led online support group for Black, Asian and Minority Ethnic women in the Greater Glasgow area, facilitated through WhatsApp. The platform provides a flexible and accessible way for women who are unable to engage face-to-face due to health conditions, mobility issues, caring responsibilities, or isolation to remain connected and supported.

The group offers a vital lifeline for vulnerable older women experiencing poor mental and physical health, trauma, isolation, and the impacts of poverty, food insecurity, and the cost-of-living crisis. Sessions are facilitated by bi-lingual workers, reducing language barriers and ensuring culturally sensitive engagement. This peer-led approach supports improved wellbeing, reduced isolation, and increased access to support networks.

## OBJECTIVES AND OUTCOMES

- 2024-2025: 50 women supported.
- 50 women reported having better mental health.
- 50 women reported having better physical health.
- 50 women reported feeling less isolated.
- 50 women reported they felt supported.

## QUOTES

*“My week has some structure again. I feel I have a reason to take care of myself.”*

*“My family is so happy I have something for myself.”*

*“I get really excited by how much I manage to do each week. I didn’t think I had the ability to follow instructions.”*

## CASE STUDY

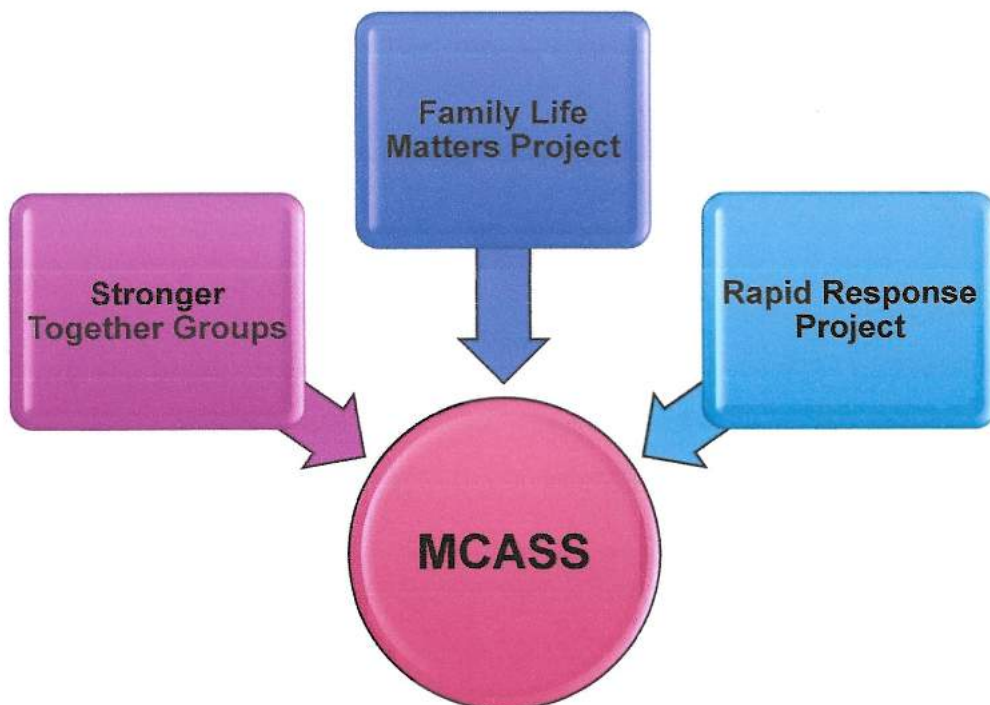
Lady B is an older woman and widow who joined the Paratha in the Park peer support group while experiencing significant isolation, poor physical health, and declining mental wellbeing. At the time of joining, she had limited contact with her family and felt unable to rely on them for emotional or practical support. Her isolation and low confidence had a direct impact on her health decisions, including repeatedly postponing essential medical treatment due to fears about coping alone and not having care in place.

Through regular engagement with the peer support group, Lady B accessed a safe, non-judgemental space where she was able to share her experiences, reflect on her situation, and receive encouragement from women with similar lived experiences. With the support of the group and facilitators, she was supported to rebuild confidence, explore her feelings around family relationships, and take steps towards re-establishing positive communication with her relatives.

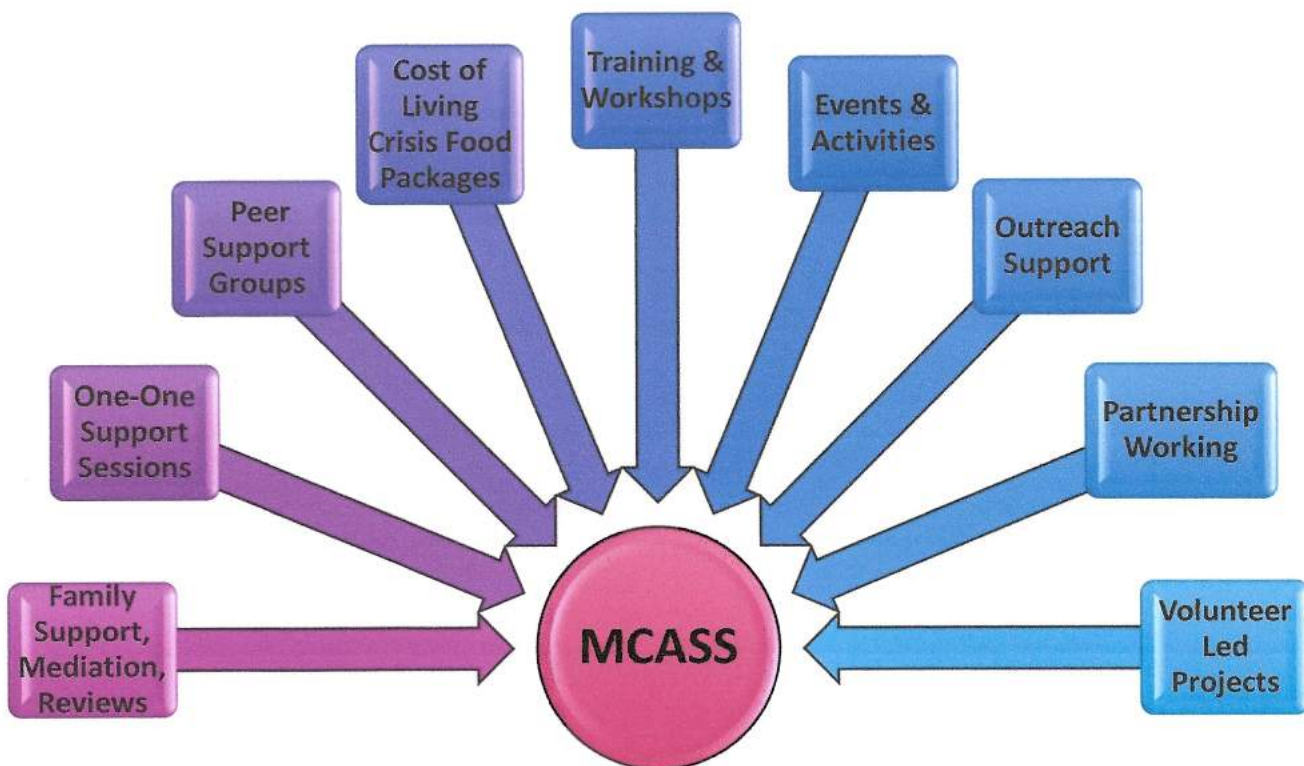
As a result of this ongoing peer and emotional support, Lady B successfully reconnected with her family, made amends, and developed more positive and supportive relationships. This strengthened family network reduced her sense of isolation and improved her emotional wellbeing. Crucially, having renewed family support in place enabled Lady B to feel confident and reassured about her care needs, leading her to make the decision to proceed with long-delayed medical treatment.

This case study demonstrates the vital role that peer-led, culturally sensitive support plays in addressing isolation, improving mental wellbeing, and enabling positive health outcomes for older women experiencing multiple disadvantages.

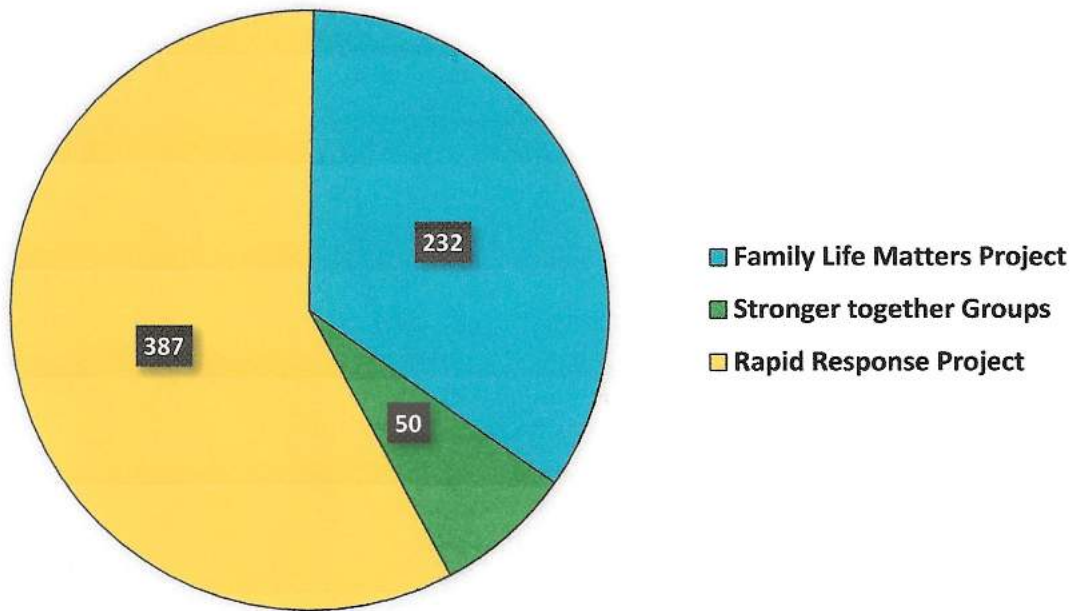
## Our Projects



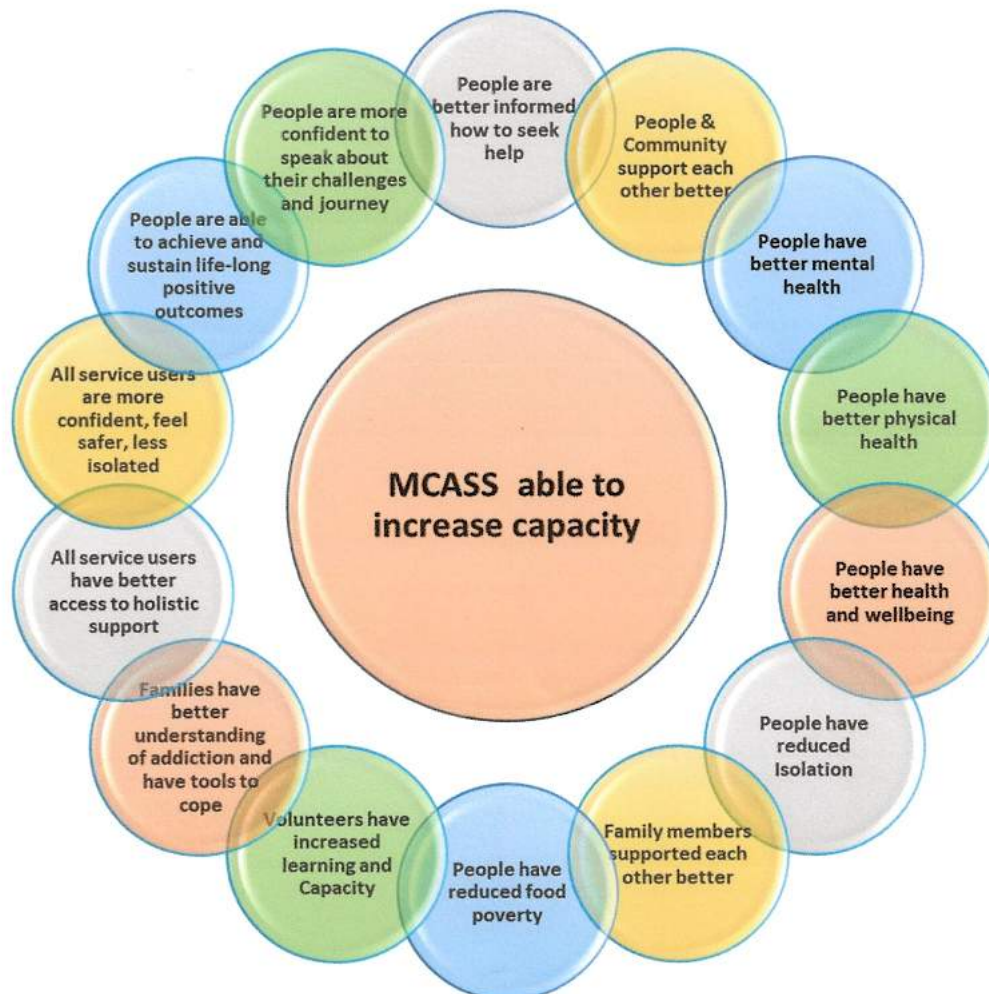
## What we Did



**Quantitative Data How many people each project has supported**



**Overall Outcomes & Difference We made to people's lives**



### **Service Development**

MCASS develops in response to our monitoring and evaluations of the BME community by gathering information. Their input helps us to plan a more formal framework and design our work with informed input. Partnership working with multi-agencies is essential and makes a huge positive impact to help achieve best outcomes and is beneficial, valuable and a supportive resource, information, training and share best practice sustaining positive delivery of services.

### **Monitoring and evaluating**

Session notes. Participation, attendance and engagement. Questionnaires. Focus groups. Reviews. Case studies. Staff notes. Worker's diary and observations and reports produced in addition to the internal systems and processes outlined above, Regular reporting to all funders in line with responsibilities and expectations, ensures accountability for service delivery operationally, strategically and externally.

### **Staff**

Our management committee and delivery team are diverse group with a combination of skills and lived experiences. Including backgrounds in finance, legal and Law, IT technology and digital, mental health and medical professionals, also working within communities. We have one full time workers and three part-time paid members of staff and a team of sixteen volunteers.

### **Volunteers**

We recruit and train volunteers to increase their capacity and skills. They are imperative in the development, design and delivery of our project.

### **Training**

We have ongoing in-house and external training to strengthen their skills and knowledge, for better understanding of their roles and responsibilities and enhance service development.

### **Future**

MCASS aims to build on our development and maintaining standards to ensure service delivery of our projects. Be able to secure longer-term funding. Build and sustain our partnerships. Reduce organisations carbon footprint by working differently. Look at more holistic approaches for people with addiction, mental health, health and wellbeing, food poverty and cost of living crisis that can have a positive impact on their lives. Building on our achievements and on the work, we have accomplished this year and look at more intuitive models for sustainability.

### **Appreciations**

MCASS would like to Thank all of our Funders and Partners. The generosity and support you have all shown has been more than financial. New working models the processes from application, award and reporting are easier. Open communication and ongoing discussions have been a great tool. Allowing to discuss any movement and changes to the projects and made our work easier and helped you to understand our projects better which allowed us to steer our work to targeted needs to people in the heart of the BME communities quickly and efficiently. All this work, delivery models and all these positive impacts and outcomes would not have been achieved without your contribution, help and support.

**Minority Communities Addiction Support Services (MCASS) SCIO**  
**Scottish Charity No. SC043604**

**Receipts and Payments Account for year ended 30 Nov 2025**

	2024-2025	2024-2025	2024-2025	2023-2024
<b>RECEIPTS</b>	<b>Unrestricted</b>	<b>Restricted</b>	<b>Total</b>	<b>Total</b>
<b>Grants</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
National Lottery Community Fund		45,965.00	45,965.00	43,815.00
Corra Foundation Local Support Fund				52,500.00
Lankelly Chase Fund				53,000.00
Corra Foundation Racial Justice Fund		20,000.00	20,000.00	
Tudor Trust				25,740.00
Arnold Clarke				2,500.00
Foundation Scotland Baille Gifford Fund		5,000.00	5,000.00	5,000.00
The Merchants House of Glasgow				10,000.00
Glasgow Council of Alcohol		10,500.00	10,500.00	
<b>Other Receipts</b>				
Sadqah & Fundraising, Donations	512.00		512.00	1,356.00
Transfers from other Funders	6.23		6.23	40.61
Virgin Money Cashback	1.92		1.92	.08
Reimbursement	38.15		38.15	
Refund BT	64.83		64.83	
<b>Total Receipts</b>	<b><u>623.13</u></b>	<b><u>81,465.00</u></b>	<b><u>82,088.13</u></b>	<b><u>193,951.69</u></b>

**Minority Communities Addiction Support Services (MCASS) SCIO  
Scottish Charity No. SC043604**

<b>PAYMENTS Category</b>	<b>2024-2025</b>	<b>2024-2025</b>	<b>2024-2025</b>	<b>2023-2024</b>
	<b>Unrestricted</b>	<b>Restricted</b>	<b>Total</b>	<b>Total</b>
	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
Salaries/HMRC/NIC		65,317.58	65,317.58	62,830.68
Travel		2,381.26	2,381.26	2,155.65
Volunteer /Training Exp	15.00	2190.12	2,190.12	3,123.51
Activities		4,849.41	4,849.41	3,610.76
IT/Office Equipment & Supplies		2,156.87	2,156.87	1,479.98
Utilities		2,394.73	2,394.73	2,042.99
Pension		2,769.60	2,769.60	2,784.82
Gov/ Insur/ Accountant		2,502.26	2,502.26	2,909.52
Independent Examination		250.00	250.00	250.00
Essential Supplies		403.35	403.35	965.97
Room Hire		150.00	150.00	
Corra Foundation LSF Cost of Living		7,347.00	7,347.00	
<b>Total Payments</b>	<b><u>15.00</u></b>	<b><u>92,712.18</u></b>	<b><u>92,727.18</u></b>	<b><u>83,005.63</u></b>

	<b>2024-2025</b>	<b>2023-2023</b>
	<b>£</b>	<b>£</b>
<b>Net Receipts/Payments</b>	<b>-10,645.28</b>	<b>110,946.06</b>
<b>Bank &amp; Cash at start of Period</b>		
Bank	477,122.54	366,171.81
Cash	57.63	65.98
<b>Total at start of Period</b>	<b><u>477,180.17</u></b>	<b><u>366,237.79</u></b>
<b>Bank &amp; Cash at end of Period</b>		
Bank	466,445.41	477,122.54
Cash	89.48	57.63
<b>Total at end of Period</b>	<b><u>466,534.89</u></b>	<b><u>477,180.17</u></b>

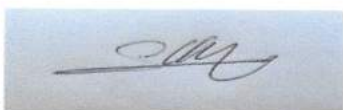
**Notes to the Accounts for the year ended 30 November 2025**

Receipts and Payments Accounts:

Our accounts for the represented financial year run from 01 December 2024 to 30 November 2025

These financial statements are accepted on behalf of the organisation by:

Signed:



Date: 23rd January 2026

Amadou Soura (Treasurer)

# Minority Communities Addiction Support Services (MCASS) SCIO

## Scottish Charity No. SC043604

Enter charity name below

Enter SC No

Minority Communities Addiction Support Services (MCASS) SCIO

SC043604



Receipts and payments accounts							
For the period from	Period start date			to	Period end date		
	Day	Month	Year		Day	Month	Year
	01	December	2024		30	November	2025

### Section A Statement of receipts and payments

	Unrestricted funds	Restricted funds	Expendable endowment funds	Permanent endowment funds	Total funds current period	Total funds last period
	to nearest £	to nearest £	to nearest £	to nearest £	to nearest £	to nearest £
<b>A1 Receipts</b>						
Donations					-	
Legacies					-	
Grants		81,465			81,465	192,555
Receipts from fundraising activities	512				512	1,356
Gross trading receipts					-	
Income from investments other than land and buildings					-	
Rents from land & buildings					-	
Gross receipts from other charitable activities	111				111	41
					-	
<b>A1 Sub total</b>	<b>623</b>	<b>81,465</b>	<b>-</b>	<b>-</b>	<b>82,088</b>	<b>193,952</b>
<b>A2 Receipts from asset &amp; investment sales</b>						
Proceeds from sale of fixed assets					-	
Proceeds from sale of investments					-	
<b>A2 Sub total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total receipts</b>	<b>623</b>	<b>81,465</b>	<b>-</b>	<b>-</b>	<b>82,088</b>	<b>193,952</b>
<b>A3 Payments</b>						
Expenses for fundraising activities					-	
Gross trading payments					-	
Investment management costs					-	
Payments relating directly to charitable activities	15	89,960			89,975	79,846
Grants and donations					-	
Governance costs:		2,502			2,502	2,910
Audit / independent examination		250			250	250
Preparation of annual accounts					-	
Legal costs					-	
Other					-	
					-	
<b>A3 Sub total</b>	<b>15</b>	<b>92,712</b>	<b>-</b>	<b>-</b>	<b>92,727</b>	<b>83,006</b>
<b>A4 Payments relating to asset and investment movements</b>						
Purchases of fixed assets					-	
Purchase of investments					-	
<b>A4 Sub total</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total payments</b>	<b>15</b>	<b>92,712</b>	<b>-</b>	<b>-</b>	<b>92,727</b>	<b>83,006</b>
<b>Net receipts / (payments)</b>	<b>608</b>	<b>(11,247)</b>	<b>-</b>	<b>-</b>	<b>(10,639)</b>	<b>110,946</b>
<b>A5 Transfers to / (from) funds</b>						
					-	
<b>Surplus / (deficit) for year</b>	<b>608</b>	<b>(11,247)</b>	<b>-</b>	<b>-</b>	<b>(10,639)</b>	<b>110,946</b>

# Minority Communities Addiction Support Services (MCASS) SCIO Scottish Charity No. SC043604

## Minority Communities Addiction Support Services (MCASS) SCIO SC043604

### Section B Statement of balances

Categories	Details	Unrestricted funds to nearest £	Restricted funds to nearest £	Expendable endowment funds to nearest £	Permanent endowment funds to nearest £	Total current period to nearest £	Total last period to nearest £
<b>B1 Cash funds</b>	Cash and bank balances at start of year	14,915	462,265			477,180	366,238
	Surplus / (deficit) shown on receipts and payments account	608	(11,253)			(10,645)	110,942
						-	
	Cash and bank balances at end of year (Agree balances with receipts and payments account(s))	15,523	451,012	-	-	466,535	477,180


B2 Investments	Details	Fund to which asset belongs	Market valuation to nearest £	Last year to nearest £
		Total	-	-

B3 Other assets	Details	Fund to which asset belongs	Cost (if available) to nearest £	Current value (if available) to nearest £	Last year to nearest £
		Total	-	-	-

B4 Liabilities	Details	Fund to which liability relates	Amount due to nearest £	Last year to nearest £
		Total	-	-

B5 Contingent liabilities	Details	Fund to which liability relates	Amount due (estimate) to nearest £	Last year to nearest £
		Total	-	-

Signed by one or two trustees on behalf of all the trustees

Signature	Print Name	Date of approval
	Amadou Soura	23.01.2026

# Minority Communities Addiction Support Services (MCASS) SCIO

## Scottish Charity No. SC043604

Minority Communities Addiction Support Services (MCASS) SCIO

SC043604

### Section C Notes to the Accounts

**C1 Nature and purpose of funds** (may be stated on analysis of funds worksheets)

Funding was used directly for our Community projects: Family Life Matters. Stronger Together Groups, Paratha in the Park. Kush Project. Rapid Response Project. Funding was used to cover charity and project running costs.

	Type of activity or project supported	Individual / institution	Number of grants made	£
<b>C2 Grants</b>				
			<b>Total</b>	-

<b>C3a Trustee remuneration</b>	If no remuneration was paid during the period to any charity trustee or person connected to a trustee cross this box (otherwise complete section 3b)	
---------------------------------	--	--

	Authority under which paid	£
<b>C3b Trustee remuneration - details</b>		

<b>C4a Trustee expenses</b>	If no expenses were paid to any charity trustee during the period then cross this box (otherwise complete section 4b)	
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		Number of trustees	£
<b>C4b Trustee expenses - details</b>			

	Nature of relationship	Nature of transaction	Transaction amount (£)	Balance outstanding at period end (£)
<b>C5 Transactions with trustees and connected persons</b>				

**C6 Other information**

APPENDIX 3



Independent examiner's report on the accounts <span style="float: right;">v2</span>						
<b>Report to the trustees/members of</b>	Charity name MINORITY COMMUNITIES ADDICTION SUPPORT SERVICES					
<b>Registered charity number</b>	SC 043604					
<b>On the accounts of the charity for the period</b>	Period start date			Period end date		
	Day	Month	Year	Day	Month	Year
	01	12	2024 <sup>to</sup>	30	11	2025
<b>Set out on pages</b>						(remember to include the page numbers of additional sheets)

**Respective responsibilities of trustees and examiner**

The charity's trustees are responsible for the preparation of the accounts in accordance with the terms of the Charities and Trustee Investment (Scotland) 2005 Act and the Charities Accounts (Scotland) Regulations 2006 (as amended). The charity trustees consider that the audit requirement of Regulation 10(1) (d) of the Accounts Regulations does not apply. It is my responsibility to examine the accounts as required under section 44(1) (c) of the Act and to state whether particular matters have come to my attention.

**Basis of independent examiner's statement**

My examination is carried out in accordance with Regulation 11 of the 2006 Accounts Regulations. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts and seeks explanations from the trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit and, consequently, I do not express an audit opinion on the view given by the accounts.

**Independent examiner's statement**

In the course of my examination, no matter has come to my attention [other than that disclosed on the attached page\*]

1. which gives me reasonable cause to believe that in any material respect the requirements:
  - to keep accounting records in accordance with section 44(1) (a) of the 2005 Act and Regulation 4 of the 2006 Accounts Regulations, and
  - to prepare accounts which accord with the accounting records and comply with Regulation 9 of the 2006 Accounts Regulations

have not been met, or

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

Signed:  Date: 22/05/2026

Name: SCOTT JOHNSTON

**Relevant professional qualification(s) or body (if any):**

ACCA

**Address:**

48 CALEDONIA STREET  
PAISLEY  
PA3 2JN

\*Please delete the words in the brackets if they do not apply. If the words do apply, set out those matters which have come to your attention on the following page.