

DIABETES RESEARCH & WELLNESS FOUNDATION

England & Wales · Charity number 1070607

Details

Other names	DIABETES RESEARCH AND WELLNESS FOUNDATION, DRWF
Status	Registered
Legal form	Charitable company
Company number	03496304
Registered	1998-07-21
Register	View on the Charity Commission register

Contact

Address	Drwf Building 1000 Langstone Technology Park Havant Hampshire PO9 1SA
Phone	02392637808
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Website	www.drwf.org.uk

Activities

Objects: (I) TO ASSIST IN THE RELIEF OF PERSONS WITH DIABETES AND ANY SIMILAR OR RELATED DISEASES OR CONDITIONS;(II) TO RAISE PUBLIC AWARENESS ABOUT DIABETES AND ANY SIMILAR RELATED DISEASES OR CONDITIONS, THEIR INCIDENCE, CAUSES, TREATMENT, AVOIDANCE AND RELIEF.

Activities: Funds medical research via grants; Raises awareness to diabetes, its risks, symptoms, complications; Provides information and advice via multi media channels in support of those with Type 1 and Type 2 diabetes; Promotes screening, wellness and other health programmes to reduce incidence, allow early diagnosis and treatment of diabetes and similar or related conditions

Classification

- **How:** Makes Grants To Individuals, Makes Grants To Organisations, Provides Services, Provides Advocacy/advice/information, Sponsors Or Undertakes Research
- **What:** The Advancement Of Health Or Saving Of Lives, Other Charitable Purposes
- **Who:** Children/young People, Elderly/old People, People With Disabilities, Other Charities Or Voluntary Bodies, Other Defined Groups

Geography

- **Area of benefit:** UNITED KINGDOM
- Northern Ireland
- Scotland
- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2024-12-31	£1,534,027	£1,792,042	£2,056,411	12
2023-12-31	£1,658,853	£1,855,067	£2,314,426	12
2022-12-31	£1,765,756	£2,030,351	£2,510,640	13
2021-12-31	£1,686,061	£1,900,422	£2,775,235	12
2020-12-31	£1,672,385	£1,674,390	£2,989,596	11

Trustees

Name	Role	Appointed
Adrian Durelli		2024-03-14
Christian Gretschel		2022-08-16
JOHN ALAHOZOS JNR		1999-01-01
Steve Jones		2019-10-30

DIABETES RESEARCH & WELLNESS FOUNDATION

England & Wales - Charity number 1070607

Accounts

Diabetes Research and Wellness Foundation
(A Company Limited by Guarantee)

Charity Number: 1070607
Company Number: 03496304

Financial Statements
For the year ended
31-Dec-24

Diabetes Research and Wellness Foundation

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Diabetes Research & Wellness Foundation

Diabetes Research and Wellness Foundation (DRWF)
(A Company Limited by Guarantee)

REPORT & FINANCIAL STATEMENTS

For the year ended 31 December 2024

Registered Charity Number: 1070607

Company Number: 03496304



THANK YOU! To everyone who has donated, volunteered their time, or undertaken an activity to support us. Your contribution makes all the difference, meaning that we can carry out awareness, educational programmes and research funding activities to ensure that people with diabetes are *'Staying well until a cure is found...'*

THANK YOU! for being part of a powerful community who are intent on investing in a brighter future for all people with diabetes
#StrongerTogether #UnitedThroughDiabetes





Message from Co-Founder & Chairman John Alahouzos

I would like to dedicate this message to DRWF Co-Founder and Chairman, and my best friend, Walter Michael (Mike) Gretschel who passed away peacefully in early December 2024.

Mike was born and raised in the Washington DC area and had a long and successful career in advertising and marketing. We worked together at the same agency and eventually started our own agency. In 1978 shortly after his son, Christian, was diagnosed with type 1 diabetes, we devoted all our pro bono efforts to raising funds to find a cure for diabetes, as volunteers and board members of several diabetes charities.

In 1993, Mike's passion to fund and find a cure for diabetes inspired us to co-found the Diabetes Research & Wellness Foundation (DRWF) in Washington DC, with DRWF (UK) being set up just 5 years later in 1998. Mike's mission to fund diabetes research and support projects that had potential to fast-track to a cure, never wavered. He envisioned a future where people living with diabetes received the ongoing education and support needed to stay well and enjoy the best quality of life. Hence the DRWF strapline of **'Staying well until a cure is found...'**

This vision underpins all the DRWF Diabetes Wellness activities, such as our annual programme of Wellness Events, delivery of our quarterly newsletter *Diabetes Wellness News*, and the research we fund in the UK and around the world.

DRWF UK has raised more than £80 million since inception in 1998 and funded some of the most innovative and impactful research that the diabetes community has benefitted from in the last 25 years, such as the DRWF Islet Isolation Facility at the Churchill Hospital in Oxford, which is pivotal to delivering insulin producing cells for human transplant across the UK.

Under Mike's leadership, DRWF went on to open affiliates in France, Germany, Sweden, Finland, and Norway. All of whom provide diabetes awareness, information and support to their respective diabetes communities, whilst providing essential research funding for young and established scientists pursuing innovative research studies. Our motivation is the ever-increasing and staggering global diabetes statistics and the belief that we must make a difference across nations.

Mike was an adventurous world traveler and outdoor enthusiast and took great pride in hiking to the bottom of the Grand Canyon (and back to the top) six times. He was also an enthusiastic fisherman. He is survived by his beloved wife of 54 years, four children, and 14 grandchildren, who lovingly refer to him as "Big Mike".

DRWF was incredibly lucky to have had such a passionate and committed professional steering the charity's vision, mission and values. Mike's energy was felt throughout DRWF with a strong relationship with the charity's Chief Executive and the wider team which was often fondly likened to that of a 'family'.

Mike's passing is a big loss, but our commitment to the diabetes community remains unwavering. We will continue to forge ahead with Mike's vision and dream of a cure, to imagine a day without diabetes.

Our work, together, stays focused on keeping people with diabetes well until a cure is found and your support makes all the difference.

Thank you!

John Alahouzos

March 2025

Report of the trustees for the year ended 31st December 2024

The trustees are pleased to present their report and message from the Chairman together with audited financial statements for the year ended 31st December 2024.

The financial statements comply with the Charities Act 2011; the Companies Act 2006; the Memorandum and Articles of Association and are prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102 Charities SORP) (effective from 1st January 2015).

Our purpose, aims and activities

The objects of the charity are:

- To assist in the relief of persons with diabetes and any similar or related diseases or conditions
- To raise public awareness about diabetes and any similar or related diseases or conditions, their incidence, causes, treatment, avoidance, and relief

The focus of our work

Since our inception in 1998, the number of people diagnosed with diabetes has more than doubled. Whilst there have been some incredible advances in treatment and technology in more recent times, which improve quality of life and reduce the risk of complications, the number of people living with diabetes continues to rise at an alarming rate. There are more than 5 million people now living with diabetes in the UK with around 90% of this attributed to the rising tide of type 2 diabetes.

The NHS has also identified as many as 500,000 more people in England who are at increased risk of developing type 2 diabetes in a year. Early identification means that an earlier diagnosis can be made along with earlier support to prevent the condition progressing and reducing the associated risks of cardiovascular disease, kidney failure, lower limb amputation and sight loss.

There has been significant investment by the NHS in programmes to tackle the rising tide of type 2 diabetes through the Healthier You NHS Diabetes Prevention Programme, structured education and digital self-management tools, as well as almost £15 million investment in the Type 2 Today programme which aims to support up to 140,000 young people aged 18-39 who are living with early onset type 2 diabetes.

People with type 1 diabetes have seen significant milestones in the availability of flash glucose sensing as well as the NHS announcement of the national rollout of hybrid closed loop systems

However, both type 1 and type 2 diabetes are progressive conditions meaning that people living with either condition are constantly navigating the health challenges that diabetes presents whilst the research we fund seeks a cure.

Our mission is to support people living with all types of diabetes by providing the ongoing information, education and peer support required to face the challenges of living with a long term, often complex, condition head on and lead the best quality of life possible.

To that end, our work in 2024 focused on -

- Redefining our health care professional strategy to understand how we can best support diabetes and related healthcare professionals in delivering quality information and support to the diabetes community

- Delivering a stand-out **United Through Diabetes** event, a wonderful concept that brings the diabetes community together with healthcare professionals, public health officials, research teams, third sector organisations and industry partners. All of whom are invested and intent on creating a brighter future for people with diabetes.
- Raising visibility of DRWF through demonstrating the impactful research that we have funded.
- Developing meaningful partnerships with organisations working in diabetes and related health.
- Increasing our reach of the public with awareness raising materials on prevention of type 2 diabetes.
- Delivering Patient Information Forum (PiF) accredited health and social care resources through multiple channels,
- Diversifying our income generating activities alongside creating cost efficiencies – an ongoing process with a focus on navigating the continuing financial challenges that charities face whilst endeavouring to create sustainable income streams and a charity that is fit for the future.

Demonstrating public benefit

The trustees confirm that they have referred to the general guidance set out by Charity Commission on public benefit. The trustees are satisfied that the Charity's activities meet the principles of public benefit, defined as providing an identifiable benefit/s to the public, or section of the public, and know of no detriment or harm that may be caused because of these activities, which are clearly set out throughout this report. We are committed to ensuring that the values of equality, diversity and inclusion are embedded respectfully into everything that we do. We endeavour to make the charity's information, education and support services available to all.

Volunteers

As a small team delivering numerous activities, we rely on the support of volunteers who participate by helping with administrative tasks in our office; delivering diabetes awareness and information materials; undertake user involvement exercises to help steer and develop our programme activities; support our educational events and community fundraising programme or sit on one of our expert panels for research or information review. The number of volunteers fluctuates each year but is crucial to helping us spread the word about the work we do and to support local and national community initiatives. In addition to our Trustees, we have an Editorial Advisory Board and a Research Advisory Board. These are panels of diabetes clinicians and scientists, and other relevant professionals and lay people, all of whom offer their time and expertise voluntarily to ensure that we meet the high standards required of us through our Association of Medical Research Charities (AMRC) membership and our commitment to producing clinically evidenced health and social care information in line with our PiF accreditation. We wholeheartedly thank all our volunteers for their time, expertise and commitment which helps us raise awareness to the charity, maximise income and maintain high standards of work.

Measuring Impact

We use a mixed methods approach to monitor and evaluate our activities to ensure that they remain true to purpose and achieve desired outcomes. Stakeholders and beneficiaries are involved in these evaluation processes to ensure the continued relevance, quality, accessibility, and effectiveness of activities. We also undertake independent evaluation with specialist partners for specific projects where impartial opinion and/or additional expertise is required.

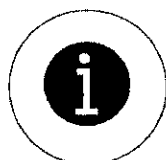
We keep people with diabetes at the heart of what we do. Beneficiaries and supporters are involved in numerous ways to ensure that our support and resources are relevant, accessible and meet needs, helping to steer our research priorities and programme activities.

Activities & Achievements in 2024

In the spirit of our strapline, *'staying well until a cure is found...'* our work is focused on two clear strands:

- The delivery of awareness, information and support programmes
- And the funding of diabetes research

Awareness, information & support



INFORMATION REACH: A large percentage of existing supporters and beneficiaries engage through offline channels and whilst we aim to diversify our activities and reach of a wider demographic of the online diabetes community, it is also important to ensure that we continue to reach the older demographic with awareness and educational content.

In 2024, we distributed 109,419 campaigns to existing supporters through direct mail and reached a further 142,510 prospective beneficiaries and supporters with new awareness campaigns, a 13.5% increase in volume on 2023. These appeals are dual purpose raising awareness and providing information about the charity's activities and funding, whilst seeking financial support. They also act as a stewardship tool, helping us to stay connected with long-standing supporters of the charity. Each campaign provides health information targeted at beneficiaries who could act on the information, either in a preventative way (type 2 diabetes), or to inform and support those living with diabetes (all types), in their self-management of the condition. We had an average campaign response rate of 12.5% across 2 streams resulting in over 30,496 responses from across the country. We know from experience that it is likely that many more opened and read the appeal but chose not to make direct contact with us at that time. Historically, we have seen numbers of people respond to communications that have been distributed many months, or even years, before as they have held onto the information provided for future reference.



WEBSITE: Total number of visits to our website in 2024 was 311,000, up 13% from 275,000 in 2023. Active users (unique) visiting the site was 185,000, up 35% on 2023. Our United Through Diabetes Digital Hub received 9619 views from 6716 active users.

Engagement on our website, such as likes, downloads, video views or link clicks, reached 1 million in 2024 which is an increase of 23% on 2023.

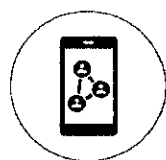


PATIENT INFORMATION FORUM (PiF) TICK: As members of the Patient Information Forum, we hold PiF Tick accreditation on our adult health and social care resources. The PiF Tick kite mark is displayed on our information resources. This demonstrates that we are a 'trusted information creator' which is an important way in which people seeking our help can recognise that our information is relevant, up-to-date, clinically referenced and peer reviewed.

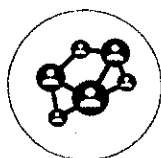


INFORMATION/ACCESSIBILITY: There were 10,972 pdf downloads from our website in 2024, 82% of which were copies of our diabetes information leaflets. Additionally, there were also 221 audio downloads of these resources. Further, there were 316 'listens' to our Living with Diabetes podcast sessions, a channel that we are working hard to develop.

We increased the volume of video content available to visitors in 2024 to ensure choice of channel and accessibility of our information. There were 1936 video views in the year, the majority of which was related to educational content via our UTD Digital Hub.



SOCIAL MEDIA CHANNELS: Social media channels are a great way to reach a wider audience, quickly, with messages about our activities. Whilst we use multiple social media channels, we get greatest engagement in posts about our community activities via Facebook. Our Facebook reach in 2024 was 2.6 million an increase of 25.8% on reach in 2023.



DIABETES WELLNESS NETWORK: The network is a core group of subscribers who receive a quarterly edition of the Diabetes Wellness News. These are predominantly people with type 1 and type 2 diabetes and health care professionals working in diabetes and related health. In 2024, we circulated 25685 copies of the Diabetes Wellness News which is a 16-page magazine containing specially commissioned articles on all aspects of diabetes self-management, as well as advances in research and general diabetes news.

Diabetes Wellness Events – QIC award winning educational events:

Self-management is the cornerstone of diabetes care, with good self-management skills essential to achieve positive health outcomes and reduce the risk of associated health complications.

For the past 25 years, DRWF has been providing an annual programme of Diabetes Wellness events that are focused on enabling people to access relevant, evidence-based health information throughout the lifetime of their long-term condition. Whilst providing a wide range of diabetes and related-health workshops, interactive sessions and talks, the core principle on which this programme is built is ‘peer support.’



Peer support is a valuable resource for people living with diabetes, their family, friends and carers and our Wellness events provide an opportunity to make new contacts and build new relationships through mutual acceptance and understanding, in a safe and inclusive environment.

Our events inform, inspire and empower people to take ownership of and have more control over their health and wellbeing. The diverse learning programme on offer helps people to develop knowledge, skills and confidence to address issues that are affecting their health and diabetes self-management. This is especially beneficial to people who are lonely or isolated and don’t have an immediate support network around them.

We believe that this holistic approach supports all round wellbeing and increases learning capacity and resilience, and it is wonderful to see people return to our events year-on-year.



United Through Diabetes – the BIG Diabetes Wellness Day

On Saturday 21st September, we hosted the second

United Through Diabetes in-person event which saw 395 delegates in attendance. The event was supported by Industry partners, and

prominent speakers, such as the National Specialty Advisory for Diabetes (NHS England), Professor Partha Kar. The event reached a wide and diverse segment of the diabetes community, including families of children with type 1 diabetes, people with type 1, type 2 and other types of diabetes, as well as people working in diabetes and related healthcare.



Attendees were able to engage with DRWF funded researchers, past and present, to understand how the work we have invested in over the past 26 years has delivered impact/benefit for people with diabetes. Feedback on the quality and variety of workshops and talks on offer was extremely positive and the UTD Digital Hub extended our reach post-event to enable people who couldn’t attend the event in-person to benefit from the programme content.

Numerous organisations supported the delivery of the event as well as providing funding for filming of the research panel session, all of whom were appropriately acknowledged on the DRWF Digital Hub.



Diabetes Wellness Family Camp

Family Camp took place 10-12th May at Whitemoor Lakes in Staffordshire. We received 35 family applications (138 individuals). Our aim was to accommodate 20 families (70 individuals). Following triage and withdrawals we accommodated 19 families/75 individuals. There is a robust triage process in place for Family Camp given that many children are living with complex health needs beyond type 1 diabetes.

All those that did not meet the criteria for Family Camp were offered places at our Autumn virtual **Camp in the Cloud**.

The aim of Camp is to bring families of children with Type 1 diabetes together in a fun, safe and welcoming environment. The emphasis is on providing fun for the children and a little respite for the parents/guardians and perhaps most importantly, providing a platform for meeting families to share similar experiences of life with diabetes so as to build relationships based on mutual understanding and acceptance.

There was a full programme of activity for the families to enjoy over the duration of the weekend with a diet and nutrition talk from Lisa Poole, HCPC registered dietitian with specialist experience in working with children.

We would like to say what an amazing weekend we all had at camp last week!! Our daughter wanted to come to meet other young people her age with type 1 diabetes, which she did!! Numbers & snaps exchanged. The camp was absolutely fantastic & fun for all the family!!! Our daughter has begged us to apply to come back again for next time/next year. Camp & the format was great & very well balanced.



Virtual Camp in the Cloud

"An opportunity to experience something fun that's related to my child's diagnosis, feeling special, having a unique day we've never had before."

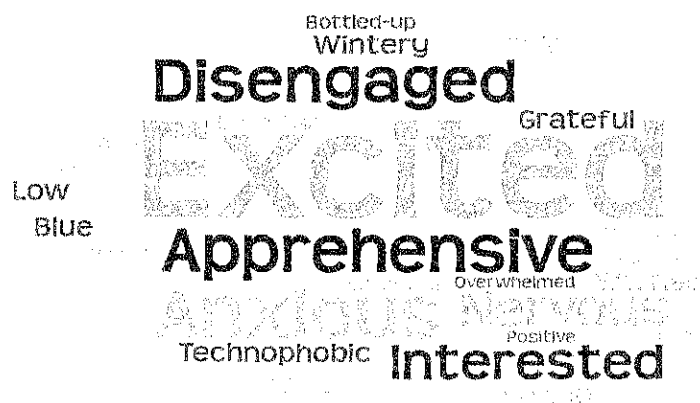
Virtual Camp in the Cloud was introduced during the pandemic period when in-person activities were curtailed. Due to its ease of access, we have continued to offer this fun, online 'Camp' in addition to our residential activity in the year.

A full programme of online activities was offered, with a box of arts and crafts, and other materials, supplied beforehand

to make the day as interactive and fun as possible. DRWF hosted a 'Talking Type1' session for the parents/guardians where they could raise important questions and share their experiences with each other in a safe and inclusive space.

"Seeing other families on the call. How warm and engaging the staff were. That my little warrior felt so appreciated sporting his t-shirt, having his face painting and building stronger bonds with his sister."

Feelings before attending Camp in the Cloud ...



Feelings after attending Camp in the Cloud ...



Diabetes Wellness Morning - Hartlepool

The Diabetes Wellness Morning in Hartlepool was hosted on behalf of DRWF by longtime volunteer, Hayley Hakansson, and coincided with World Diabetes Day.



The event was held at the National Museum of the Royal Navy and was attended by 81 people. The aim of the morning was to support people living with diabetes, their family, and carers, to provide practical information, tools and tips to improve self-management and understanding of the condition whilst providing an opportunity to spend time with diabetes healthcare professionals.

The event was organised with the support of the Hartlepool Diabetes Support Group and colleagues at the North Tees and Hartlepool NHS Foundation Trust. Attendees enjoyed a busy morning featuring talks and presentations on all aspects of diabetes and related health. Peer support is at the core of this event which provides the opportunity to meet new people living with diabetes in the local area whilst refreshing existing knowledge and learning new ways in which to optimise self-management.

Hayley said: “Everyone attending the event said how warm and welcoming the Wellness Morning was and they felt they had learned something new, in addition to refreshing their knowledge of helpful tips for living with diabetes.”



The ROYAL
SOCIETY of
MEDICINE

Royal Society of Medicine – Medicine & Me Partnership

On Monday 30th September, DRWF partnered with the Royal Society of Medicine to deliver an online event for healthcare professionals and people living with diabetes. Under the banner of **'Engaging Communities – tackling health inequalities in diabetes'**, the event explored 3 key areas, environmental, cultural and language. With a platform for sharing experience, we hoped to develop our understanding of how stigma, socio economic factors and inequalities in healthcare can impact on the lives of people with diabetes, helping us to consider the barriers and challenges to effective community engagement.

The Welcome address was given by Sarah Tutton, Chief Executive of DRWF with Sanjay Gohil as Chair. Speakers were Dr Sue Jones, Consultant Diabetologist (Newcastle); Dr Faye Ruddock, Chair of the Caribbean and African Health Network (CAHN); Dr Mayank Patel, Consultant in adult diabetes (Southampton).

There were 222 event registrations with around 30% attrition on the day. This is typical of an online event, particularly where healthcare professionals are registering their space to participate on and around their working day. The event ran between 12 noon and 3.30pm to cover the lunchtime period with a couple of short comfort breaks. Post-event feedback was very good with some very encouraging comments about the speakers and subject matter. Just over 93% of survey respondents said that the subject matter/content was good-very good with 85% saying that they would recommend to a colleague. Importantly, 82% of healthcare professional attendees said that the information gleaned during the webinar would positively impact on their clinical practice.

Research Funding Programme

Each year, we issue Calls for Applications in respect of our 3-year Clinical, Non-Clinical and Pump Priming awards.

DRWF Fellowships provide the necessary funding to support Early Career Researchers (ECR) which is vitally important to ensure that clinical and scientific talent stays and develops within the diabetes medical research community. ECR's represent a young and diverse research population, and provide a constant flow of talent, new ideas and new skills. Some of them will go on to be the senior diabetes researchers of the future, so with very few funding awards available to this vital community, the DRWF awards are lucrative and well positioned to attract the best and brightest young researchers.



Our Pump Priming stream is a proof-of concept funding channel, which aims to produce translational pilot study data that goes on to leverage higher value, longer term funding from other organisations to take the research conducted to the next level.

The DRWF annual funding round is offered through open competition, and as such, enables funded researchers to access support for both direct and indirect costs of research via the Charity Research Support Fund (CRSF) and NIHR Clinical Research Networks AcoRD agreement.

Institutional and discretionary awards are available when funds allow. Contract funding of key personnel within the DRWF Human Islet Isolation Facility at the Churchill Hospital, Oxford is subject to proposal and reviewed on a multi-year rolling contract basis. Central to this review, is the continuation of the facility's pivotal role in the UK Islet Transplant Programme and ongoing NHS clinical funding availability/plants for future years.

DRWF is a member of the Association of Medical Research Charities (AMRC), a membership body representing the leading medical and health research charities who deliver high-quality research that saves and improves lives. Working with member charities and partners, AMRC aims to support voluntary sector effectiveness and advance medical research by developing best practice, providing information and guidance, improving public dialogue about research and science, and influencing government.

As a member, we subscribe to AMRC's criteria for the use of peer review for allocating funding and support AMRC position statements on the payment of indirect costs in universities and the use of animals in medical research which seeks to replace, refine and reduce the use of animals (3Rs) in research.

We operate a rigorous peer review process by which our Research Advisory Board (RAB), clinical and scientific experts in the field of diabetes and related health, assess applications and reports to ensure that only the highest quality and most effective research, carried out using good or best practice methodologies, receives DRWF funding.

Pump Priming Awards

Calls for applications were issued in September 2023 for Pump Priming Awards to be taken up in 2024. A total of 20 applications were received from which six research awards were made with a total value of £119,982.

The DRWF research programme is designed to support bright young researchers, as well as established institutions, as they strive to make the kind of life-changing breakthrough our diabetes community is hoping for.

Pump Priming awards considered 'proof of concept' and are either Clinical or Non-Clinical in nature. Successful projects are funded for up to two year's duration, to the value of £20,000. No-cost extensions to the term may be considered.



Islet Cell Research & Transplant

DRWF has made a considerable contribution to the funding of islet cell research and transplant in the UK and around the world. The DRWF Human Islet Isolation Facility at Churchill Hospital, Oxford plays a pivotal role in providing islets for research and transplant as part of a national treatment programme, the clinical element of which is funded by the NHS.

Three personnel are funded within the facility (around 30% of facility staff):

- Lab Manager
- Deputy Facility Manager (post doc researcher)
- Islet Transplant Administrator

We maintained our contract funding awards at the DRWF Islet Isolation Facility, Churchill Hospital, Oxford. These posts are funded for between 3-5 years, giving continuity and stability to the individual post holders and wider facility/teams. This is vitally important to ensure sustainability of expertise within the research group, given that this facility works on rotation to isolate islet cells for human transplant, as well as supply islets for research across the UK and Europe.

Impact report from the Director of the DRWF Islet Isolation Facility Churchill Hospital, Oxford by Professor Paul Johnson



Introduction

2024 was the 18th year since the opening of the DRWF Oxford Human Islet Isolation Facility. It continues to be one of the key islet isolation facilities in Europe providing clinical islets for both allo- and auto-transplantation, as well as distributing research islets for a network of basic and clinical researchers around the UK. It also continues to be active in research and development in the fields of islet isolation and islet transplantation. This report gives a brief overview of the main areas of activity during 2024.

Islet Allo-transplantation

Our allo-isolation programme had a successful year overall. We continued to provide human islets for the UK Islet Transplant Consortium, maintaining the clinical service despite our partner isolation facility at Kings in London having to close between June 2023 and October 2024 due to a contamination issue. This unexpected and prolonged closure increased the pressure on the Oxford and Edinburgh Islet Isolation Facilities, but between January 2024 and December 2024, the DRWF Oxford Islet Isolation Facility performed 22 clinical islet isolations for allogenic use, 9 of which met the UK agreed release criteria for transplantation. This is a conversion rate of 41% (international average conversion is about 30%). On the clinical side, the Oxford programme continued to cover a wide catchment area in the UK and the satellite clinics in Birmingham and Leicester continued to be fruitful, offering a quaternary service closer to the patients' homes. We continued to champion a patient-centric integrated beta-cell replacement model, and because of this our Simultaneous Islet Kidney (SIK) and Islet After Kidney (IAK) transplant referrals increased considerably and these now reflect on our islet transplant waiting list. Indeed, with the routine use of closed loop insulin delivery, the previous primary indication of life-threatening hypoglycaemia is becoming a much less common indication for islet transplantation worldwide.

Islet Auto-transplantation

Our NHS-commissioned programme for total pancreatectomy with islet auto-transplantation (TPIAT) for chronic pancreatitis, continued to thrive with increasing referral numbers and excellent outcomes. In 2024, the DRWF Islet Isolation Facility performed 8 clinical islet isolations for autologous use. 7 of these 8 preparations were transplanted. We have now undertaken 3 TPIATs in the under 18 age group and our paediatric referrals for TPIAT are increasing. As a result, we have applied for NHS-commissioning to be able to routinely undertake TPIAT in children, something that we believe our expertise in Oxford makes us ideally placed to do. Ultimately, we hope that this will be the next step to our long-term goal of performing islet transplantation in children with type 1 diabetes soon after diagnosis.

Research Islet Provision

The DRWF Isolation Facility in Oxford continues to be the UK Islet Resource Centre providing human islets for research to a network of type 1 and type 2 diabetes researchers. In 2024, our team distributed 1.8 million islet equivalents (IEQ - the international standardised way of counting islets) from 8 islet preparations. In addition, the Oxford DRWF Islet Isolation team continued to lead the 'Islet Platform' for the related Quality in Organ Donation (QUOD) with responsibility for isolating and distributing islets for research from these rare pancreases. We are also part of two collaborative research projects under the Diabetes UK Type 1 Diabetes Grand Challenge, something that we believe is of enormous benefit to DRWF within the current landscape of diabetes research in the UK.

Vertex Stem-Cell Derived Islet Trials

As stated in last year's report, in 2023, Oxford was opened as the first site in the UK (and one of only a handful in Europe) for the Vertex 880 and Vertex 264 stem-cell derived islet transplant trials. We continued to actively recruit for these studies. The publicly available international data for the VX 880 trial is looking very encouraging. The fact

that the Oxford DRWF Isolation Facility team are playing such a key role in these landmark studies again demonstrates the wider impact that DRWF are having in the islet transplant field internationally.

DRWF Islet Facility Staff

Our DRWF-funded staff - Rebecca Spiers, Louise Stile, and Ahmad Kobiita - continued to be key to the day to day running of the Islet Facility and the Islet Isolation Programme. Indeed, I remain extremely grateful to each one of them for their essential contributions.

Biennial HTA Inspection and Licensing

In July 2024, we underwent our biennial rigorous inspection from the Human Tissue Authority. Rebecca Spiers and the team spent hours preparing all the documentation and data for this. The inspection went well, and we were delighted to receive our most successful inspection report yet. This is testimony to the meticulous regulatory management of Rebecca, and the hard work and cohesion of the whole isolation team.

Finally, I would like to once again reiterate my immense gratitude to DRWF for their ongoing generosity in funding the Oxford Programme, and to reiterate my team's total commitment to maintaining our close and successful partnership with DRWF for many years to come. We are also committed to continuing to champion the wonderful work of DRWF in every way we can.

Professor Paul Johnson

Professor of Paediatric Surgery, University of Oxford

Director of the Oxford Islet Transplant Program & DRWF Human Islet Isolation Facility

Research impact

Each year, our funded researchers deliver interim and annual reports to demonstrate that their work aligns with the award criteria and progress updates are provided throughout the term of funding. These reports are reviewed by the Research Advisory Board, from which we publish articles in our quarterly Diabetes Wellness News to update our beneficiaries and supporters on the impact that our funding is having for people with diabetes.

Here are two such examples published in 2024 –

Unravelling the mystery of diabetic pain

An exciting breakthrough in neuropathy research

Introduction to the Pioneering Research

In the quest to enhance the quality of life for millions affected by diabetes, a recent study sponsored by the Diabetes Research and Wellness Foundation has delivered groundbreaking insights into the mechanisms of diabetic neuropathic pain. This extensive investigation, led by Dr Richard Hulse at Nottingham Trent University, not only deepens our understanding of a prevalent complication associated with diabetes but also opens the door to potentially revolutionary treatments.



By exploring the underlying causes of neuropathic pain, which many patients experience as debilitating and persistent discomfort, the research holds the promise of developing therapeutic strategies that could significantly alleviate, or even completely eradicate, this often-intractable pain.

The significance of this research lies in its potential to transform the current approach to diabetes management. Neuropathic pain can severely impact an individual's functionality and overall well-being, making everyday activities challenging and diminishing life quality. This detailed study could pave the way for innovative treatments that target the root causes of neuropathic pain rather than merely managing symptoms.

Such advancements might not only improve care outcomes but also reduce the long-term economic costs on healthcare systems caused by chronic pain management in diabetic patients. By providing a new pathway for treatment, the findings from this study are a beacon of hope for those who suffer from the continuous struggle against diabetic pain.

What is Diabetic Neuropathic Pain?

Diabetic neuropathy, or neuropathic pain, is a common and often severe complication of diabetes. The pain experienced can vary widely in nature but is often described as burning, stabbing, or throbbing. Imagine a constant ache that not only disrupts your daily activities but also interferes with your sleep, making even light touches feel painfully intense.

Neuropathic pain can severely diminish quality of life, affecting both physical and mental health. It's a persistent reminder of the underlying condition—diabetes—that requires careful management and treatment. Understanding and addressing this type of pain is crucial for improving overall well-being and maintaining an active, fulfilling life despite having diabetes.

Traditionally, this pain was thought to stem from nerve damage caused by high blood sugar levels. However, the recent study suggests a different cause: reduced blood flow to the spinal cord, leading to oxygen-deprived neurons in the dorsal horn of the spine.

Exploring the Role of Hypoxia-Inducible Factor 1 Alpha (HIF1 α)

At the heart of the study is a protein known as Hypoxia-Inducible Factor 1 Alpha (HIF1 α), which significantly influences how cells adapt to conditions of low oxygen, a common issue in areas of the body with poor blood circulation like the spinal cord in people with diabetes.

The researchers concentrated their efforts on decoding how HIF1 α modifies pain perception particularly under diabetic conditions that typically exacerbate such complications. By employing advanced genetic engineering techniques, the team specifically targeted and deleted the HIF1 α gene from certain neurons in the spinal cord of mice. This precise modification allowed them to observe the role of this protein in neuropathic pain pathways more clearly.

Through this approach, they hoped to uncover whether reducing HIF1 α levels in specific neural populations could alleviate pain, thereby providing a potential new therapeutic avenue for treating chronic pain in diabetic patients. This exploration is crucial for developing targeted treatments that address the underlying causes of neuropathic pain without the side effects associated with less specific pain relief methods.

Innovative Research Methods

The scientific team utilized several advanced, cutting-edge techniques to conduct their research:

- **Genetic Modifications:** Using a specialised virus, they were able to specifically delete the HIF1 α gene in targeted neurons, observing how this genetic alteration affected diabetic pain.
- **Behavioural Assays:** These tests were crucial for evaluating the pain response in genetically modified mice, helping to establish a behavioural baseline and assess the effectiveness of the genetic modifications.
- **Proteomic and Histological Analysis:** By analysing proteins and cellular structures in the spinal cord, researchers could identify changes associated with pain pathways, providing a deeper understanding of the underlying mechanisms.

Key Findings: A Link Between Hypoxia and Pain

The experiments provided illuminating results, showing that hypoxia—a state of low oxygen levels in the tissues—in spinal neurons could directly initiate the experience of pain sensations. The scientists discovered that by strategically blocking the activity of HIF1 α , they could effectively prevent the onset of neuropathic pain in the spinal cords of their diabetic mouse models. This critical finding suggests that the HIF1 α pathway plays a significant role in mediating pain, and that inhibiting this pathway could significantly reduce or even eliminate neuropathic pain in patients with diabetes.

Why This Is Important

This research offers hope for better pain management in diabetes. By potentially eliminating a root cause of neuropathic pain, future treatments could lessen the reliance on traditional painkillers, which often come with side effects and limited efficacy in chronic conditions. If these findings can be translated into human treatments, it could mean:

- **Enhanced Pain Management:** More effective treatments could directly reduce the frequency and severity of neuropathic pain episodes.
- **Improved Overall Well-being:** Effective pain relief significantly contributes to better mobility, mood, and quality of life.

Looking ahead, the research team at Nottingham Trent University are excited to further explore this promising avenue, with further studies aimed at understanding and eventually interrupting the pain signals caused by hypoxia in patients with diabetes. The aim is to translate these findings into therapies that can be tested in clinical settings.

Conclusion: Towards a Pain-Free Future

This promising research offers more than just insights—it provides hope. As scientists continue to decode the complexity of diabetic pain, their findings could lead to revolutionary treatments. The journey from bench to bedside is long and complex, but the potential to improve the lives of those with diabetes is a powerful motivator.

In summary, the dedication of researchers at Nottingham Trent University, coupled with innovative genetic and molecular techniques, is setting the stage for significant advancements in the treatment of diabetic neuropathy. By directly targeting the newly uncovered mechanisms of disease, they are not only shedding light on previously obscure aspects of diabetic pain but also working towards a future where diabetes can be managed without pain.

Praising the quality of the study, DRWF Research Advisory Board member, Professor Ketan Dhatariya recognises that it's challenging the prevailing understanding of neuropathic pain as being caused by nerve damage from high blood sugar levels. The diabetes consultant and current chair of the Association of British Clinical Diabetologists said *"This is the first step to developing new models of pain. As the research team state, the next step is to develop HIF knockout mice to determine of their hypothesis and preliminary results are correct. If they are, then the next step would be to investigate potential agents to do the same and ultimately to develop therapeutic agents to treat diabetic neuropathic pain."* He adds *"Congratulations on the work, I think this is an understudied area"*.



Unlocking Hope: Enhancing Islet Transplantation for Type 1 Diabetes

Revolutionising treatment through MSC-secreted molecules

A groundbreaking study, funded by the Diabetes Research & Wellness Foundation, could significantly enhance the lives of those suffering from type 1 diabetes. Scientists in London and Exeter have discovered a method to improve the survival and function of transplanted islet cells, the insulin-producing cells often lost in this condition. Type 1 diabetes is a challenging illness where the body's immune system mistakenly attacks these vital cells, leading to a dependency on insulin injections. Islet transplantation offers a beacon of hope for patients, yet its effectiveness is hampered by the rapid loss of transplanted islet cells shortly after the procedure. This new research, however, shines a light on a promising solution.

Exploring the Healing Potential of Mesenchymal Stromal Cells

At the core of this scientific breakthrough are mesenchymal stromal cells (MSCs), which are known for their tissue-repairing abilities. These cells secrete a range of molecules that have been found to significantly enhance the survival and function of transplanted islet cells in mouse models. The researchers set their sights on whether this success could be replicated with human islet cells, using a meticulously crafted cocktail of MSC-secreted peptides.

Enhancing Islet Survival and Function Through MSC-Secreted Molecules

The study involved treating human islet cells, sourced from nine donors, with this special cocktail before transplanting them into diabetic mice. The results were compelling. Not only did the pre-treated islet cells demonstrate an improved ability to produce insulin in response to glucose, but they also showed a remarkable resistance to apoptosis, a form of programmed cell death induced by inflammatory cytokines, which are often present in high levels in transplant environments.

What stands out in this research is not just the *in vitro* success but also the remarkable *in vivo* outcomes. Diabetic mice that received the MSC-treated human islet transplants maintained normal blood glucose levels for an extended period, highlighting the enhanced survival and functional capability of the treated islets. This was in stark contrast to mice that did not receive transplants and suffered from elevated blood glucose levels.

Expanding the Possibilities of Islet Transplantation for Type 1 Diabetes

The study underscores the potential of using a defined cocktail of MSC-secreted molecules to precondition human islet cells before transplantation. This approach could significantly improve the longevity and efficacy of islet transplants, offering a more durable solution for managing type 1 diabetes. By increasing the functional survival of transplanted islets, this method could potentially expand the pool of viable islet donors, making the treatment accessible to a broader range of patients.

The implications of this research are profound. By addressing one of the critical challenges in islet transplantation — the rapid loss of transplanted cells — this approach paves the way for more successful diabetes treatments. It not only promises to enhance the quality of life for those living with type 1 diabetes but also signifies a step forward in the quest for a cure.

In essence, this study illuminates a path toward improving the outcomes of human islet transplantation through a novel, cell-free strategy. By leveraging the healing powers of MSC-secreted molecules, scientists are on the brink of making islet transplantation a more effective, reliable treatment for type 1 diabetes. This research not only highlights the innovative intersections of cellular biology and medical treatment but also offers hope for a future where managing diabetes could be less about daily struggles and more about long-term recovery.

Global consensus statement endorsement

In 2023, we were asked to endorse a Global Consensus Statement ***Towards standardization of person-reported outcomes (PRO's) in diabetes research***. This project was to address the lack of standardization/harmonization of PRO's (person reported outcomes), limiting the comparability of findings across studies in a space where too often, patient's perspectives of their lived experience with diabetes are lacking as primary or even secondary outcomes in clinical trials.

We considered this to be an interesting and important piece of work given that clinical outcomes in diabetes are intimately tied to how the person living with diabetes reacts to and implements treatment recommendations. It was on this basis that DRWF endorsed the global consensus statement project.

This global endeavour resulted in two final manuscripts, for adult and paediatric care, being delivered for publication in March and July, respectively in Diabetic Medicine and Behavioral Diabetes Institute.

Fundraising Policy:

The Trustees are aware of their responsibility and accountability to ensure that the charity fundraises legally, responsibly, and effectively.

Our plan for 2024 was to maintain focus on building resilience and sustainability for the future through succession planning, diversification of income streams and delivery of purposeful programs that continue to meet the ever-changing needs of people with diabetes.

Corporate Partnerships:

We do not endorse products, but we will support initiatives that increase awareness to DRWF and our activities, and where there is an appropriate message, product, or service for people with diabetes. To this end, we have explored meaningful partnership and corporate sponsorship opportunities, where there is a synergy in mission, vision, and values. Any potential partnership is assessed for feasibility, compatibility with our own objectives, and risk to ensure there is no detrimental effect to our reputation, fundraising potential or the audiences that we exist to serve. Robust risk assessment supports our desire to only engage in suitable and best value partnerships. Detailed discussion and negotiation ensure that the aims of both parties are complementary and mutually beneficial and in line with any regulatory/industry standards. This maintains transparency and integrity in all partnerships.

Professional Fundraisers:

Whilst we use the services of fundraising consultants, as and when needed, to advise on some of our activities, we did not work with a professional fundraiser during the year. Commercial participation agreements are in place where necessary.

YOU make ALL the difference!

As a charity that exists almost entirely, at this time, on voluntary donations and fundraised income, we are always humbled and heartened by the support that we receive.

Here is a snapshot of some of the community activities that took place in 2024 that helped raise awareness of diabetes, the charity and its services, as well as vital funds to support all our charitable activities -

TCS London Marathon 2024

We were very lucky to receive 8 gifted places in the 2024 London Marathon from a corporate partner. This enabled us to issue a call for applications. Following a thorough review process, the places were allocated to 8 amazing runners who raised over £25,619 for DRWF.



“My journey with diabetes has inspired me to join the marathon team and raise funds for the Diabetes Research & Wellness Foundation. Since my diagnosis in 2018, I’ve been enthused by efforts to advance care and find a cure for this condition. What drives me even more is the stigma associated with diabetes, fuelled by a lack of understanding and misconceptions in society. I’ve encountered ignorance and negativity, which only emphasise the urgent need for education and increased awareness.

Whilst aiming to achieve a great time, I also wanted to challenge this stigma in the process. I believe that with increased understanding, we can change perceptions and support others affected by diabetes.”

Lyle Pentith – DRWF London Marathon 2024.

Dance for Diabetes

Dance for Diabetes saw impressive growth in 2024. We connected with more families and made a bigger impact through educational resources, school assemblies, and fundraising incentives.

Fifteen schools across Hampshire took part, with 4,431 children raising an incredible £27,629. This was a 56% increase in funds compared to 2023 and a 64% rise in the number of participants.

Since 2022, we've given back over £20,000 to the schools involved in the program, thanks to our commitment to share 40p of every £1 raised at each school. This support has helped schools purchase items like playground benches, sensory gardens, outdoor gym equipment, and musical instruments.

Looking ahead, we aim to expand this event in 2025 with a goal of reaching 5,000 students and raising an ambitious £35,000. This model demonstrates a community partnership that benefits everyone involved, raising awareness of diabetes amongst schools, families and children through our healthy lunchbox literature whilst raising income that is split 60% to DRWF and 40% to participating schools.

“New Horizons Primary School relished the opportunity to be involved with Dance for Diabetes. Combining the learning of this dance within PE lessons and children practising at home, it was a fantastic way to encourage children to get moving in a fun environment. The atmosphere in school was incredible, we ran the event as a multi-coloured dress down day and we decorated the playgrounds with multicolour bunting so there really was a party atmosphere. Not only did all our children love being involved in the event, but it also meant as a school we generated an income of £1,785.96 (40%) which was an amazing result”.

Mr Jones Headteacher, New Horizons Primary School Thinking Schools Academy Trust.





Cardiff half-marathon 2024

We managed to secure 15 spots for the 2024 Cardiff Half Marathon and to our amazement, the event sold out to the public in no time which helped us to quickly allocate our own places. Before long, we were collaborating with an amazing group of enthusiastic and dedicated runners.

Thanks to their efforts we exceeded our initial fundraising goal raising an impressive £8,303.75.



“In September last year I sadly lost a special family member. A man that I was proud to call my grandfather. For the majority of his life, he suffered with ill health mainly caused by Diabetes. Watching him battle through all that he did with no fear or complaints has made me realise what a true fighter meant in my eyes. He was a kind, loving and a very hardworking man that would always prioritise others, even if his health had the best of him some days. He loved being in his family’s company that he cherished and adored dearly. Watching him succeed in life has taught me that hard work does pay off! Therefore, in memory of his life, I decided to participate in running the Cardiff Half Marathon in 2024 with a target of supporting all that are living with Diabetes.”

Maddison Rae Evans – Cardiff Half Marathon 2024.

Fundraising Regulator

We are a levy-paying member of the Fundraising Regulator and subscribe to the associated fundraising codes of practice. The charity suppresses individual supporter records against the Mailing Preference Service, Telephone Preference Service, and the Fundraising Preference Service, which helps to ensure that we do not approach individuals who have expressly requested that we do not contact them. During the year, we were notified of 9 FPS requests, which were suppressed from all contact, this is 50% lower than the 18 received in 2023.

Complaints

The charity has a published complaints procedure, available on its website, and endeavours to respond to enquiries and complaints within the stated timeframe. Most contacts tend to be a request to opt-out of charity communications by existing supporters and we monitor the basis on which people request this i.e., content of appeal, volume of contact; type of contact; method of contact to inform our campaigns with the aim of reducing any perception of unreasonable intrusion, persistent approach or undue pressure to support. We didn't receive any complaints about our fundraising practices during the year.

GDPR and Data Protection

We are committed to protecting the personal information and privacy of individuals that we engage with and comply with relevant legislation and codes of practice, whilst carrying out our essential work of raising awareness of diabetes, providing information and support, and raising funds. Our privacy policy, published at drwf.org.uk sets out how we capture, process, manage and retain personal information.

Financial Review

Principal income streams in the year were direct mail campaigns; regular giving via direct debit; legacy income and gift aid associated with voluntary donations.

Income:

Total income was £1,534,027. This was 10% below budgeted income (£1,701,396) and 7.5% less than income received in 2023 (£1,658,853). Voluntary donations including gift aid receipts at £637,145 were 18% less than income received in 2023 (£777,932). Legacy, In Memory & Trust income was £628,727 which was 20% higher than received in 2023 (£524,625), as expected given the volume and value of legacies received and accounted for in the previous year.

Expenditure:

Total expenditure was £1,792,042 which was 6% below budget (£1,904,223), and 3% less than expenditure in 2023 (£1,855,067).

At year-end we had a deficit of £258,015. This was 27% more than we had anticipated when budgeting for the year where we had predicted a deficit of £202,827. Whilst expenditure in the year was under budget, the deficit was impacted quite significantly by the reduction in voluntary donations and fundraised income received in the year.

Direct charitable expenditure was 85p for every £1 spent (80p in 2023). We believe this demonstrates our commitment to spending income on delivering the services for which we exist to provide.

Government Grants

The charity received £131,578 from the Government's Covid Medical Research Charity Support Fund (BEIS) to support existing funding commitments of identified early career researchers.

Investment Policy

Under the Memorandum and Articles of Association, the charity has the power to invest in any way the trustees see fit. The trustees are aware and mindful of the Charity Commission CC14 guidance on investments. The trustees, to minimise risk and having regard to the liquidity requirements of the charity, and to the reserves policy, have historically operated a policy of keeping available funds in a higher interest-bearing deposit account seeking to achieve a rate of deposit interest which matches or exceeds inflation as measured by the retail prices index.

The trustees have regularly reviewed opportunities to increase investment return from short-term, easy access, options bearing in mind the desire to ensure that we can react quickly to appropriate requests for additional research support as they arise.

The trustees are also conscious of on-going cash-flow requirements during a challenging time where historical fundraising methods are raising less income and where new methods of fundraising are being tested at higher cost.

All things considered, the trustees believe it appropriate to continue to explore investment opportunities as they present themselves, with a view to maximising return on its deposits.

During 2024, multiple deposits were made into the CAF Charity Deposit platform to the maximum value of £85,000 each over a 3–4-month term to maximise investment return on surplus funds.

Reserves Policy

To safeguard the need for sufficient funds to cover ongoing management, administration, and support costs, as well as respond to further grant requests that might arise, the Board aims to maintain unrestricted, free reserves at a level that equals 3-6 months of operating and charitable expenditures (£417,658 - £835,316).

On 31st December 2024, the charity held free reserves of £2,039,672 (unrestricted funds less tangible fixed assets). This equates to approximately 15 months of anticipated 2025 operating and charitable expenditures. Whilst this is significantly more than the policy level, the trustees are committed to strengthening existing income streams whilst diversifying fundraising activities to reduce reliance on single sources. It is accepted that this will take investment in activities where the accuracy of predicting response rates, in terms of volume or value of gift, will be more challenging in the first instance. Therefore, these additional reserves will enable us to explore avenues of diversification of income streams, and to develop the charity's objective activities for future sustainability.

Going concern

The trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements having considered known commitments, forecasts and projections and possible pressures on income generation. After making these considerations, the trustees conclude that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing the financial statements.

Our focus in 2025 and beyond

Our focus for 2025 is very much on ensuring that we have the necessary funds to build a resilient and sustainable organisation that can meet the ongoing, and ever-changing, needs of our beneficiaries.

Whilst we recognise that the charity sector continues to be a challenging space, industry reports do offer some little nuggets of hope. Take up of mass participation events and community fundraising activities appear to be on the

increase especially with younger people, a community that we are working hard to reach. At the end of 2024 we secured a debenture for 20 TCS London Marathon places for the next 4 years. This was a big win for our small community fundraising team of 2 who are intent on maximising this opportunity alongside a growing schedule of home-grown and third-party activities.

With investment in individual and sustainable giving programmes, as well as a focus on securing appropriate partnerships and sponsorships, we are intent on reversing the negative impact that both the pandemic and the economic climate have had on our ability to diversify and develop our fundraising portfolio and ultimately deliver Research and Wellness programmes that meet the needs of the diabetes community today and in the future.

To do this effectively, we plan to –

- Broaden skill base in the Board of Trustees and diversify representation of the community that we serve.
- Review current operations, processes and procedures to ensure that we are maximising opportunity to create sustainable income streams and delivering relevant beneficiary services.
- Increase visibility of DRWF as an organisation that packs a punch above its weight in delivering benefit for our diabetes community by developing meaningful partnerships that align with our mission, vision and values and help us to extend our reach of target audiences.
- Elevate credibility of DRWF programme activities through clear and concise impact assessment, and consistent marketing messages that enable us to ‘cut through the noise’ in a competitive third sector.
- Continue to identify ways in which to create cost-efficiencies and effect organisational change within the charity to make for an organisation that can navigate an ever-changing landscape and is robust and fit for the future.

Reference and Administrative Details

Charity Number:	1070607
Company number:	03496304
Registered Office:	Building 1000 Langstone Park Havant, Hampshire PO9 1SA Tel: 023 92 637808 Website: drwf.org.uk
Trustees & Directors:	Mr W. Michael Gretschel (Chairman – deceased Dec 24) Mr John Alahouzou (Chairman Dec 24) Mrs Valerie Hussey (retired March 2024) Mr Steve Jones Dr Shivani Misra (retired February 2024) Mr Christian Gretschel Mr Adrian Durelli (elected March 2024)
Chief Executive:	Mrs Sarah Tutton (Bone)

Advisers

Bankers:	Barclays Bank Plc 1 Churchill Place London E14 5HP
Solicitors:	Blake Morgan LLP New Kings Court Tollgate Chandlers Ford Eastleigh SO53 3LG
Secretary:	Blake Morgan Company Secretary Services
Auditors:	Moore Kingston Smith LLP 6 th Floor, 9 Appold Street London EC2A 2AP

Structure, Governance & Management

Governing Document - The Diabetes Research and Wellness Foundation, also known as DRWF, is a registered charitable company (Registered Charity No. 1070607 and Company No 03496304) limited by guarantee and governed by its Memorandum and Articles of Association dated 15 January 1998 and amended by special resolutions passed on 15th June 1998, 2nd December 2001 and 24th April 2005.

Recruitment & Appointment of Trustees - The charity trustees are also the directors of the company for the purposes of company law.

As dictated by the charity's Articles of Association, directors are appointed by the Company Members. Any person desiring to be admitted to the membership of the company is required to apply in writing. No person shall be admitted until approved by resolution passed in accordance with the Articles of Association by the existing members, who hold absolute discretion as to the admission of any person.

The Trustees of the charity, being mindful that the board should offer a diversity of skills to fulfil statutory and fiduciary duties, are open to recommendations for new board members.

The business and medical/health related skills within the existing board member pool are supported by personal experience of diabetes, which assists the board in ensuring that objective activities meet beneficiary need.

Additionally, the board is supported in its decision-making processes by a Research Advisory Board, which has an independent Chairman. The RAB members review applications and make recommendation for research funding awards. An Editorial Advisory Board provides support to the provision of health and social care information. Both boards are made up of clinicians, scientists and other 'experts' in the field of diabetes and related health and strengthen the services that the charity offers its beneficiaries.

All board members are subject to 'conflict of interest' policies and processes.

Trustee Induction and Training – Newly elected Trustees receive an Induction Pack that outlines the role and responsibilities of the Trustee, along with a history of the structure and purpose of the charity.

The pack includes a copy of the governing document and contact details of all board members. There is also an outline of the Chairman of the Board's role and responsibilities along with details of the executive officer taking responsibility for the daily management of the charity. Trustees are required to comply with the eligibility requirements set out by Charity Commission and to review and update an annual Register of Interests.

Trustees are kept up to date with various governance publications and notices from appropriate professional advisory memberships. Additionally, trustees might be advised of appropriate governance courses that they may benefit from attending to ensure diversity and continuity of knowledge and skills within the Board.

Newly elected trustees are invited to attend a Review Meeting with the chair, after an agreed time lapse, to feedback their first impressions and address any concerns. Trustees are actively encouraged to participate in the charity's outreach programme of educational events.

Governance - The strategic direction and policy of the charity is the responsibility of the Board of Trustees. At the start of 2024 six trustees served on the Board, from a variety of professional backgrounds relevant to the work of the charity. During the year there were two retirements from the Board and one new election to the Board. Additionally, the existing Chairman of the Board passed away in December 2024 therefore a new Chairman was duly elected in December 2024. The Board meets routinely throughout the year post-quarter end to review activities and management accounts. Additional meetings are organised as required. Historically, the Board would meet at least once per year in person however this changed during the Covid-19 pandemic due to travel restrictions,

with all meetings being held virtually. There was 1 face-to-face Board meeting in 2024 with all other meetings being held online.

The Chief Executive carries out the daily operations of the charity and is responsible to the Board of Trustees.

Connected & Related Parties – DRWF co-operates on several intellectual matters including sharing articles and reports with the Diabetes Research and Wellness Foundation Inc., a 501C3 Not for Profit Company operating in the United States; Association pour la recherche sur le diabete (A-rd) in France; Insamlingsstiftelsen Diabetes Wellness Network Sverige (Sweden); Diabetes Wellness Suomi (Finland) and Diabetes Wellness Norge (Norway). These organisations are completely autonomous and independent with no legal connections.

- Mr. John Alahouzos is the Chairman of the Diabetes Research and Wellness Foundation in the UK and is also Chairman of DRWF Inc (USA). He is also Chairman of the Board of A-rd (France), and a Board member of DWNS (Sweden), DWS (Finland) and DWN (Norway).
- Mr. Christian Gretschel is a Board member of Diabetes Research & Wellness Foundation (UK) and serves on the Board of A-rd (France)
- The Chief Executive of the Diabetes Research & Wellness Foundation, Sarah Tutton, serves on the Board of DWN (Norway).

Links between these independent organisations, has proved invaluable to the charity in helping to strengthen its international presence, for the purpose of supporting diabetes research programmes and global awareness activities.

A Register of Interests for Board Members and Key Management Personnel is maintained and reviewed on an annual basis.

Remuneration Policy for senior staff - The Trustees, who are also the directors, and the Chief Executive Officer comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity on a day-to-day basis.

All trustees give their time freely and no trustee received remuneration in the year. Details of trustees' expenses are disclosed in note 12 to the accounts. Related party transactions are disclosed in note 20 to the accounts.

The salary of all staff, including the chief executive officer, is reviewed annually and normally increased in accordance with average earnings. In view of the nature of the charity, its size and structure, the trustees undertake a benchmarking exercise, using online research/tools, comparing the charity's salaries against pay levels offered for similar roles within other charities and companies.

The benchmark is the mid-point of the range paid for these similar roles with consideration given to workload, level of responsibility, anticipated rate of inflation and other published research on third sector rates of pay.

The charity considers that its remuneration policy –

- Ensures delivery of the charity's objectives
- Attracts and retains a motivated workforce with the skills and expertise necessary to ensure organisational effectiveness.
- Is equitable and coherent across the organisation.
- Reflects the purposes, aims and values of the charity.
- Ensures that pay levels and pay increases are appropriate in the context of the interests of our beneficiaries.

Risk Management – The Trustees have examined the major strategic, business, reputational and operational risks that the charity faces. This involves identifying specific risks; assessing their likelihood of occurrence and potential impact; determining what steps could be taken to mitigate those risks and delegating responsibility to key staff for overseeing management of the associated controls. The risk register is reviewed annually to ensure the adequacy of internal control mechanisms.

Our approach to risk assessment and management is evidenced across the organisation and throughout our activities. The risk register was circulated to the Trustees for review and scoring in September and resulting risks discussed at a Board meeting held on 24th October.

The Board considers that the major risks facing the charity at present, are –

- Fundraising
- Competition for support
- Dependency on income streams
- Demographic of supporters
- Program development including activities outside of objectives
- Location

The past few years have been incredibly challenging for all charities, with clear impact on fundraising activities and attrition in channels that, historically, have been very solid in their return. The charity is focused on diversifying activities to reduce reliance on unpredictable or single income streams which means reaching a wider demographic of potential supporter/beneficiary providing opportunity and choice of how to engage.

The fundraising landscape is highly competitive at present, with more charities than ever applying for grant funding and seeking out corporate sponsorship income; individual donors reviewing their financial commitments because of the rising cost of living; and legacy income, which is an entirely unpredictable income source, contributing a high percentage of overall income.

We are mindful that fluctuations in income could impact on our ability to deliver direct charitable activities and so remain agile in our approach to protect our aims and objectives. New projects/activities are reviewed to ensure that they are consistent with our objectives, powers and terms of restricted funding (if applicable), but we are aware of this more than ever as we develop the charities activities to ensure that we remain relevant to the diabetes community and its needs whilst aligning with potential partners.

Remote working through the pandemic, as well as diversifying our fundraising activities and provision of beneficiary programmes through multiple channels, has heightened our sensitivity to the need and use of technology to remain relevant to our audiences, and the impact that a cyber breach could have on the charity. We rely on public trust and generosity to support our activities, so are mindful of the financial and reputational risk a cyber breach could have.

The trustees consider that the Charity has robust internal procedures, systems and processes and believe that risk assessment is embedded throughout the organisation.

Trustees' responsibilities in relation to the financial statements – The trustees, who are also directors of Diabetes Research and Wellness Foundation for the purposes of company law, are responsible for preparing the trustees' annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice.)

Company law requires trustees to prepare financial statements for each financial year that give a true and fair view of the state of the affairs of the charitable company and of the outgoing resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charities SORP.
- make judgements and estimates that are reasonable and prudent.
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

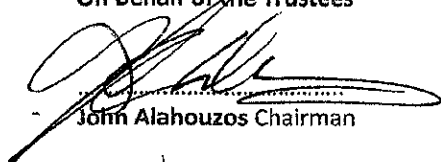
In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

Auditors – Moore Kingston Smith LLP have indicated their willingness to continue in office and are deemed to be reappointed in accordance with section 487(2) of the Companies Act 2006.

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

On Behalf of the Trustees



John Alahouzos Chairman

05/08/2025
Dated

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF DIABETES RESEARCH AND WELLNESS FOUNDATION

Opinion

We have audited the financial statements of Diabetes Research and Wellness Foundation ('the company') for the year ended 31 December 2024 which comprise the Statement of Financial Activities, the Summary Income and Expenditure Account, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 'The Financial Reporting Standard Applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2024 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, 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 trustees' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. 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. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements themselves. 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 2006

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

- the information given in the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' annual report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' annual report.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit. or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the trustees' annual report and from preparing a strategic report.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 28, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees 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 trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company 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 (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs (UK) 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 purposes of expressing an opinion on the effectiveness of the charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' 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 charitable company'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 charitable company 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.

Explanation as to what extent the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below.

The objectives of our audit in respect of fraud, are; to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charitable company.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity SORP, and UK financial reporting standards as issued by the Financial Reporting Council.
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.
- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of

management and those charged with governance and obtaining additional corroborative evidence as required.

There are inherent limitations in the audit procedures described above. We are less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the company'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 any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Moore Kingston Smith LLP

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Samir Chandoo (Senior Statutory Auditor)
for and on behalf of Moore Kingston Smith LLP, Statutory Auditor

Date: 15 August 2025

6th Floor
9 Appold Street
London
EC2A 2AP

Diabetes Research and Wellness Foundation
Statement of Financial Activities (Incorporating the Summary Income and Expenditure Account)
For the year ended 31 December 2024

		Unrestricted Funds £	Restricted Funds £	2024 TOTAL £	Unrestricted Funds £	Restricted Funds £	2023 TOTAL £
Income	Note						
Donations and Legacies	2	1,157,904	27,953	1,185,857	1,191,928	21,974	1,213,902
Charitable Activities	3	80,015	135,578	215,593	96,546	253,613	350,159
Other Charitable Trading Activities	4	56,049	-	56,049	44,960	-	44,960
Investments		56,351	-	56,351	29,057	-	29,057
Income from Charitable Activities		1,350,319	163,531	1,513,850	1,362,491	275,587	1,638,078
Other Income	5	20,177	-	20,177	20,775	-	20,775
Total Income		<u>1,370,496</u>	<u>163,531</u>	<u>1,534,027</u>	<u>1,383,266</u>	<u>275,587</u>	<u>1,658,853</u>
Expenditure On:							
Raising Funds	6	265,718	-	265,718	378,648	-	378,648
Charitable Activities	7	1,300,062	226,262	1,526,324	1,262,851	213,568	1,476,419
Other		-	-	-	-	-	-
		<u>1,565,780</u>	<u>226,262</u>	<u>1,792,042</u>	<u>1,641,499</u>	<u>213,568</u>	<u>1,855,067</u>
Net Income		<u>(195,284)</u>	<u>(62,731)</u>	<u>(258,015)</u>	<u>(258,233)</u>	<u>62,019</u>	<u>(196,214)</u>
Transfer between Funds		-	-	-	-	-	-
Net Movement in Funds		<u>(195,284)</u>	<u>(62,731)</u>	<u>(258,015)</u>	<u>(258,233)</u>	<u>62,019</u>	<u>(196,214)</u>
Total Funds brought forward		2,243,742	70,684	2,314,426	2,501,975	8,665	2,510,640
Total funds carried forward at 31 December 2024		<u>2,048,458</u>	<u>7,953</u>	<u>2,056,411</u>	<u>2,243,742</u>	<u>70,684</u>	<u>2,314,426</u>

There were no recognised gains or losses other than the deficit reported for the financial year. All activities in the year relate to continuing operations.

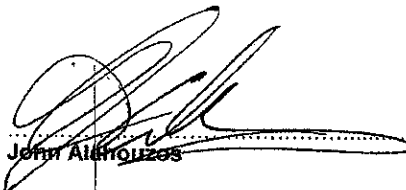
The accompanying notes form an integral part of these financial statements.

Diabetes Research and Wellness Foundation
Balance Sheet
As at 31 December 2024

	Note	2024 £	2024 £	2023 £	2023 £
Fixed Assets					
Tangible Assets	15		8,786		12,175
Current Assets					
Debtors	16	655,293		808,379	
Investments		433,101		424,258	
Cash at bank and in hand		<u>1,418,968</u>		<u>1,463,331</u>	
		2,507,362		2,695,968	
Creditors : Amounts falling due within one year	17	<u>(459,737)</u>		<u>(393,717)</u>	
Net Current Assets			<u>2,047,625</u>		<u>2,302,251</u>
Total Net Assets			<u>2,056,411</u>		<u>2,314,426</u>
 Reserves					
Restricted Fund	19		7,963		70,684
General Reserve	19		<u>2,048,458</u>		<u>2,243,742</u>
			<u>2,056,411</u>		<u>2,314,426</u>

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime within Part 15 of the Companies Act 2006 and with the FRS 102 Charity SORP.

The financial statements were approved, and authorised for distribution, by the Trustees on 05/08/2025 and signed on their behalf by:


 Trustee
 John Althouzes

The accompanying notes form an integral part of these financial statements

Company number: 03496304

Diabetes Research and Wellness Foundation
Statement of Cash Flows
For the year ended 31 December 2024

	Note	2024 £	2023 £
Cash used in Operating Activities	23	(91,871)	164,519
Cash Flows from Investing Activities			
	Interest on Bank Deposit	56,351	29,057
	Investments	(8,843)	(424,258)
	Fixed Assets	0	(9,850)
Cash Flows from Financing Activities		-	-
Change in cash and cash equivalents in the year		(44,363)	(240,532)
Cash and cash equivalents brought forward 1st January		1,463,331	1,703,863
Cash and cash equivalents at 31st December 2023		1,418,968	1,463,331

Diabetes Research and Wellness Foundation
Notes to the Financial Statements
For the year ended 31 December 2024

1 Accounting Policies

The financial statements have been prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102). The Charitable Company is a public benefit company for the purposes of FRS 102 and therefore the Charity also prepared its financial statements in accordance with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (The FRS 102 Charities SORP), the Companies Act 2006 and the Charities Act 2011.

The trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charity to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of approval of the financial statements. In particular the trustees have considered the charity's forecasts and projections and have taken account of pressures on donations income. After making enquiries the trustees have concluded that there is a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. The charity therefore continues to adopt the going concern basis in preparing its financial statements.

The financial statements are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest pound. The financial statements have been prepared on the historical cost convention, modified to include certain financial instruments at fair value. The principal accounting policies adopted are set out below.

Critical accounting estimates and areas of judgement

In the view of the trustees in applying the accounting policies adopted, no judgements were required that have a significant effect on the amounts recognised in the financial statements nor do any estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

The principal accounting policies of the charity are set out below:

Income

Income is included on an accruals basis except that donations under gift aid together with the associated income tax recoveries are credited as income when the donations are received. Membership Subscriptions are apportioned across the membership subscription period. Income from gift aid repayment claims is only included for claims which have been submitted for tax periods ending on or before the year end and when the receipt of this income is certain.

Legacies

Legacies are recognised following probate and once there is sufficient evidence that receipt is probable and the amount of the legacy receivable can be measured reliably. Where entitlement to a legacy exists but there is uncertainty as to its receipt or the amount receivable, details are disclosed as a contingent asset until the criteria for income recognition are met.

Public Donations and Gifts-in-Kind

Incoming resources in the form of Gifts-in-Kind are included in the Statement of Financial Activities only when assets donated to the charity are distributed. Gifts-in-Kind are donations of commodities directly usable in charitable programmes, such as food, blankets, books, agricultural and medical supplies. The Charity has an internationally recognised and accepted monitoring programme in place to ensure that commodities are appropriately valued at wholesale or less, culturally appropriate for the designated programme, and can be both properly shipped and distributed gratis to the designated beneficiaries.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2024

1 Accounting Policies (continued)

Expenditure

Expenditure, which is charged on an accruals basis, is allocated between:

- expenditure incurred directly in the effort to raise voluntary contributions (raising funds);
- expenditure incurred directly to the fulfilment of the charity's objectives (charitable activities);

Charitable expenditure comprises all the expenditure incurred by the charity in meeting its charitable objectives and is further analysed between:

- grants payable in the furtherance of the charity's objectives
- costs of activities in furtherance of the charity's objectives
- support costs of the charity

Cost Apportionment

Where items of expenditure involve more than one cost category these costs have been apportioned on a reasonable basis as determined by the trustees. One particular area where the cost is material to the charity is in the production and distribution of direct mailings.

One of the purposes of the mail shot is to develop a database of names of people with a particular interest in the activities of the charity and its charitable objects. It is held that individuals who make a £10 or greater donation, in response to the mailing, have a degree of interest in diabetes. They are interested because they suffer from diabetes, know somebody who does or could themselves be at risk of developing the condition. These are precisely the people whom the charity is trying to help and consequently they receive the benefits of the educational material provided by the charity. These high interest individuals constitute 25% of the total responses; so the charity allocates 25% of the cost of the mailing to costs in furtherance of the charity's objects.

Furthermore the remaining expenditure has been allocated on the basis of whether the educational content of the individual mailing is significantly high enough so as to be material. When this holds true the remaining cost of the mailing is allocated on a pro-rata basis comparing the educational content (costs in furtherance of the charity's objects) to the fund raising content (costs of generating funds). The educational content is determined by the amount of text and space on each mailing that is dedicated to material of an educational nature.

Telemarketing expenditure is allocated in a consistent manner with mailings, as described above, hence the charity allocates 25% of the cost of the telemarketing calls to costs in furtherance of the charity's objectives, with the remaining expenditure allocated on the basis of whether the time spent during the telephone call is in accordance with the charity's objects or otherwise.

Fund raising expenditure i.e. Text that may induce a donation from the recipient, is allocated upon the basis of the volume of the text and space that is not related to text of an educational nature.

Support costs comprise all other overhead costs for the running of the charity as an organisation.

Fund Accounting

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes. The aim and use of each fund is set out in the notes to the financial statements.

Unrestricted funds are donations and other incoming resources received or generated for expenditure on the general objectives of the charity.

Restricted funds are donations received from a donor who has specified a particular area of the charity's work to which the donation should be allocated.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2024

1 Accounting Policies (continued)

Grants Payable

Grants are recognised when they become due for payment. Included within the Statement of Financial Activities is the cost of grant instalments that are payable to charitable organisations / individuals in accordance with the charity's governing instruments, together with any grants payable for the year, but not paid by the year end date. The value of grants awarded which are subject to the completion of a future year's performance is disclosed as a Financial Commitment in Note 21.

Tangible Fixed Assets and Depreciation

Depreciation is calculated to write down the cost less estimated residual value of all tangible fixed assets held for charity use by equal annual instalments over their expected useful economic lives. The rates generally applicable are:

Office equipment, fixtures and fittings	5-7 years straight line
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All tangible fixed assets costing more than £250 are capitalised at their cost to the charity.

Foreign Currencies

Transactions in foreign currencies are translated at the exchange rate ruling at the date of the transaction. Monetary assets and liabilities in foreign currencies are translated at the rates of exchange ruling at the balance sheet date. All exchange differences are dealt with through the statement of financial activities.

Leasing Commitments

Rentals payable under operating leases are charged against income on a straight line basis over the lease term.

Other Financial Instruments

i. Cash and cash equivalents

Cash and cash equivalents include cash at banks and in hand and short term deposits with a maturity date of 90 days or less.

ii. Investments

Current asset investments include deposits with a maturity date of more than three months.

iii. Debtors and Creditors

Debtors and creditors receivable or payable within one year of the reporting date are carried at their at transaction price. Debtors and creditors that are receivable or payable in more than one year and not subject to a market rate of interest are measured at the present value of the expected future receipts or payment discounted at a market rate of interest.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2024

2	Donations and Legacies		2024	2023	
			£	£	
	Donations		549,888	681,335	
	Lottery Programme		7,242	7,942	
	Legacies Received		628,727	524,625	
			<u>1,185,857</u>	<u>1,213,902</u>	
	Included in the above are restricted donations and legacies of £27,953 (2023: £21,974)				
3	Charitable Activities		2024	2023	
			£	£	
	Grants Received		135,578	261,504	
	Gift Aid Receipts		80,015	88,655	
			<u>215,593</u>	<u>350,159</u>	
	Included in the above are restricted grants of £135,578 (2023: £253,613)				
4	Other Charitable Trading Activities		2024	2023	
			£	£	
	Membership Subscriptions		6,106	7,392	
	Event Fees and Sponsorship		49,943	37,568	
			<u>56,049</u>	<u>44,960</u>	
5	Other income		2024	2023	
			£	£	
	Miscellaneous Income		20,177	20,775	
			<u>20,177</u>	<u>20,775</u>	
6	Fund Raising Costs		2024	2023	
			£	£	
	Caging		79,115	171,167	
	Carriers		79	3,474	
	Computer Charges		2,736	6,034	
	Lettershop and Data		1,745	5,629	
	Postage and Shipping		9,869	38,176	
	Printing		403	11,665	
	Publicity		681	1,163	
	Community Fundraising		21,662	16,005	
	Mail Pack Premiums		15,972	11,220	
	Lottery Costs		3,237	3,570	
	Staff Costs (see Note 11)		130,444	95,745	
	Sweepstake Winners		-	14,800	
			<u>265,718</u>	<u>378,648</u>	
7	Charitable Activities	2024	2024	2024	2024
		Direct	Grants	Support	Total
		Expenditure	Awards	Costs	
		(Note 9)	(Note 8)	(Note 10)	
		£	£	£	£
	Research into the Relief of Diabetes	-	398,189	415,949	814,138
	Raising Public Awareness of Diabetes	712,186	-	-	712,186
		<u>712,186</u>	<u>398,189</u>	<u>415,949</u>	<u>1,526,324</u>
		2023	2023	2023	2023
		Direct	Grants	Support	Total
		Expenditure	Awards	Costs	
		(Note 9)	(Note 8)	(Note 10)	
		£	£	£	£
	Research into the Relief of Diabetes	-	311,343	404,867	716,210
	Raising Public Awareness of Diabetes	760,209	-	-	760,209
		<u>760,209</u>	<u>311,343</u>	<u>404,867</u>	<u>1,476,419</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2024

8 Grant Awards	2024	2023
	£	£
University of Oxford	172,614	126,407
Cardiff University - Non Clinical Fellowship 2021	5,415	64,977
University of East Anglia - Clinical Fellowship 2021	79,003	79,002
University College London/Liverpool University - Non Clinical Fellowship 2022	56,719	66,853
2024 Pump Priming Awards	119,982	0
BHR Ltd	900	0
	<hr/>	<hr/>
	434,633	337,239
Less: Unclaimed grants written back	(36,444)	(25,896)
	<hr/>	<hr/>
	<u>398,189</u>	<u>311,343</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2024

9 Direct Charitable Expenditure	2024	2023
	£	£
Staff Costs (see Note 11)	327,458	371,825
Postage	88,321	156,848
Printing	23,490	68,964
Publicity	0	1,505
Mail Pack Premiums	151,978	44,461
Educational Events	108,780	81,099
Carriers	750	13,766
Grant Costs	404	2,570
Lettershop and Data	11,005	19,171
	<u>712,186</u>	<u>760,209</u>
10 Support Costs	2024	2023
	£	£
Other Staff Costs	1,565	3,278
Professional Costs	22,405	29,097
Management Charge	152,450	156,408
Office Expenses	70,981	72,997
Establishment Expenses	46,156	33,194
Bank Charges and Interest Paid	5,554	5,283
Foreign Exchange (Loss)	2,967	5,853
Depreciation	3,389	3,516
Irrecoverable VAT	66,398	66,292
Amounts paid to Auditors	21,916	22,975
Company Secretarial Fees	513	513
Board Meeting Expenses & Trustee Expenses	10,512	180
Other Overhead Costs	11,143	5,281
	<u>415,949</u>	<u>404,867</u>

Support Costs are allocated to the Charitable expenditure of the charity in proportion to the direct cost of the activity

11 Wages and Salaries	2024	2023
	£	£
Wages and Salaries	410,414	419,169
Social Security Costs	34,206	34,355
Pension Costs	13,282	14,047
	<u>457,902</u>	<u>467,571</u>

The key management personnel of the charity are the Trustees and the CEO. The total amount paid for key management personnel was £74,652 (2023: £71,732).

	2024	2023
	No.	No.
The number of higher paid employees was in the band:		
£60,000 - £70,000	1	1

Pension contributions payable for the above individual was £2,887 (2023: £2,776).

The number of employees at the end of the year was 13 (2023: 13).

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2024

12 Payments to Trustees

No trustee or person with a family or business connection with a trustee, received remuneration in the year, directly or indirectly, from the charity.

Reimbursement to Trustees for Travel and Meeting Costs were £6,551 for 3 trustees (2023: £nil).

13 Surplus of Income over Expenditure

	2024	2023
	£	£
The surplus of income over expenditure is stated after charging:		
Auditors' Remuneration:		
- Audit Fee relating to the Financial Year	23,995	22,900
- In respect of non audit services	1,350	1,250
Operating Lease rentals		
- Plant & Machinery	3,185	3,066
- Other Assets	22,871	16,719
Foreign Exchange Loss	2,967	5,853
Depreciation	<u>3,389</u>	<u>3,516</u>

14 Taxation

The company, being a registered charity, is not liable for corporation tax in respect of its charitable operations for the year.

15 Tangible Fixed Assets for Charity Use

	Office equipment, fixtures and fittings
	£
Cost	
At 1 January 2024	18,956
Additions in Year	-
Disposals in Year	-
At 31 December 2024	<u>18,956</u>
Depreciation	
At 1 January 2024	6,781
Provided in the year	3,389
Eliminated on Disposal	-
At 31 December 2024	<u>10,170</u>
Net Book Value	
At 31 December 2024	<u>8,786</u>
At 31 December 2023	<u>12,175</u>

16 Debtors

	2024	2023
	£	£
Trade Debtors	7,740	68,777
Other Debtors	8,792	5,261
Prepayments and Accrued Income	638,761	734,341
	<u>655,293</u>	<u>808,379</u>

All Debtors except prepayments are financial instruments and are measured at settlement value

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2024

17 Creditors : Amounts falling due within one year	2024	2023
	£	£
Trade Creditors	42,118	44,805
Grants Payable (see below)	363,542	248,706
Accruals and Deferred Income	40,515	82,274
Tax and Social Security	13,562	17,932
Other Creditors	-	-
	<u>459,737</u>	<u>393,717</u>

All Creditors except deferred income are financial instruments and are measured at settlement value

Reconciliation of Grants Payable:

Commitments at 1 January 2024	248,706	210,955
Grants Payable for the Year (see Note 8)	398,189	311,343
Grants Paid during Year	<u>(283,353)</u>	<u>(273,592)</u>
	<u>363,542</u>	<u>248,706</u>

In addition to the amounts committed and accrued noted above, the trustees have also authorised the continuation of certain grants which are subject to the recipient fulfilling certain conditions. The details of these further commitments can be found in Note 21.

18 Deferred Income	2024	2023
	£	£
Deferred Income B/FWD 1st January 2024	5,576	3,360
Released to Income in Year	(5,576)	(3,360)
Income Deferred In Year	<u>8,238</u>	<u>5,576</u>
Deferred Income C/FWD 31st December 2024	<u>8,238</u>	<u>5,576</u>

Deferred Income comprises:

- Newsletter Membership Subscriptions which are renewable annually on a rolling 12 monthly basis
- Community fundraised donations that relate to 2025 events.

19 Reserves	Balance at 1 January 2024	Income in Year	Expenditure in Year	Net Movement in Year	Balance at 31 December 2024
	£	£	£	£	£
Restricted Fund relating to Diabetes Research (grant)	48,710	135,578	(184,288)	(48,710)	-
Restricted Fund relating to The Big Give Christmas Challenge	21,974	7,953	(21,974)	(14,021)	7,953
Restricted Fund relating to Diabetes Research (legacy)	-	20,000	(20,000)	-	-
General Reserve	<u>2,243,742</u>	<u>1,370,496</u>	<u>(1,565,780)</u>	<u>(195,284)</u>	<u>2,048,458</u>
	<u>2,314,426</u>	<u>1,534,027</u>	<u>(1,792,042)</u>	<u>(258,015)</u>	<u>2,056,411</u>
	Balance at 1 January 2023	Income in Year	Expenditure in Year	Net Movement in Year	Balance at 31 December 2023
	£	£	£	£	£
Restricted Fund relating to Diabetes Research	-	253,613	(204,903)	48,710	48,710
Restricted Fund relating to The Big Give Christmas Challenge	8,665	21,974	(8,665)	13,309	21,974
Restricted Fund relating to Diabetes Research (legacy)	-	-	-	-	-
General Reserve	<u>2,501,975</u>	<u>1,383,266</u>	<u>(1,641,499)</u>	<u>(258,233)</u>	<u>2,243,742</u>
	<u>2,510,640</u>	<u>1,658,853</u>	<u>(1,855,067)</u>	<u>(196,214)</u>	<u>2,314,426</u>

During 2024 the charity participated in the Big Give Christmas Challenge 2024 to raise funds for a Pump Priming Research Grant. The funds received in the year was £7,953 (2023 £21,974).

Net Assets by Fund	Unrestricted	Restricted	Total
	£	£	£
Tangible Assets	8,786	-	8,786
Current Assets	2,499,409	7,953	2,507,362
Current Liabilities	<u>(459,737)</u>	<u>-</u>	<u>(459,737)</u>
	<u>2,048,458</u>	<u>7,953</u>	<u>2,056,411</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2024

20 Payments to Connected Charities

Connected Charity	Nature of Relationship	2024		2023		Nature of Transactions
		£ Total transactions in the year	£ Balance at the year end	£ Total transactions in the year	£ Balance at the year end	
Diabetes Research and Wellness Foundation Inc.	1	152,450	-	156,408	-	Management charges in relation to the sharing of articles and staff.

Nature of Relationships

1 Diabetes Research and Wellness Foundation Inc. is completely separate and independent with no legal connections, but Mr. John Alahouzos sits on the Board of Trustees of the associated charity in the United States.

Further details regarding the relationship can be found in the Trustees Report.

21 Financial Commitments

The charity has financial commitments of £277,195 (2023: £404,517) for grants authorised but not accrued as expenditure for the year ended 31 December 2024, as they are subject to the recipient fulfilling certain conditions. The amounts payable are as follow:

	2024 £	2023 £
Payable in 2024	-	382,270
Payable in 2025	153,007	22,247
Payable in 2026	97,840	-
Payable in 2027	26,348	-
	<u>277,195</u>	<u>404,517</u>

22 Operating Leases

At 31st December 2024, the charity has commitments under operating leases as follows:

	2024 £		2023 £	
	Within one Year	Two to Five Years	Within one Year	Two to Five Years
Land and Buildings	24,950	1,982	24,950	26,932
Other Assets	2,586	4,658	2,433	1,852
Total	<u>27,536</u>	<u>6,640</u>	<u>27,383</u>	<u>28,784</u>

The Charity's office lease commenced on 31st January 2024 with a term of three years and a discounted period of the first three months during which the rent payable was £nil.

23 Reconciliation of Net Movement in Funds to Net Cash Flow from Operating Activities

	2024 £	2023 £
Net Movement in Funds - Surplus/(Deficit)	(258,015)	(196,214)
Add back Depreciation Charge	3,389	3,516
Deduct Interest Income shown in Investing Activities	(56,351)	(29,057)
Decrease (Increase) in Debtors	153,086	387,220
Increase (Decrease) in Creditors	66,020	(10,946)
Net Cash used in Operating Activities	<u>(91,871)</u>	<u>164,519</u>

24 Members' Liability

The Foundation is a company limited by guarantee. In the event of winding up, the 5 members' liability is limited to £1.

DIABETES RESEARCH & WELLNESS FOUNDATION

England & Wales - Charity number 1070607

Accounts

Diabetes Research and Wellness Foundation
(A Company Limited by Guarantee)

Charity Number: 1070607
Company Number: 03496304

Financial Statements
For the year ended
31-Dec-23

Diabetes Research and Wellness Foundation

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Diabetes Research & Wellness Foundation

Diabetes Research and Wellness Foundation (DRWF)

(A Company Limited by Guarantee)

REPORT & FINANCIAL STATEMENTS

For the year ended 31 December 2023

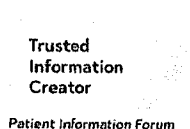
Registered Charity Number: 1070607

Company Number: 03496304



THANK YOU! To everyone who has donated, volunteered their time, or undertaken an activity to support us. Your contribution makes all the difference, meaning that we can carry out awareness, educational programmes and research funding activities to ensure that people with diabetes are *'Staying well until a cure is found...'*

THANK YOU! for being part of a powerful community who are intent on investing in a brighter future for all people with diabetes
#StrongerTogether #UnitedThroughDiabetes



Message from Co-Founder & Chairman Mike Gretschel



I am Mike Gretschel a co-founder and Chairman of DRWF.

It has been over fifty years since my dear wife called me at the office crying that “our son has type 1 diabetes and there is no cure”. I tried to calm her, but my words were not enough. That was just the beginning. Ten years later, our eldest daughter was also diagnosed with type 1. And now my son’s son has type 1 too.

My wife and I have devoted much of our free time, with family and friends, raising awareness and the monies necessary to support vital research. We have been fighting the diabetes battle in the hope of a cure for all these years. We live in hope!

As DRWF turned 25 years old in 2023, we paused to reflect on the diabetes landscape. Twenty-five years doesn’t seem so very long, but the number of people living with diabetes in the UK has more than doubled in that time.

We have worked tirelessly in that time to raise awareness of the different types of diabetes and provide people with the practical information and tools to support their self-management. As a small team of just 14, we are supported by editorial and research advisory boards, as well as other experts in the field of diabetes and related health, who help us to deliver activities that demonstrate value for money, and most importantly benefit for the diabetes community. The one thing that binds us all together, is the fact that we are all striving for the same thing. Together, we are ***United through Diabetes***.

Over 25 years, we have supported some of the most innovative research in the UK and around the world. The DRWF Islet Isolation Facility at the Churchill Hospital, Oxford is pivotal to the UK Islet Transplant Programme, a clinical treatment that supports a small number of people with type 1 diabetes through transplant of insulin-producing islet cells. Whilst the clinical element of this treatment is funded by the NHS, and the results for many are impressive, there are limitations that hamper long-term results and prevent more people from benefiting.

To address some of these issues, we funded a xenotransplant programme in the US called the Spring Point Project, which was focused on providing an alternative, sustainable supply of islets for human transplant using pigs. Additionally, we have supported a plethora of stem cell-based research projects in the hope of finding ways to develop and sustain the islet transplant programme.

All the while, providing funds for early career researchers and proof of concept awards which are demonstrating impact for the diabetes community. Some of these examples you can read about in our report or on our website.

Whilst we have achieved a lot in our 25 years, there is still so much more to do, and we could not do it without YOU! We are so grateful for the longstanding support that we get from donors, sponsors, and partners and are rightly proud of what we have brought to the table, together, for people with diabetes. From the bottom of my heart...

Thank you!

Mike Gretschel
March 2024

Report of the trustees for the year ended 31st December 2023

The trustees are pleased to present their report and message from the Chairman together with audited financial statements for the year ended 31st December 2023.

The financial statements comply with the Charities Act 2011; the Companies Act 2006; the Memorandum and Articles of Association and are prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102 Charities SORP) (effective from 1st January 2015).

Our purpose, aims and activities

The objects of the charity are:

- To assist in the relief of persons with diabetes and any similar or related diseases or conditions
- To raise public awareness about diabetes and any similar or related diseases or conditions, their incidence, causes, treatment, avoidance, and relief

The focus of our work

As we entered the charity's 25th anniversary year, we took time to reflect on the diabetes landscape and the charity's impact over that time.

Since inception in 1998, the number of people diagnosed with diabetes has more than doubled. Whilst there have been some incredible advances in treatment and technology in more recent times, which improve quality of life and reduce the risk of complications, the number of people living with diabetes continues to rise at an alarming rate. With more than 5 million people now living with diabetes in the UK, our work to provide self-management support, is more important than ever.

Whilst recognising 25 years of raising awareness, providing award-winning Diabetes Wellness support programmes, and funding the research that we hope will one day find a cure, we used this milestone anniversary to reflect, rethink and redouble our efforts to ensure that people with diabetes are *'staying well until a cure is found...'*

Our focus in 2023 was to ensure that we offered Wellness programme activities that met need and delivered impactful outcomes whilst maximising opportunity for DRWF to engage in partnerships that delivered revenue and benefit for all parties.

To this end, we –

- Reviewed our Research Strategy to ensure that the awards we offer remain attractive, financially sound, fit for purpose and demonstrate impact for the researcher and the diabetes community.
- Re-organised our Diabetes Wellness event programme to deliver **United Through Diabetes**, a wonderful concept that brings the diabetes community together with healthcare professionals, public health officials, third sector organisations and industry partners. All of whom are invested and intent on creating a brighter future for people with diabetes.
- Restructured our supporter database to ensure that we are taking a personalised approach to stewardship of beneficiaries and donors to improve recruitment and retention rates.
- Re-organised internally to form a Supporter Services Team which helped to create cost efficiencies by enabling us to bring a costly outsourced service in-house.
- Worked hard to diversify fundraising activities to reduce reliance on single income streams – an ongoing process but one which helps to ensure that the charity has sustainable income sources and fit for the future.

Demonstrating public benefit

The trustees confirm that they have referred to the general guidance set out by Charity Commission on public benefit. The trustees are satisfied that the Charity's activities meet the principles of public benefit, defined as providing an identifiable benefit/s to the public, or section of the public, and know of no detriment or harm that may be caused as a result of these activities, which are clearly set out throughout this report.

Volunteers

As a small team delivering numerous activities, we rely on the support of volunteers who participate by helping with administrative tasks in our office; delivering diabetes awareness and information materials; undertake user involvement exercises to help steer and develop our programme activities; support our educational events and community fundraising programme or sit on one of our expert panels for research or information review. The number of volunteers fluctuates each year but is crucial to helping us spread the word about the work we do and to support local and national community initiatives. In addition to our Trustees, we have an Editorial Advisory Board and a Research Advisory Board. These are panels of diabetes clinicians and scientists, and other relevant professionals and lay people, all of whom offer their time and expertise voluntarily to ensure that we meet the high standards required of us through our Association of Medical Research Charities (AMRC) accreditation and our commitment to producing clinically evidenced health and social care information. We wholeheartedly thank all of our volunteers for their time, expertise and commitment which helps us raise awareness to the charity, maximise income and maintain high standards of work.

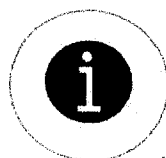
Measuring Impact

We use a mixed methods approach to monitor and evaluate our activities in order to ensure that they remain true to purpose and achieve desired outcomes. Stakeholders and beneficiaries are involved in these evaluation processes to ensure the continued relevance, quality, accessibility, and effectiveness of activities. We also undertake independent evaluation with specialist partners for specific projects where impartial opinion and/or additional expertise is required.

We keep people with diabetes at the heart of what we do. Beneficiaries and supporters are involved in numerous ways to ensure that our support and resources are relevant, accessible and meet needs, helping to steer our research priorities and programme activities.

Activities & Achievements in 2023 – 25th Anniversary Year

Awareness, information & support



INFORMATION REACH: Whilst recognising that a large percentage of existing supporters and beneficiaries engage through offline channels, it was important that we diversify our reach of a wider demographic of the diabetes community in 2023.

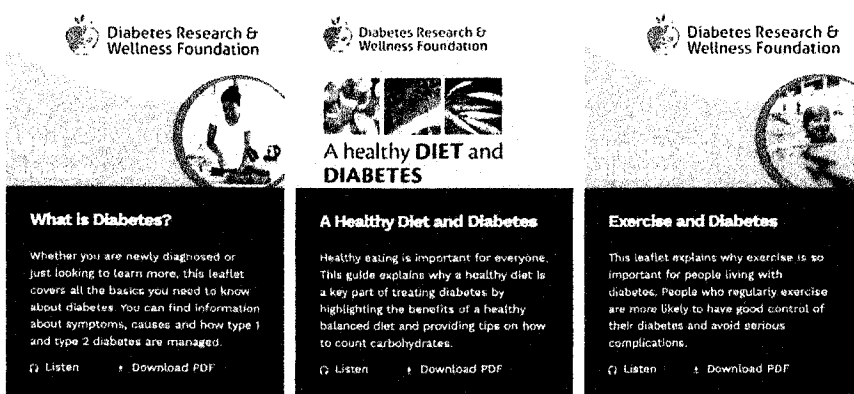
We distributed 192,181 campaign appeals in 2023 to existing supporters through direct mail and reached 29,762 prospective beneficiaries and supporters with new awareness campaigns. These appeals are dual purpose raising awareness and providing information about the charity's activities and funding, whilst seeking financial support. They also act as a stewardship tool, helping us to stay connected with long-standing supporters of the charity. Each campaign provides health information targeted at beneficiaries who could act on the information, either in a preventative way (type 2 diabetes), or to inform and support those living with diabetes (all types), in their self-management of the condition. We had an average campaign response rate of 11% across 3 streams resulting in over 24,818 responses from across the country. We know from experience that it is likely that many more opened and read the appeal but chose not to make direct contact with us at that time. Historically, we

have seen numbers of people respond to communications that have been distributed many months, or even years, before as they have held onto the information provided for future reference.



WEBSITE: Our online reach was significantly reduced in 2022 following a spike of engagement with our content in 2020/21 due to the pandemic. There were numerous reasons for this, and our goal was to remedy this situation in 2023, which we did most successfully. Visits to our website increased by 58% from 173,992 to 275,000 visits in the year. Traffic was consistently higher throughout the year instigated by news content and social media campaigns in support of our activities.

Updates to our patient information resources started in 2023 with rebranding of our leaflets. These resources are available from our website in pdf and audio format, providing choice of accessibility. We also offer to provide enlarged print versions of all health and social care resources. There were 8671 downloads of patient information leaflets in the year, with 'What is Diabetes?', 'A healthy Diet and Diabetes', and 'Exercise and Diabetes', being the most popular. Additionally, 6905 leaflets were distributed in hard copy during the year to diabetes and related healthcare professionals who order the resources in bulk for dissemination via their clinics.

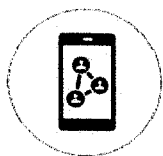


The news section of our website is at the top of the list in generating traffic, followed closely by the 'Living with Diabetes' section which hosts our information resources. There was also a significant interest in our Wellness Programme and specifically our 25th Anniversary event 'United Through Diabetes'. These three sections alone, accounted for almost 68,000 unique visits in the year.

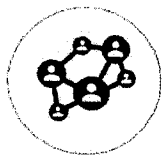
The post-event 'United Through Diabetes' Digital Hub and subpages, received 2,499 views from 1,550 individual users, who visited more than once. This content was designed to disseminate the workshops and sessions delivered through our Wellness event to a wider audience who access information online.



LIVING WITH DIABETES PODCASTS & VIDEOS: We continued to produce our Living with Diabetes podcasts in 2023 which provides another channel through which to access interesting and educational diabetes content. Whilst these channels are still very much a work in progress, we have had reasonably good engagement during the year with 3,800 visits an increase of 30% on 2022. We aim to develop these channels during 2024.



SOCIAL MEDIA CHANNELS: Social media channels are a great way to reach a wider audience, quickly, with messages about our activities. Whilst we use multiple social media channels, we get greatest engagement in posts about our community activities via Facebook. Combined Facebook and Instagram reach was up around 15% in 2023 over 2022 with an equivalent increase in spend in the year. These channels also drive traffic to our website which was almost 60% up on 2022.



DIABETES WELLNESS NETWORK: We made changes to the way in which we produce and distribute our Diabetes Wellness Newsletter in the year. This is a subscriber activity which has historically been sent out monthly but due to rising production and postage costs, we increased pagination and changed distribution to quarterly. We have had good feedback on the additional content contained within the publication and we have not seen a downward trend in volume of renewals, other than those anticipated each year. Importantly, without decreasing value to our supporters and beneficiaries, we were able to reduce the volume of hard copy newsletters circulated in the year to 52,600 which helped to reduce our costs by around 41%. The intention is to make this newsletter available electronically going forward, but through survey of existing subscribers, this audience wish to continue receiving their printed magazine. This is somewhat due to the demographic profile of subscriber within this programme, and we expect this to change as we reach a wider section of the diabetes community who are familiar and at ease with digital channels.



PATIENT INFORMATION FORUM (PiF) TICK: As members of the Patient Information Forum, we applied for PiF Tick accreditation on our adult health and social care resources. Following the robust review process operated by PiF we gained the PiF Tick kite mark which is displayed on our information resources. This demonstrates that we are a 'trusted information creator' which is an important way in which people seeking our help can recognise that our information is relevant, up-to-date, clinically referenced and peer reviewed.

Quality in Care Diabetes – award winning Diabetes Wellness events:

Self-management is the cornerstone of diabetes care, with good self-management skills essential to achieve positive health outcomes and reduce the risk of associated health complications.



For the past 23 years, DRWF has been providing an annual programme of Diabetes Wellness events that are focused on enabling people to access relevant, evidence-based health information throughout the lifetime of their long-term condition. Whilst providing a wide range of diabetes and related-health workshops, interactive sessions and talks, the core principle on which this programme is built is 'peer support.'

Peer support is a valuable resource for people living with diabetes, their family, friends and carers and our Wellness events provide an opportunity to make new contacts and build new relationships through mutual acceptance and understanding, in a safe and inclusive environment.

Our events inform, inspire and empower people to take ownership of and have more control over their health and wellbeing. The diverse learning programme on offer helps people to develop knowledge, skills and confidence to address issues that are affecting their health and diabetes self-management. This is especially beneficial to people who are lonely or isolated and don't have an immediate support network around them.

We believe that this holistic approach supports all round wellbeing and increases learning capacity and resilience, and it is wonderful to see people return to our events year-on-year.

In our 25th anniversary year, our focus was on scaling our award-winning Wellness Day to reach a wider and more diverse diabetes audience, increasing footfall and incorporating 'research' into the programme. This gave us the

opportunity to showcase the research that the charity has funded over the last 25 years and demonstrate the impact that this work has had for the diabetes community.

This new event was an opportunity to demonstrate that together, we are *'United Through Diabetes'*.



United Through Diabetes – the BIG Diabetes Wellness Day

On Saturday 16th September, we hosted the inaugural **United Through Diabetes** event which saw 443 delegates in attendance. This event was launched to mark the charity's 25th anniversary year to provide a one-stop shop of 'everything diabetes'. The event was supported by Industry partners,

and prominent speakers, such as the deputy clinical diabetes lead for England, Professor Partha Kar. The event reached a wide and diverse segment of the diabetes community, including families of children with type 1 diabetes, people with type 1, type 2 and other types of diabetes, as well as people working in diabetes and related healthcare. Just one of the highlights of the event was the opportunity for people to engage with DRWF funded researchers, past and present, to understand how the work we have invested in over the past 25 years has delivered impact/benefit for people with diabetes. Feedback on the quality and variety of workshops and talks on offer was extremely positive and the UTD Digital Hub extended our reach post-event to enable people who couldn't attend to benefit from the programme content.



Diabetes Wellness Family Camp

Family Camp took place on 18th August at Whitemoor Lakes in Staffordshire. We received 34 family applications (117 individuals). Whilst our target was to accommodate 60 individuals, we were able to offer places to 86 people from 24 families. There is a robust triage process in place for Family Camp given that many children are living with complex health needs beyond type 1 diabetes. All those that did not meet the criteria for

"We stepped out of our comfort zone, and it brought us together."

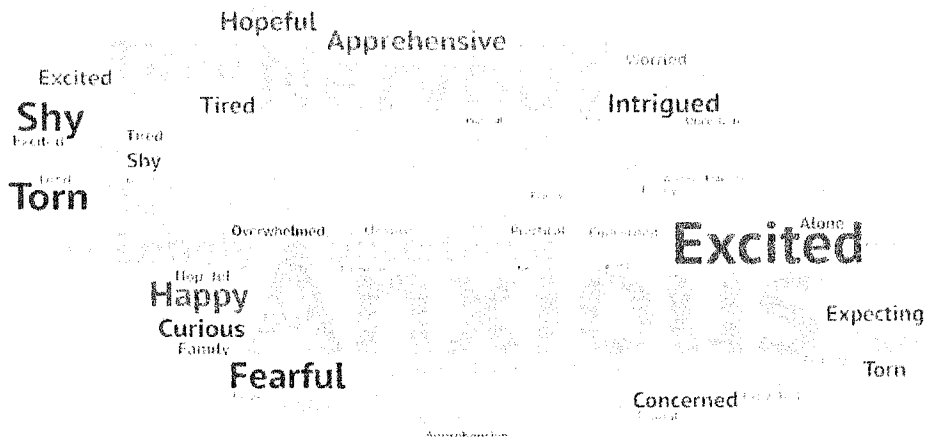
"Opportunity to talk to other children/parents who have type 1 diabetes, time as a family."

Family Camp were offered places at our Autumn virtual **Camp in the Cloud**.

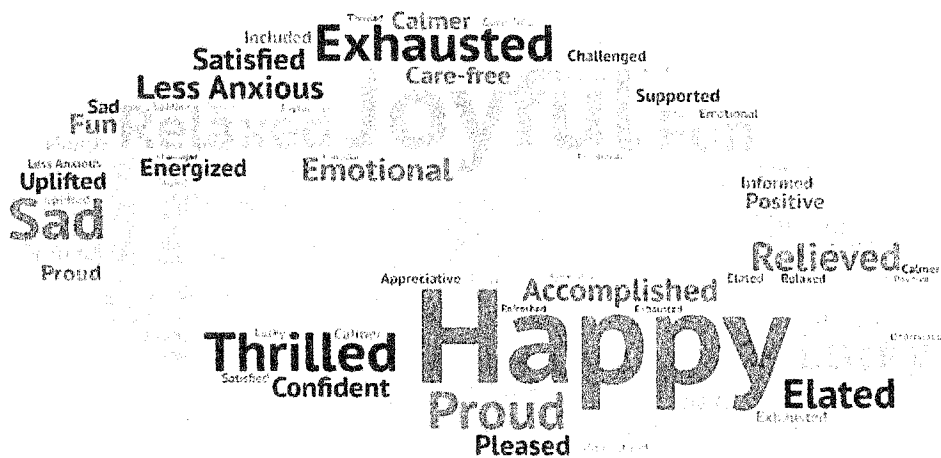
The aim of Camp is to bring families of children with Type 1 diabetes together in a fun, safe and welcoming environment. The emphasis is on providing fun for the children and a little respite for the parents/guardians and perhaps most importantly, providing a platform for meeting families to share similar experiences of life with diabetes so as to build relationships based on mutual understanding and acceptance.

"Meeting new people. Sharing experiences."

Feelings before attending Camp...



Feelings after attending Camp...



Virtual Camp in the Cloud

Virtual Camp was introduced during the pandemic, and due to its success and accessibility, we have continued to offer this fun, online ‘Camp’.

We had anticipated that we could accommodate between 120 – 150 online attendees and were overwhelmed with the initial response, which saw 55 families (198 individuals) register their interest. The nature of an online event increases attrition rates so we expected drop out on the day. Forty-Seven (47) families went on to complete a full application for 164 individuals, all of whom were offered places; 32 families (111 individuals) attended on the day, meaning 32% of families did not attend. This is a similar

“We have absolutely loved our first ever diabetes camp! Thank you so much for having us! The activities were perfectly suited for our girls - we have a 5-year age gap (they are 7 and 12) but they both joined in everything and absolutely loved it all! The dance party was a lot of fun, unfortunately my eldest went into hypo just before but she made up for it later on it. Many thanks to everyone involved in organising and running today, very much appreciated and so lovely to meet other families with T1D”

percentage to previous years. Non-attendance can happen for several reasons, poor health, unable to travel etc., and so families who can't attend for clear reasons are offered places at the next CiTC.

A full programme of online activities was offered, with a box of arts and crafts, and other materials, supplied beforehand to make the day as interactive and fun as possible. DRWF hosted a 'Talking Type1' session for the families where they could raise important questions with our guest speaker, Heather Holland, DSN. Fun was had during the day with the DRWF Dance for Diabetes session which all attendees participated in, led by dance teacher Megan. The day concluded with a closing ceremony and games.



Diabetes Wellness Morning - Hartlepool

The Diabetes Wellness Morning held in Hartlepool was a new take on the event that the charity has been providing for the last 11 years in the Northeast. Hosted on behalf of DRWF by longtime volunteer, Hayley Hakansson, the event was held to recognise World Diabetes Day and mark the 25th anniversary of the charity.

The Wellness Morning was held at the National Museum of the Royal Navy and was attended by 30 people. The aim of the morning was to support people living with diabetes, their family, and carers, to provide practical information, tools and tips to improve self-management and understanding of the condition whilst providing an opportunity to spend time with diabetes healthcare professionals.

The event was organised with the support of the Hartlepool Diabetes Support Group and colleagues at the North Tees and Hartlepool NHS Foundation Trust. Attendees enjoyed a busy morning featuring presentations on diabetes and a question-and-answer session from guest Diabetes Specialist Nurses Julie Sinclair and Patricia Lowther.

Hayley said: "Everyone attending the event said how warm and welcoming the Wellness Morning was and they felt they had learned something new, in addition to refreshing their knowledge of helpful tips for living with diabetes."

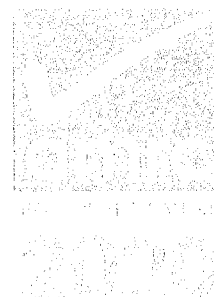
In the build-up to the event Hayley promoted the Wellness Morning with an appearance on the Radio Hartlepool breakfast show, talking to presenter Jason Anderson about her voluntary roles in her local community and encouraging people with diabetes to attend the Diabetes Wellness Morning.



Research Funding Programme

Each year, we issue Calls for Applications in respect of our 3-year Clinical, Non-Clinical and Pump Priming awards.

DRWF Fellowships provide the necessary funding to support Early Career Researchers (ECR) which is vitally important to ensure that clinical and scientific talent stays and develops within the diabetes medical research community. ECR's represent a young and diverse research population, and provide a constant flow of talent, new ideas and new skills. Some of them will go on to be the senior diabetes researchers of the future, so with very few funding awards available to this vital community, the DRWF awards are lucrative and well positioned to attract the best and brightest young researchers.



Our Pump Priming stream is a proof-of concept funding channel, which aims to produce translational pilot study data that goes on to leverage higher value, longer term funding from other organisations to take the research conducted to the next level.

The DRWF annual funding round is offered through open competition, and as such, enables funded researchers to access support for both indirect and direct costs of research via the Charity Research Support Fund (CRSF) and NIHR Clinical Research Networks AcoRD agreement.

Institutional and discretionary awards are available when funds allow. Contract funding of key personnel within the DRWF Human Islet Isolation Facility at the Churchill Hospital, Oxford is subject to proposal and reviewed on a multi-year rolling contract basis.

DRWF is a member of the Association of Medical Research Charities (AMRC), a membership body representing the leading medical and health research charities who deliver high-quality research that saves and improves lives. Working with member charities and partners, AMRC aims to support voluntary sector effectiveness and advance medical research by developing best practice, providing information and guidance, improving public dialogue about research and science, and influencing government.

As a member, we subscribe to AMRC's criteria for the use of peer review for allocating funding and support AMRC position statements on the payment of indirect costs in universities and the use of animals in medical research which seeks to replace, refine and reduce the use of animals (3Rs) in research.

We operate a rigorous peer review process by which our Research Advisory Board (RAB), clinical and scientific experts in the field of diabetes and related health, assess applications and reports to ensure that only the highest quality and most effective research, carried out using good or best practice methodologies, receives DRWF funding.



Claire Levy – living with T2 Diabetes

“Funding research into new treatments and new technologies has transformed the lives of people living with all forms of diabetes, including myself as someone with Type 2 Diabetes. DRWF has funded some amazing research over the last 24 years, made possible by the very generous donations of our supporters, which has really advanced our knowledge of the different types of diabetes and how to manage and treat it. We will only find a cure through research and your gift could make all the difference.”

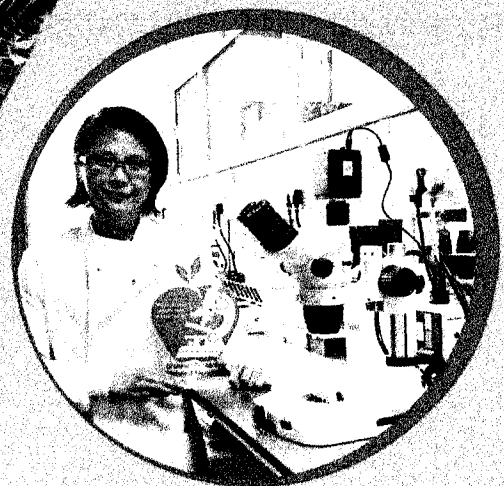
Research Advisory Board Strategy Day

The charity's Research Advisory Board (RAB) met in March to review current funding streams and consider whether awards are delivering value for money, for DRWF, the researcher/institution, and perhaps most importantly for the diabetes community. Past and currently funded researchers were invited to present to the RAB from across Fellowship, Pump Priming and Contract Funding streams. The RAB were impressed by the results that have been seen in all strands of funding whether that be Pump Priming funding collecting translational pilot study data which has gone on to prove a new concept and leveraged additional funding for a wider body of work to be undertaken, or career progression which has helped develop and retain expertise in the diabetes research arena, whilst leveraging higher value multi-year funding for further work. The Strategy Day resulted in a recommendation to the charity's Board of Trustees to uplift Fellowship awards to ensure that they remain attractive and competitive with increasing salaries and consumable costs. This was approved by the Board and will be offered with the next call for applications for Fellowship grants. The discussions and information collected at the Strategy Day enabled the update and publication of the charity's Research Strategy for 2024-26.



Diabetes Research & Wellness Foundation

Research Strategy 2024-26



amrc

Pump Priming Awards

Calls for applications were issued in September 2023 for Pump Priming Awards to be taken up in 2024. A total of 20 applications were received from which six research awards were made with a total value of £119,982.

The DRWF research programme is designed to support bright young researchers, as well as established institutions, as they strive to make the kind of life-changing breakthrough our diabetes community is hoping for.

Pump Priming awards considered 'proof of concept' and are either Clinical or Non-Clinical in nature. Successful projects are funded for up to two year's duration, to the value of £20,000. No-cost extensions to the term may be considered.



Nottingham Trent University
 Dr Adaikala Antonysunil
 Nottingham Trent University
 £20,000

Title: *Integrated omics to identify the epitranscriptomic interactions between methyl modifications of mature miRNAs and transcriptome in placenta due to micronutrient (B12) deficiency promoting diabetes in pregnancy*

Lay Summary: Obesity in pregnancy has adverse effects on both mother and baby and predisposes them to heart diseases later in life. Women of child-bearing age, pregnant, lactating and women adhering to vegan diet are at much higher risk of B12 deficiency, and their offspring are at elevated risk of low birth weight and preterm birth. This led to significant interest in understanding the maternal diet during pregnancy.



My research showed that pregnant women with low B12 have higher sugar and fat levels in the blood and develop more body fat, which are signs of higher risk for heart diseases in later life. However, the causal reason is unknown.

B12 is one of the key micronutrients turning the biological switch on/off for the methylation process, which is responsible for efficient functioning of small RNA molecules called microRNA that control genes and cellular process.

Here I propose that when B12 levels are deficient, the methyl groups normally added to the microRNA are reduced. This results in dysfunctional microRNAs which could profoundly change gene/protein products and contribute to disease development. The aim is to characterise the methylation sites and identify the gene targets of microRNAs at the tissue level caused by low B12 using advanced technologies.

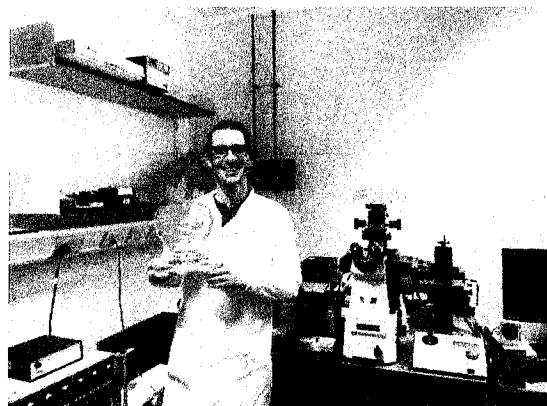
This approach will identify new pathways affected and detect new targets that could enable tailored therapies in specific patient subgroups to treat diabetes. Benefits are anticipated to enhance the potential for the individualized health care and management of patients with diabetes during pregnancy.



Dr Steven Millership
Imperial College London £20,000

Title: *Repurposing epidrugs for functional enhancement of human pancreatic beta cells*

Lay Summary: Insulin-secreting beta cells of the pancreas are what are destroyed or become dysfunctional in diabetes. To restore this functionality, methods have previously included to transplant isolated islets from donor patients, however this has been met with problems of survival of lifelong immune suppression for the patient, and the survival of the implanted islets themselves.



Several research groups have made pioneering progress over the last decade by using stem cells originally from the patient, that have a capacity to become any cell in the body and generating beta cell “like” cells using a cocktail of various compounds over multiple stages of beta cell development in the laboratory. What these cells lack however is their “incomplete” levels of maturity to become a fully functional beta cell, as measured by the amount of insulin produced and their capacity to secrete it into the bloodstream.

We hypothesise that the missing element are pathways that regulates the expression of key beta cell genes (and therefore beta cell maturation) in the body, known as epigenetic pathways. We will screen a large number of commercially available compounds that target these epigenetic pathways known as “epidrugs” and assess their ability to enhance human beta cell maturation in a cellular model system.

Our goal is to interrogate the role that these novel epigenetic pathways have on beta cell functional maturation and ultimately to assess their ability to enhance the functionality of stem cell-derived beta cells prior to transplantation into patients with diabetes.



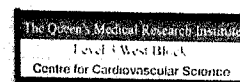
Dr Elizabeth Haythorne
Edinburgh University £20,000

Title: *Does partial inhibition of glucokinase protect human pancreatic beta-cells against glucotoxicity and glucolipototoxicity?*

Lay Summary: All forms of diabetes are characterised by a chronically elevated level of blood glucose (chronic hyperglycaemia, or high blood glucose), which results from insufficient secretion of insulin from the β -cells of the pancreas. Type 2 diabetes is a progressive disease in which elevated blood glucose gradually damages the β -cell so that they release even less insulin, which leads to higher blood glucose levels and therefore further β -cell damage.

At time of type 2 diabetes diagnosis, it is often found that an individual’s capacity to produce adequate amounts of insulin to maintain healthy blood glucose levels has declined by as much as 50%. This inexorable decline in β -cell function leads to devastating secondary complications, such as heart, eye and kidney disease.

Although the current therapeutic strategies available for type 2 diabetes can reduce blood glucose either by enhancing insulin release (sulphonylureas, GLP-1 receptor agonists) or by increasing glucose clearance from the blood (insulin, metformin), none of these therapies provide any long-term benefit regarding maintaining β -cell health and insulin secretion.



In people without diabetes, a rise in blood glucose causes glucose from the blood to be taken up by the β -cell where it is broken down by metabolism to produce a molecule called adenosine triphosphate (ATP), which is needed to stimulate insulin release. In contrast, when blood glucose is chronically elevated, too much glucose is metabolised by the β -cell and eventually causes “blockages” in the metabolic pathway.

These “blockages” mean that glucose can no longer be metabolised to produce enough ATP to cause insulin secretion. Thus, this proposal will investigate if the β -cell can be protected against the detrimental effects of chronic hyperglycaemia by lowering the amount of glucose which is metabolised by the cell down to the same level as which occurs in people without diabetes. This novel approach will prioritise maintaining, or restoring, β -cell health and insulin secretion which will greatly reduce the risk of developing debilitating secondary complications.

James Russ-Silby
University of Exeter £20,000



Title: *Gene discovery in transient neonatal diabetes to gain new Insights into beta-cell development and function*

Lay Summary: Pancreatic beta cells make insulin, which controls blood sugar levels. When beta cells cannot make enough insulin, it leads to diabetes, a chronic and common condition affecting millions worldwide.

The aim of our project is to provide a deeper understanding of how beta cells function and develop. We will study individuals with rare types of diabetes caused by a single genetic defect. This helps us to better understand how beta-cells work by allowing us to look at what happens when a single pathway is broken, offering a window into the broader functioning of beta cells.

The type of diabetes we will investigate is transient neonatal diabetes mellitus (TNDM). TNDM is diagnosed in babies who are unable to produce enough insulin during their development before birth and in early life. Uniquely, these children temporarily regain the ability to produce enough insulin in childhood but are then re-diagnosed with diabetes later, usually in adolescence or early adulthood.

Studying these babies, therefore, allows us to gain new information on the function and development of beta-cells through time. We will look for new genetic defects causing TNDM to find the key genes responsible for the disease. We will use a powerful genetic technique called whole genome sequencing. This allows us to read all of the person's DNA, meaning we can comprehensively look for the defects that cause the diabetes in people with TNDM. We have already ruled out all the known causes and selected individuals who have the strongest features of TNDM, meaning we are very likely to find new genes.

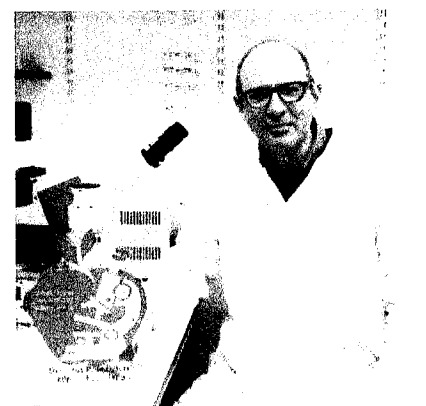
Our findings will provide key new information on the pathways that govern beta cell function and development. This is the crucial first step towards identifying new drug targets for diabetes, bringing us a step closer to better management and treatment of this condition.



Dr Lazaros Foukas
University College London
£19,997

Title: *Novel molecular determinants of brown adipose tissue inflammation in obesity and glucose dysmetabolism*

Lay Summary: Poor nutrition and population ageing are the main contributors to the current global epidemic of obesity and type 2 diabetes. A pathological process underlying the development of these conditions is chronic inflammation of the adipose tissue.



There are two main types of adipose tissue: white adipose tissue that stores energy in the form of fat, and brown adipose tissue that contains a unique type of mitochondria (cellular organelles that produce energy), which can dissipate the energy from fat and glucose as heat. Inflammation affects both the white adipose tissue and the brown adipose tissue.

Our research has shown that dietary fatty acids activate innate immune signalling pathways associated with inflammation and it aims to demonstrate that certain innate immune pathway components can be manipulated in a manner that promotes the energy dissipating activity of the brown adipose tissue.

This demonstration would provide proof-of-principle that pharmacological interventions altering the activity of innate immune inflammatory pathways can be used therapeutically to promote energy expenditure in a way that reduces body weight, improves insulin sensitivity and prevents or ameliorates type 2 diabetes.

Dr Kleopatra Alexiadou
Imperial College London
£19,985



Title: *Semaglutide improves atherosclerosis via an anti-inflammatory action independent of weight loss*

Lay Summary: The majority of people with type 2 diabetes live also with overweight or obesity. One third of people living with diabetes are affected by cardiovascular disease, namely heart attacks and strokes. This is due to build up of atherosclerosis plaques (accumulations of fats, cholesterol and immune cells) in artery walls. These plaques can cause arteries to narrow, blocking the blood flow and leading to a lack of blood supply e.g. to the heart (causing heart attacks) or to the brain (causing strokes).

Semaglutide is a medication based on gut hormones and it was initially approved for the treatment of diabetes. Semaglutide is now also licensed for weight loss.

Some studies have shown beneficial effects for the cardiovascular system although the exact mechanism is not fully understood. Inflammation, where the immune system is activated to get rid of irritants and infection, is a normal process that exists to get rid of these irritants. Low grade inflammation is also associated with obesity, type 2 diabetes and atherosclerosis.

My hypothesis is that semaglutide has a beneficial cardiovascular profile via reducing inflammation and thereby slowing down atherosclerosis and that this is a direct effect of semaglutide and not merely a consequence of weight loss.



Islet Cell Research & Transplant

DRWF has made a considerable contribution to the funding of islet cell research and transplant in the UK and around the world. The DRWF Human Islet Isolation Facility at Churchill Hospital, Oxford plays a pivotal role in providing islets for research and transplant as part of a national treatment programme, the clinical element of which is funded by the NHS.

Three personnel are funded within the facility (around 30% of facility staff):

- Lab Manager
- Deputy Facility Manager (post doc researcher)
- Islet Transplant Administrator

We maintained our contract funding awards at the DRWF Islet Isolation Facility, Churchill Hospital, Oxford. These

posts are funded for between 3-5 years, giving continuity and stability to the individual post holders and wider facility/teams. This is vitally important to ensure sustainability of expertise within the research group, given that this facility works on rotation to isolate islet cells for human transplant, as well as supply islets for research across the UK and Europe. The Deputy Facility Manager post became vacant in the early part of 2023 with the new post-holder recruited from 1st December.

Impact report from the Director of the DRWF Islet Isolation Facility Churchill Hospital, Oxford by Professor Paul Johnson

2023 saw pancreas donor rates in the UK return to similar numbers to pre-COVID levels, and many of the COVID-precautions being relaxed. Our hospital maintained strict mask-wearing for part of the year and our team has adapted well to the benefits of hybrid working with online working for many of our meetings having become the norm. As observed in many scientific institutions currently, retention of junior staff was a challenge, but we were fortunate to maintain an enthusiastic and able workforce for our clinical isolation and research programmes. In December 2023, we were delighted to appoint Ahmad Kobiita as our new Deputy-Facility Manager. Ahmad came to us from Zurich, where he gained considerable experience as a post-doctoral scientist in islet biology.

This report provides a summary of our islet allo-transplant, islet auto-transplant, and islets-for-research programmes, as well as providing an update of our involvement with the Vertex Stem-Cell derived islet transplant trials.

Islet Allo-transplantation

Our allo-isolation programme had a successful year overall. We maintained our established alternate weekly rota with King's in London for the first 5 months of the year, but unfortunately from June 2023, the King's lab had to temporarily close due to a contamination issue and remained closed for the rest of the year. This unexpected closure increased the pressure on Oxford and Edinburgh Islet Isolation Facilities. However, between January 2023 and December 2023, the DRWF Islet Isolation Facility performed 19 clinical islet isolations for allogenic use, 10 of which met the UK agreed release criteria for transplantation. This is a conversion rate of 53% (international average conversion is about 30%). During 2023, we established a new satellite beta-cell replacement clinic in Leicester which has been productive for islet referrals. This covers the East Midlands catchment area and complements our long-established clinic in Birmingham which covers the West Midlands. We are looking to establish a similar satellite arrangement at the Royal Free in London. We continued to promote strongly the importance of an individual patient-tailored approach to beta-cell replacement, offering an integrated clinical service comprising state-of-the-art insulin technology, whole pancreas transplantation, and islet transplantation. This enables every patient to be offered the very best treatment available for them.

Islet Auto-transplantation

Our NHS-commissioned total pancreatectomy with islet auto-transplantation (TPIAT) programme for chronic pancreatitis is well established now and we have achieved excellent outcomes. Indeed, we presented our optimised TPIAT islet isolation protocol at the International Pancreas and Islet Transplant Association (IPITA) Congress in San Diego in October 2023. We aim to undertake one TPIAT per month. However, the recurrent industrial action during the year impacted service delivery. In 2023 therefore, the DRWF Islet Isolation Facility performed 4 clinical islet isolations for autologous use. All 4 of these islet preparations were transplanted. We are now in the process of applying for NHS-commissioning for TPIAT in children, something that our expertise in Oxford makes us well placed to provide for the UK.

Research Islet Provision

The DRWF Isolation Facility in Oxford continues to be the UK Islet Resource Centre providing human islets for research to a network of type 1 and type 2 diabetes researchers. In 2023, our team distributed 2.2 million islet equivalents (IEQ - the international standardised way of counting islets) from 11 islet preparations. The ***'Increasing the Number of Organs Available for Research'*** (INOAR) initiative is now established, enabling donor organs from donors with diabetes to be retrieved routinely from across the UK for research purposes. The Oxford DRWF Islet Isolation team continues to lead the 'Islet Platform' for the related Quality in Organ Donation (QUOD) with responsibility for isolating and distributing islets for research from these rare pancreases. During the year, the team has had a substantial number of research outputs, including 6 presentations at the 2023 IPITA Congress.

Vertex Stem-Cell Derived Islet Trials

In September 2023, Oxford was opened as the first site in the UK (and one of only a handful in Europe) for the Vertex 880 and Vertex 264 stem-cell derived islet transplant trials. The initial international data for these trials is encouraging, and this technology could be a game-changer for people with type 1 diabetes. The key role that the Oxford DRWF Isolation Facility team are playing in these and other 'state of the art' studies, demonstrates that we remain at the leading edge of the islet isolation and islet transplantation fields internationally.

Finally, I would like to reiterate my immense gratitude to the DRWF Trustees for their ongoing generosity in funding the Oxford Programme. I can reconfirm my team's full commitment to maintaining our successful collaboration and partnership with DRWF for many years to come, and to ensure that we will continue to take every opportunity to promote the DRWF mission in all that we do.

Professor Paul Johnson

Professor of Paediatric Surgery, University of Oxford

Director of the Oxford Islet Transplant Program & DRWF Human Islet Isolation Facility

Research impact

Each year, our funded researchers deliver interim and annual reports to demonstrate that their work aligns with the award criteria and progress updates are provided throughout the term of funding. These reports are reviewed by the Research Advisory Board, from which we publish articles in our quarterly Diabetes Wellness News to update our beneficiaries and supporters on the impact that our funding is having for people with diabetes.

Here are two such examples –

Unlocking the mystery of Down’s syndrome and diabetes

Professor Kathleen Gillespie, Professor of Molecular Medicine, University of Bristol, was awarded an £18,000 Pump Priming Grant for the study *Does a leaky gut increase the risk of diabetes in children with Down’s syndrome?*

While most people are familiar with Down’s syndrome, many are unaware that children with the condition are four times more likely to develop type 1 diabetes. In addition, when they do, it tends to strike earlier in their lives.

People with Down’s syndrome have an additional copy of chromosome 21; however, from available previous research it has not been clear why this causes them to be at such a heightened risk for developing diabetes.



A DRWF-funded study of 116 babies with Down’s syndrome, led by Professor Kathleen Gillespie in Bristol, set out to explore the connection.

For parents and guardians of children with Down’s syndrome, the findings could offer invaluable insights.

Key findings of the study

- **Presence of specific antibodies**

The research found that antibodies to bovine serum albumin (BSA), a food antigen, were more prevalent in children with Down’s syndrome. Simply put, these antibodies might indicate an increased gut permeability or “leaky gut,” which some theories suggest might be related to autoimmunity and the development of type 1 diabetes.

- **Genetic predisposition**

Interestingly, children with Down’s syndrome and diabetes possess fewer genetic risk factors for type 1 diabetes compared to age-matched children without Down’s syndrome. This challenges our understanding of the usual genetic predispositions for diabetes.

- **Increased autoimmunity to insulin**

Children with Down’s syndrome exhibited a heightened autoimmunity to insulin, another indicator of their increased risk of type 1 diabetes.

The research has reinforced the understanding that children with Down’s syndrome are more susceptible to type 1 diabetes and other autoimmune conditions like thyroid autoimmunity. It has further deepened the knowledge on the unique ways this vulnerability manifests in Down’s syndrome compared to the general population.

Why are these findings important?

Knowing that children with Down’s syndrome have a higher propensity for type 1 diabetes provides an avenue for early intervention and tailored healthcare. Beyond that, these findings might give clues about the broader mechanics of diabetes and autoimmunity.

Implications and future directions

For decades, autoimmunity in children with Down's syndrome was a niche topic. However, over the past five years, the scientific community's interest in understanding the unique health profile of Down's syndrome has surged.

There are suggestions that children with Down's syndrome have a heightened response to interferons – proteins that play a critical role in our immune reactions.

This heightened response might be the key to their increased risk of autoimmunity. Moreover, this could also explain why some children with Down's syndrome develop autoimmune reactions while others do not.

The research journey was not without its challenges. The study faced a temporary halt due to Covid-19.

However, this time was productively used for genetic analysis.

The researchers also encountered difficulties with certain laboratory tests, particularly the fatty acid binding protein 3 test. However, they are committed to overcoming these challenges and reattempting the test.

Looking forward, the research team is gearing up to answer a critical question:

Why do some Down's syndrome children develop autoimmunity while others do not?

This is at the heart of an upcoming grant application and is set to become a focal point for future studies.

Conclusion

The puzzle of Down's syndrome and diabetes is complex, but we are starting to fit the pieces together. This study has shed light on some critical aspects of why these children are at a higher risk for type 1 diabetes.

As research progresses, we are not only understanding Down's syndrome better but also getting deeper insights into the enigma that is diabetes.

For children with Down's syndrome and their families, this knowledge offers hope and a path to better, more-informed care.

Could our genes hold the key to future diabetes treatments?

Dr Sarah Finer, Clinical Senior Lecturer in Diabetes and Honorary Consultant in Diabetes, Blizard Institute, Queen Mary University of London, was awarded a £19,771 Pump Priming Grant for the study *Uncovering novel, rare genetic causes of type 2 diabetes in people of Bangladeshi and Pakistani heritage participating in East London Genes and Health.*

Diabetes affects millions of people worldwide and its prevalence is particularly high among certain communities, such as the British Bangladeshi and Pakistani populations.

While most are familiar with type 2 diabetes, the underlying causes and the intricate science behind it can be complex.

Dr Finer's recent DRWF-funded study delved deep into the question: what if our genes could offer clues to understanding, preventing and even treating this condition?



The *Genes and Health* study

The *Genes and Health* study is a large-scale research project focusing on British Bangladeshi and Pakistani volunteers. Historically, these communities have been underrepresented in research studies.

The primary goals of this study are twofold:

- **Address the health inequalities faced by these communities, such as higher rates of type 2 diabetes and heart disease.**
- **Increase the representation of these communities in scientific research.**

With more than 55,000 volunteers already participating, the study aims to gather insights from 100,000 individuals in total.

The role of “knockout genes”

Imagine genes as tiny instruction manuals within our cells. Sometimes, a gene might have a “misprint” or error, causing it not to work properly.

These are called “knockout genes”. By studying individuals with these genes, researchers have been trying to understand how these rare genetic changes can provide insights into how our body functions and why certain diseases develop.

One of the significant findings from the study revolves around a gene called MC3R (melanocortin 3 receptor). This gene plays a crucial role in how our brain controls our body’s development, puberty and growth during childhood.

One volunteer with a “knocked out” MC3R gene had delayed puberty, obesity, type 2 diabetes, and was shorter in height. This discovery could help understand the causes of delayed puberty and the potential roles of this gene in obesity as well as diabetes.

The potential for future treatments

The study findings are not just academic. By understanding the role of these genes in diabetes and metabolism, researchers hope to identify potential targets for future drug treatments. For example, if a specific gene is found to play a significant role in diabetes, drugs could be developed to target that gene’s function, potentially offering a new treatment avenue.

The study is currently exploring other genes related to diabetes and obesity.

Researchers hope their investigations will reveal more genetic causes of these conditions and possibly identify new targets for future drug treatments.

Challenges and implications

Like all scientific endeavours, the study faced its share of challenges. From changes in scientific collaboration to the global Covid-19 pandemic, the research team had to adapt and pivot.

However, despite these challenges, the study’s implications are vast:

- **Scientific discovery**

The study has uncovered new areas of biology, providing insights into how our bodies work and the potential mechanisms behind diseases like diabetes.

- **Drug development**

The findings could lead to advances in drug development, offering hope for more effective treatments in the future.

- **Broadening research**

The success of the *Genes and Health* study has paved the way for other research projects, expanding our understanding of various diseases and conditions.

The bigger picture

The **Genes and Health** study is a testament to the power of genetic research. By understanding our genes, we can gain invaluable insights into diseases like diabetes, offering hope for better treatments and a healthier future.

For the British Bangladeshi and Pakistani communities, this research represents a step towards addressing health inequalities and ensuring that medical advancements benefit everyone equitably.

Dr Sarah Finer, principal investigator of the study, said: “The generous Pump Priming Award made to me by DRWF at a critical juncture of my career has been invaluable and highly successful.

“I am very grateful to the DRWF team and those supporting its work financially for making this award possible.”

Global consensus statement endorsement

In 2023, we were asked to endorse a Global Consensus Statement **‘Towards standardization of person-reported outcomes (PRO’s) in diabetes research’**. This project was to address the lack of standardization/harmonization of PRO’s, limiting the comparability of findings across studies in a space where too often, patient’s perspectives of their lived experience with diabetes are lacking as primary or even secondary outcomes in clinical trials.

We considered this to be an interesting and important piece of work given that clinical outcomes in diabetes are intimately tied to how the person living with diabetes reacts to and implements treatment recommendations.

Whilst DRWF did not fund or participate in the data review project itself, we hosted a Type 2 diabetes patient panel to ensure that people with lived experience were given the opportunity to contribute to the narrative around the importance of person reported experiential and clinical outcomes, and therefore the global consensus statement itself. The panel consisted of: Professor Richard Holt (clinician) – *‘Importance of PRO’s in clinical care and optimizing outcomes’*; Dr Mark Evans (researcher) – *‘The importance of PRO’s in clinical research studies which are integral to design and evaluation to ensure relevance to people with diabetes’*; Claire Levy (T2D) & Chris Edwards (T2D) – *‘How lived experience and psychosocial health impacts on day-to-day self-management of diabetes’*.

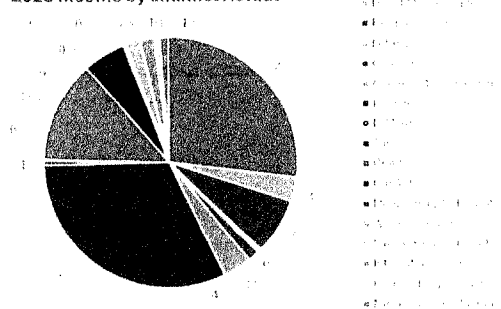
How we raised our money in 2023

Our approach to fundraising – The Trustees are aware of their responsibility and accountability to ensure that the charity fundraises legally, responsibly, and effectively.

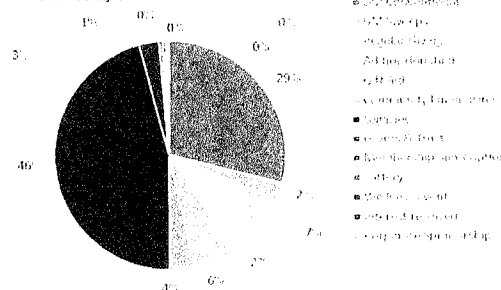
Our plan for 2023 was to maintain focus on building resilience and sustainability for the future through succession planning, diversification of income streams and delivery of purposeful programs that continue to meet the ever-changing needs of people with diabetes.

Fundraising continued to be challenging in 2023 and this affected our actual income in the year which was £1,658,853 a shortfall of 6% on our budget expectation of £1,760,147 and 6% lower than income received in FYE 2022 at £1,765,756. This was largely related to the reduced volume of direct mail campaigns that we distributed in the year, which we anticipated would be higher, resulting in a lower response rate/value of donations alongside a reduction in legacy income in the year.

2023 Income by channel Actual



2022 Income by channel Actual



Corporate Partnerships:

We do not endorse products, but we will support initiatives that increase awareness to DRWF and our activities, and where there is an appropriate message, product, or service for people with diabetes. To this end, we have explored meaningful partnership and corporate sponsorship opportunities, where there is a synergy in mission, vision, and values. Any potential partnership is assessed for feasibility, compatibility with our own objectives, and risk to ensure there is no detrimental effect to our reputation or fundraising potential. Robust risk assessment supports our desire to only engage in suitable and best value partnerships. Detailed discussion and negotiation ensure that the aims of both parties are complementary and mutually beneficial. This maintains transparency and integrity in all partnerships.

Professional Fundraisers:

Whilst we use the services of fundraising consultants, as and when needed, to advise on some of our activities, we did not work with a professional fundraiser during the year. Commercial participation agreements are in place where necessary.

YOU make ALL the difference!

As a charity that exists almost entirely, at this time, on voluntary donations and fundraised income, we are always humbled and heartened by the support that we receive.

Here is a snapshot of some of the community activities that took place in 2023 that helped raise awareness of diabetes, the charity and its services, as well as vital funds to support all our charitable activities -



Kathrine takes on daring abseil challenge...

A daring mother has supported her family member's living with diabetes by completing a fundraising abseil in support of DRWF.

Kathrine was inspired to become an enthusiastic fundraiser for DRWF following recent diagnoses of type 1 diabetes in her immediate family. She recently took part in a fundraising abseil challenge and her efforts raised £1,878.13 in support of DRWF on the charity's activities.

Six years ago, Kathrine's husband John Wallis was diagnosed with type 2 diabetes at the age of 50. This type of diabetes is usually influenced by lifestyle, particularly in later life as increased weight can result in lower levels of insulin production.



It was not until their 10 year-old son Jonty was diagnosed with type 1 diabetes a year ago that specialists thought perhaps he had a late onset of the auto-immune form of the condition, which proved to be the case.

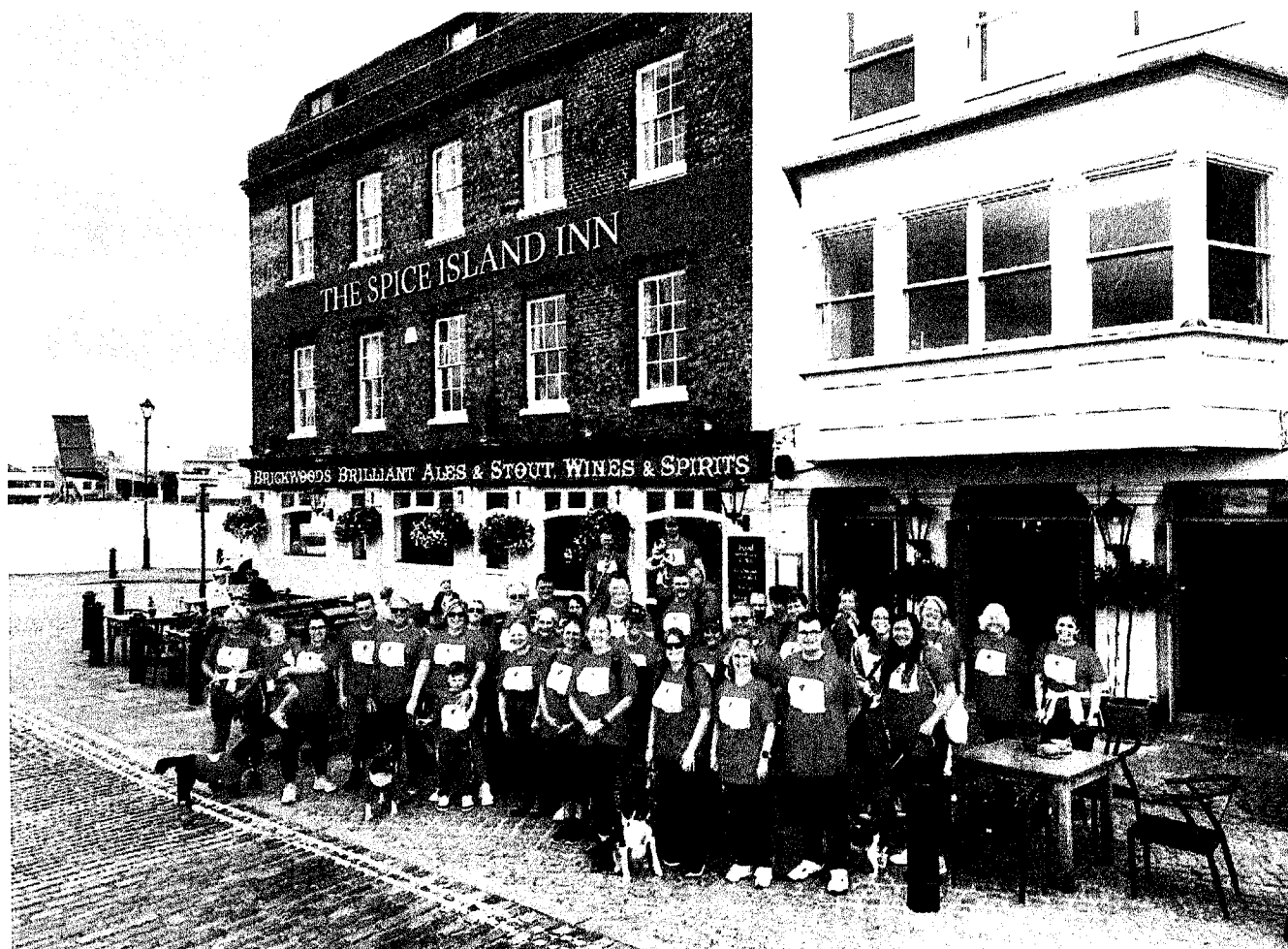
Kathrine who spotted the symptoms a year ago took him to the family GP after checking his blood sugars. It came as a big surprise when her husband's diagnosis was changed to type 1 diabetes. She said: "I had been looking after John's diabetes through diet, however this change in diagnosis was quite a shock.

"John and Jonty really support each other in their diabetes journey, especially as they both use the latest continuous glucose monitoring (CGM) technology to help their control."

Kathrine has earned something of a "daredevil" identity after embracing more white-knuckle sponsorship activities, including a skydive as well as her recent 85m (278 feet) abseil down the Portsmouth Spinnaker Tower.

Kathrine said: "I was just pleased to be able to use these challenges to help DRWF fund more research into type 1 and type 2 diabetes and tools to help people to stay as well as possible when living with all forms of diabetes."

‘Diabetes Dawdle II’ Sponsored Walk in Portsmouth



On Saturday 28th September 2023, following a successful inaugural walk a year prior, thirty-eight passionate and enthusiastic fundraisers arrived at The Spice Island Inn, Old Portsmouth, to walk the coast in Portsmouth.

Over the next few hours, walkers from all ages (... and 5 dogs!) made their way through historic Portsmouth walking the circular 4 or 7 mile route. The route was designed to take in sights such as the Iconic Spinnaker Tower, Nelsons Column, and the beautiful Royal Garrison Church, which was built around 1212. There was even a designated halfway point, to grab refreshments or skim some stones into the sea – something which was enjoyed by the younger members of the walk!

The event was a huge success with all walkers finishing in good form and collectively raising a fabulous £2,723 for DRWF through sponsorship and donations.

'Dance for Diabetes' takes Portsmouth by storm with 2,839 children dancing for a cure!

Dance for Diabetes returned for its second year as the relationship between DRWF, Hampshire based afterschool provider 'Funkidz Dance' and schools across Hampshire continued to strengthen.

On Friday 26th May 2023, ten schools consisting of 2,839 participating children took part in DRWF's annual danceathon fundraiser prior to Easter Half Term. The children spent around 15 minutes per week (for 5 weeks) learning the choreographed dance to a popular song during school hours.



The event was a ground shaking success, raising £16,685 in total. This event has a fundraising split 60/40% between DRWF and participating schools. This format is appreciated by the schools that take part providing their children an opportunity to fundraise in support of a local charity, whilst raising some much-needed income for the schools themselves. DRWF collected £10,011 with the remaining £6,674 shared between the participating schools. Great fun was had by all.



Dance for Diabetes will host a performance week in 2024, giving participating schools more flexibility around their academic timetable.

The date has been confirmed as Monday 20th – Friday 24th May 2024. More information can be found at www.dancefor.org.uk/news-and-activities/.



Fundraising Regulator: We are a levy-paying member of the Fundraising Regulator and subscribe to the associated fundraising codes of practice. The charity suppresses individual supporter records against the Mailing Preference Service, Telephone Preference Service, and the Fundraising Preference Service, which helps to ensure that we do not approach individuals who have expressly requested that we do not contact them. During the year, we were notified of 18 FPS requests, which are suppressed from all contact, 22% lower than received in 2022.

Complaints: The charity has a published complaints procedure, available on its website, and endeavours to respond to enquiries and complaints within the stated timeframe. Most contacts tend to be a request to opt-out of charity communications by existing supporters and we monitor the basis on which people request this i.e., content of appeal, volume of contact; type of contact; method of contact to inform our campaigns with the aim of reducing any perception of unreasonable intrusion, persistent approach or undue pressure to support. We didn't receive any complaints about our fundraising practices during the year.

GDPR and Data Protection: We are committed to protecting the personal information and privacy of individuals that we engage with and comply with relevant legislation and codes of practice, whilst carrying out our essential work of raising awareness of diabetes, providing information and support, and raising funds. Our privacy policy, published at drwf.org.uk sets out how we capture, process, manage and retain personal information.

Financial Review

Principal income streams in the year were direct mail campaigns; regular giving via direct debit; legacy income and gift aid associated with voluntary donations.

Management accounts are prepared on a quarterly basis and forecasting reviewed mid-way through the year.

Income:

Total income was £1,658,853. This was 6% below budgeted income (£1,760,147) and 6% less than income received in 2022 (£1,765,756). Voluntary donations including gift aid receipts at £777,930 was 10.5% less than income received in 2022 (£868,766). Legacy, In Memory & Trust income, having been budgeted for on a 3-year average was £524,625 which was 36% lower than received in 2022 (£820,553), as expected given the volume and value of legacies received and accounted for in the previous year.

Expenditure:

Total expenditure was £1,855,067 which was 2% below budget (£1,899,576), and 9% less than expenditure in 2022 (£2,030,351).

At year-end we had a deficit of £196,214. This was 41% more than we had anticipated when budgeting for the year where we had predicted a deficit of £139,156. Whilst expenditure in the year was under budget, the deficit was impacted quite significantly by the reduction in voluntary donations and fundraised income received in the year.

Direct charitable expenditure was 80p for every £1 spent (81p in 2022). We believe this demonstrates our commitment to spending income on delivering the services for which we exist to provide.

Government Grants

The charity received £122,458 from the Government's Covid Medical Research Charity Support Fund (BEIS) to support existing funding commitments of identified early career researchers.

Investment Policy

Under the Memorandum and Articles of Association, the charity has the power to invest in any way the trustees see fit. The trustees are aware and mindful of the Charity Commission CC14 guidance on investments. The trustees,

to minimise risk and having regard to the liquidity requirements of the charity, and to the reserves policy, have historically operated a policy of keeping available funds in a higher interest-bearing deposit account seeking to achieve a rate of deposit interest which matches or exceeds inflation as measured by the retail prices index.

The trustees have regularly reviewed opportunities to increase investment return from short-term, easy access, options bearing in mind the desire to ensure that we can react quickly to appropriate requests for additional research support as they arise.

The trustees are also conscious of on-going cash-flow requirements during a challenging time where historical fundraising methods are raising less income and where new methods of fundraising are being tested at higher cost.

All things considered, the trustees believe it appropriate to continue to explore investment opportunities as they present themselves, with a view to maximising return on its deposits.

In 2023, the Board considered opportunities to deposit surplus cash into short-term, higher interest-bearing bank accounts to maximise investment return. Multiple deposits were made into the CAF Charity Deposit platform to the maximum value of £85,000 over a 3–4-month term during the year.

Reserves Policy

To safeguard the need for sufficient funds to cover on going management, administration, and support costs, as well as respond to further grant requests that might arise, the Board aims to maintain unrestricted, free reserves at a level that equals 3-6 months of operating and charitable expenditures (£476,056 - £952,112).

At 31st December 2023, the charity held free reserves of £2,231,566 (unrestricted funds less tangible fixed assets). This equates to approximately 14 months of anticipated 2024 operating and charitable expenditures. Whilst this is significantly more than the policy level, the trustees are committed to strengthening existing income streams whilst diversifying fundraising activities to reduce reliance on single sources. It is accepted that this will take investment in activities where the accuracy of predicting response rates, in terms of volume or value of gift, will be more challenging in the first instance. Therefore, these additional reserves will enable us to explore avenues of diversification of income streams, and to develop the charity's objective activities for future sustainability.

Going concern

The trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements having considered known commitments, forecasts and projections and possible pressures on income generation. After making these considerations, the trustees conclude that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing the financial statements.

Our focus in 2024 and beyond

Our focus for 2024 is very much on ensuring that we have the necessary funds to build a resilient and sustainable organisation that can meet the ongoing, and ever-changing, needs of our beneficiaries.

Whilst we recognise that the charity sector is a challenging space, with ongoing impact from the cost-of-living crisis and recession, things do appear to be improving a little and this gives us hope.

We are intent on reversing the negative impact that both the pandemic and the economic climate have had on our ability to diversify and develop our fundraising portfolio and deliver Wellness programmes that meet the needs of the diabetes community and the healthcare professionals that look after them.

To do this effectively, we plan to –

- Review current operations, processes and procedures to ensure that we are maximising opportunity to create sustainable income streams and beneficiary services.
- Develop our Wellness Programme activities to ensure that they meet need and deliver impactful outcomes whilst maximising opportunity for DRWF to engage in partnerships that deliver revenue and benefit for all parties.
- Continue to identify ways in which to create cost-efficiencies and effect organisational change within the charity to make for an organisation that can navigate the ongoing challenges and is robust and fit for the future.

Reference and Administrative Details

Charity Number:	1070607
Company number:	03496304
Registered Office:	Building 1000 Langstone Park Havant, Hampshire PO9 1SA Tel: 023 92 637808 Website: drwf.org.uk
Trustees & Directors:	Mr W. Michael Gretschel (Chairman) Mr John Alahouzos Mrs Valerie Hussey Mr Steve Jones Dr Shivani Misra (retired February 2024) Mr Christian Gretschel Mr Adrian Durelli (elected March 2024)
Chief Executive:	Mrs Sarah Tutton (Bone)

Advisers

Bankers:	Barclays Bank Plc 1 Churchill Place London E14 5HP
Solicitors:	Blake Morgan LLP New Kings Court Tollgate Chandlers Ford Eastleigh SO53 3LG
Secretary:	Blake Morgan Company Secretary Services
Auditors:	Moore Kingston Smith LLP 6 th Floor, 9 Appold Street London EC2A 2AP

Structure, Governance & Management

Governing Document - The Diabetes Research and Wellness Foundation, also known as DRWF, is a registered charitable company (Registered Charity No. 1070607 and Company No 03496304) limited by guarantee and governed by its Memorandum and Articles of Association dated 15 January 1998 and amended by special resolutions passed on 15th June 1998, 2nd December 2001 and 24th April 2005.

Recruitment & Appointment of Trustees - The charity trustees are also the directors of the company for the purposes of company law.

As dictated by the charity's Articles of Association, directors are appointed by the Company Members. Any person desiring to be admitted to the membership of the company is required to apply in writing. No person shall be admitted until approved by resolution passed in accordance with the Articles of Association by the existing members, who hold absolute discretion as to the admission of any person.

The Trustees of the charity, being mindful that the board should offer a diversity of skills to fulfil statutory and fiduciary duties, are open to recommendations for new board members.

The business and medical/health related skills within the existing board member pool are supported by personal experience of diabetes, which assists the board in ensuring that objective activities meet beneficiary need.

Additionally, the board is supported in its decision-making processes by a Research Advisory Board, which has an independent Chairman. The RAB members review applications and make recommendation for research funding awards. An Editorial Advisory Board provides support to the provision of health and social care information. Both boards are made up of clinicians, scientists and other 'experts' in the field of diabetes and related health and strengthen the services that the charity offers its beneficiaries.

All board members are subject to 'conflict of interest' policies and processes.

Trustee Induction and Training – Newly elected Trustees receive an Induction Pack that outlines the role and responsibilities of the Trustee, along with a history of the structure and purpose of the charity.

The pack includes a copy of the governing document and contact details of all board members. There is also an outline of the Chairman of the Board's role and responsibilities along with details of the executive officer taking responsibility for the daily management of the charity. Trustees are required to comply with the eligibility requirements set out by Charity Commission and to review and update an annual Register of Interests.

Trustees are kept up to date with various governance publications and notices from appropriate professional advisory memberships. Additionally, trustees might be advised of appropriate governance courses that they may benefit from attending to ensure diversity and continuity of knowledge and skills within the Board.

Newly elected trustees are invited to attend a Review Meeting with the chair, after an agreed time lapse, in order to feedback their first impressions and address any concerns. Trustees are actively encouraged to participate in the charity's outreach programme of educational events.

Organisation - The strategic direction and policy of the charity is the responsibility of the Board of Trustees. During 2023 six trustees served on the Board, from a variety of professional backgrounds relevant to the work of the charity. The Board meets routinely throughout the year post-quarter end to review activities and management accounts. Additional meetings are organised as required. Historically, the Board would meet at least once per year in person however this changed during the Covid-19 pandemic due to travel restrictions, with all meetings being held virtually. This has continued during 2023 and there were no meetings in-person during the year.

The Chief Executive carries out the daily operations of the charity and is responsible to the Board of Trustees.

Connected & Related Parties – DRWF co-operates on several intellectual matters including sharing articles and reports with the Diabetes Research and Wellness Foundation Inc., a 501C3 Not for Profit Company operating in the United States; Association pour la recherche sur le diabete (A-rd) in France; Insamlingsstiftelsen Diabetes Wellness Network Sverige (Sweden); Diabetes Wellness Suomi (Finland) and Diabetes Wellness Norge (Norway). These organisations are completely autonomous and independent with no legal connections.

- Mr. W. Michael Gretschel is the Chairman of the Board of Trustees of the Diabetes Research and Wellness Foundation and is the volunteer President of the Diabetes Research and Wellness Foundation Inc (USA) but does not serve on its board of directors. He is also a Board member of A-rd (France), DWNS (Sweden), DWS (Finland) and DWN (Norway).
- Mr. John Alahouzos is the Chairman of the Diabetes Research and Wellness Foundation Inc (USA) and serves on the Board of Trustees of the Diabetes Research and Wellness Foundation (UK). He is also Chairman of the Board of A-rd (France), and a Board member of DWNS (Sweden), DWS (Finland) and DWN (Norway).
- Mrs. Valerie Hussey serves on the Board of Trustees of Diabetes Research & Wellness Foundation (UK) and is also an 'alternate member' on the Board of DWNS (Sweden).
- Mr. Christian Gretschel is a Board member of Diabetes Research & Wellness Foundation (UK) and also serves on the Board of A-rd (France)
- The Chief Executive of the Diabetes Research & Wellness Foundation, Sarah Tutton, serves on the Board of DWN (Norway).

Links between these independent organisations, has proved invaluable to the charity in helping to strengthen it's international presence, for the purpose of supporting diabetes research programmes and global awareness activities.

A Register of Interests for Board Members and Key Management Personnel is maintained and reviewed on an annual basis.

Remuneration Policy for senior staff - The Trustees, who are also the directors, and the Chief Executive Officer comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity on a day-to-day basis.

All trustees give their time freely and no trustee received remuneration in the year. Details of trustees' expenses are disclosed in note 13 to the accounts. Related party transactions are disclosed in note 21 to the accounts.

The salary of all staff, including the chief executive officer, is reviewed annually and normally increased in accordance with average earnings. In view of the nature of the charity, its size and structure, the trustees undertake a benchmarking exercise, using online research/tools, comparing the charity's salaries against pay levels offered for similar roles within other charities and companies.

The benchmark is the mid-point of the range paid for these similar roles with consideration given to workload, level of responsibility, anticipated rate of inflation and other published research on third sector rates of pay.

The charity considers that its remuneration policy –

- Ensures delivery of the charity's objectives
- Attracts and retains a motivated workforce with the skills and expertise necessary to ensure organisational effectiveness.
- Is equitable and coherent across the organisation.
- Reflects the purposes, aims and values of the charity.
- Ensures that pay levels and pay increases are appropriate in the context of the interests of our beneficiaries.

Risk Management – The Trustees have examined the major strategic, business, reputational and operational risks that the charity faces. This involves identifying specific risks; assessing their likelihood of occurrence and potential impact; determining what steps could be taken to mitigate those risks and delegating responsibility to key staff for overseeing management of the associated controls. The risk register is reviewed annually to ensure the adequacy of internal control mechanisms.

Our approach to risk assessment and management is evidenced across the organisation and throughout our activities. The risk register was circulated to the Trustees for review and scoring in July and resulting risks discussed at a Board meeting held on 19th October.

The Board considers that the major risks facing the charity at present, are –

- Fundraising and dependency on single income streams
- Reserves
- Competition for support
- Business continuity
- IT risk/loss of data
- Program development including activities outside of objectives

The past few years have been incredibly challenging for all charities, with clear impact on fundraising activities and attrition in channels that, historically, have been very solid in their return. The charity is focused on diversifying activities to reduce reliance on unpredictable or single income streams.

The fundraising landscape is highly competitive at present, with more charities than ever applying for grant funding; individual donors reviewing their financial commitments because of the rising cost of living; and legacy income, which is an entirely unpredictable income source, contributing a high percentage of overall income.

We are mindful that fluctuations in income could impact on our ability to deliver direct charitable activities, and so remain agile in our approach to protect our aims and objectives. We are monitoring income and expenditure very closely and endeavour to scale back expenditure in line with income generation where possible.

Remote working through the pandemic, as well as diversifying our fundraising activities and provision of beneficiary programmes through multiple channels, has heightened our sensitivity to the impact that a cyber breach could have on the charity. We rely on public trust and generosity to support our activities, so are mindful of the financial and reputational risk a cyber breach could have.

We believe that we have strong IT systems in place that are fit for purpose but are aware of the ever changing digital/cyber landscape that we are operating in, as well as third sector reports of the volume of cyber breaches that take place in the UK charity sector. Cyber awareness information and training is routinely shared across the organisation as we expand the channels through which we engage with the diabetes community and the wider public.

New projects/activities are reviewed to ensure that they are consistent with our objectives, powers and terms of restricted funding (if applicable), but we are more aware of this more than ever as we develop the charities activities to ensure that we remain relevant to the diabetes community and its needs.

The trustees consider that the Charity has robust internal procedures, systems and processes and believe that risk assessment is embedded throughout the organisation.

Trustees' responsibilities in relation to the financial statements – The trustees, who are also directors of Diabetes Research and Wellness Foundation for the purposes of company law, are responsible for preparing the trustees' annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice.)

Company law requires trustees to prepare financial statements for each financial year that give a true and fair view of the state of the affairs of the charitable company and of the outgoing resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charities SORP.
- make judgements and estimates that are reasonable and prudent.
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

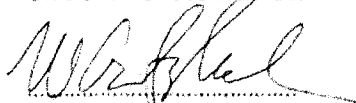
In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

Auditors – Moore Kingston Smith LLP have indicated their willingness to continue in office and are deemed to be reappointed in accordance with section 487(2) of the Companies Act 2006.

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

On Behalf of the Trustees



Michael Gretschel Chairman

12/06/2024

Dated

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF DIABETES RESEARCH AND WELLNESS FOUNDATION

Opinion

We have audited the financial statements of Diabetes Research and Wellness Foundation ('the company') for the year ended 31 December 2023 which comprise the Statement of Financial Activities, the Summary Income and Expenditure Account, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 'The Financial Reporting Standard Applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2023 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, 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 trustees' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. 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. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements themselves. 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 2006

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

- the information given in the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' annual report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' annual report.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit. or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the trustees' annual report and from preparing a strategic report.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 33, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees 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 trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company 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 (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs (UK) 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 purposes of expressing an opinion on the effectiveness of the charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' 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 charitable company'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 charitable company 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.

Explanation as to what extent the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below.

The objectives of our audit in respect of fraud, are; to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charitable company.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity SORP, and UK financial reporting standards as issued by the Financial Reporting Council.
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.
- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of

management and those charged with governance and obtaining additional corroborative evidence as required.

There are inherent limitations in the audit procedures described above. We are less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the company'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 any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Moore Kingston Smith LLP

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Samir Chandoo (Senior Statutory Auditor)
for and on behalf of Moore Kingston Smith LLP, Statutory Auditor

Date: 18 June 2024

6th Floor
9 Appold Street
London
EC2A 2AP

Diabetes Research and Wellness Foundation
Statement of Financial Activities (Incorporating the Summary Income and Expenditure Account)
For the year ended 31 December 2023

		Unrestricted Funds £	Restricted Funds £	2023 TOTAL £	Unrestricted Funds £	Restricted Funds £	2022 TOTAL £
Income	Note						
Donations and Legacies	2	1,191,928	21,974	1,213,902	1,536,268	8,665	1,544,933
Charitable Activities	3	96,546	253,613	350,159	149,478	43,319	192,797
Other Charitable Trading Activities	4	44,960	-	44,960	12,865	-	12,865
Investments		29,057	-	29,057	2,704	-	2,704
Income from Charitable Activities		<u>1,362,491</u>	<u>275,587</u>	<u>1,638,078</u>	<u>1,701,315</u>	<u>51,984</u>	<u>1,753,299</u>
Other Income	5	20,775	-	20,775	12,457	-	12,457
Total Income		<u><u>1,383,266</u></u>	<u><u>275,587</u></u>	<u><u>1,658,853</u></u>	<u><u>1,713,772</u></u>	<u><u>51,984</u></u>	<u><u>1,765,756</u></u>
Expenditure On:							
Raising Funds	6	378,648	-	378,648	390,936	-	390,936
Charitable Activities	7	1,262,851	213,568	1,476,419	1,572,554	66,861	1,639,415
Other		-	-	-	-	-	-
		<u>1,641,499</u>	<u>213,568</u>	<u>1,855,067</u>	<u>1,963,490</u>	<u>66,861</u>	<u>2,030,351</u>
Net Income		<u>(258,233)</u>	<u>62,019</u>	<u>(196,214)</u>	<u>(249,718)</u>	<u>(14,877)</u>	<u>(264,595)</u>
Transfer between Funds	20	-	-	-	-	-	-
Net Movement in Funds		<u>(258,233)</u>	<u>62,019</u>	<u>(196,214)</u>	<u>(249,718)</u>	<u>(14,877)</u>	<u>(264,595)</u>
Total Funds brought forward		2,501,975	8,665	2,510,640	2,751,693	23,542	2,775,235
Total funds carried forward at 31 December 2023		<u><u>2,243,742</u></u>	<u><u>70,684</u></u>	<u><u>2,314,426</u></u>	<u><u>2,501,975</u></u>	<u><u>8,665</u></u>	<u><u>2,510,640</u></u>

There were no recognised gains or losses other than the deficit reported for the financial year. All activities in the year relate to continuing operations.


The accompanying notes form an integral part of these financial statements.

Diabetes Research and Wellness Foundation
Balance Sheet
As at 31 December 2023

	Note	2023 £	2023 £	2022 £	2022 £
Fixed Assets					
Tangible Assets	16		12,175		5,841
Current Assets					
Debtors	17	808,379		1,205,599	
Investments		424,258		-	
Cash at bank and in hand		<u>1,463,331</u>		<u>1,703,863</u>	
		2,695,968		2,909,462	
Creditors : Amounts falling due within one year	18	<u>(393,717)</u>		<u>(404,663)</u>	
Net Current Assets			<u>2,302,251</u>		<u>2,504,799</u>
Total Net Assets			<u><u>2,314,426</u></u>		<u><u>2,510,640</u></u>
Reserves					
Restricted Fund	20		70,684		8,665
General Reserve	20		<u>2,243,742</u>		<u>2,501,975</u>
			<u><u>2,314,426</u></u>		<u><u>2,510,640</u></u>

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime within Part 15 of the Companies Act 2006 and with the FRS 102 Charity SORP.

The financial statements were approved, and authorised for distribution, by the Trustees on 12/06/2024 and signed on their behalf by:


..... Trustee
Michael Gretschel

The accompanying notes form an integral part of these financial statements

Company number: 03496304

Diabetes Research and Wellness Foundation
Statement of Cash Flows
For the year ended 31 December 2023

	Note	2023 £	2022 £
Cash used in Operating Activities	24	164,519	(1,005,546)
Cash Flows from Investing Activities			
	Interest on Bank Deposit	29,057	2,704
	Investments	(424,258)	-
	Fixed Assets	<u>(9,850)</u>	<u>(2,023)</u>
Cash Flows from Financing Activities		-	-
Change in cash and cash equivalents in the year		<u>(240,532)</u>	<u>(1,004,865)</u>
Cash and cash equivalents brought forward 1st January		1,703,863	2,708,728
Cash and cash equivalents at 31st December 2022		<u>1,463,331</u>	<u>1,703,863</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements
For the year ended 31 December 2023

1 Accounting Policies

The financial statements have been prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102). The Charitable Company is a public benefit company for the purposes of FRS 102 and therefore the Charity also prepared its financial statements in accordance with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (The FRS 102 Charities SORP), the Companies Act 2006 and the Charities Act 2011.

The trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charity to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of approval of the financial statements. In particular the trustees have considered the charity's forecasts and projections and have taken account of pressures on donations income. After making enquiries the trustees have concluded that there is a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. The charity therefore continues to adopt the going concern basis in preparing its financial statements.

The financial statements are prepared in sterling, which is the functional currency of the company. Monetary amounts in these financial statements are rounded to the nearest pound. The financial statements have been prepared on the historical cost convention, modified to include certain financial instruments at fair value. The principal accounting policies adopted are set out below.

Critical accounting estimates and areas of judgement

In the view of the trustees in applying the accounting policies adopted, no judgements were required that have a significant effect on the amounts recognised in the financial statements nor do any estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

The principal accounting policies of the company are set out below:

Income

Income is included on an accruals basis except that donations under gift aid together with the associated income tax recoveries are credited as income when the donations are received. Membership Subscriptions are apportioned across the membership subscription period. Income from gift aid repayment claims is only included for claims which have been submitted for tax periods ending on or before the year end and when the receipt of this income is certain.

Legacies

Legacies are recognised following probate and once there is sufficient evidence that receipt is probable and the amount of the legacy receivable can be measured reliably. Where entitlement to a legacy exists but there is uncertainty as to its receipt or the amount receivable, details are disclosed as a contingent asset until the criteria for income recognition are met.

Public Donations and Gifts-in-Kind

Incoming resources in the form of Gifts-in-Kind are included in the Statement of Financial Activities only when assets donated to the charity are distributed. Gifts-in-Kind are donations of commodities directly usable in charitable programmes, such as food, blankets, books, agricultural and medical supplies. The Charity has an internationally recognised and accepted monitoring programme in place to ensure that commodities are appropriately valued at wholesale or less, culturally appropriate for the designated programme, and can be both properly shipped and distributed gratis to the designated beneficiaries.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2023

1 Accounting Policies (continued)

Expenditure

Expenditure, which is charged on an accruals basis, is allocated between:

- expenditure incurred directly in the effort to raise voluntary contributions (cost of generating funds);
- expenditure incurred directly to the fulfilment of the charity's objectives (charitable expenditure);

Charitable expenditure comprises all the expenditure incurred by the charity in meeting its charitable objectives and is further analysed between:

- grants payable in the furtherance of the charity's objectives
- costs of activities in furtherance of the charity's objectives
- support costs of the charity

Cost Apportionment

Where items of expenditure involve more than one cost category these costs have been apportioned on a reasonable basis as determined by the trustees. One particular area where the cost is material to the charity is in the production and distribution of direct mailings.

One of the purposes of the mail shot is to develop a database of names of people with a particular interest in the activities of the charity and its charitable objects. It is held that individuals who make a £10 or greater donation, in response to the mailing, have a degree of interest in diabetes. They are interested because they suffer from diabetes, know somebody who does or could themselves be at risk of developing the condition. These are precisely the people whom the charity is trying to help and consequently they receive the benefits of the educational material provided by the charity. These high interest individuals constitute 25% of the total responses; so the charity allocates 25% of the cost of the mailing to costs in furtherance of the charity's objects.

Furthermore the remaining expenditure has been allocated on the basis of whether the educational content of the individual mailing is significantly high enough so as to be material. When this holds true the remaining cost of the mailing is allocated on a pro-rata basis comparing the educational content (costs in furtherance of the charity's objects) to the fund raising content (costs of generating funds). The educational content is determined by the amount of text and space on each mailing that is dedicated to material of an educational nature.

Telemarketing expenditure is allocated in a consistent manner with mailings, as described above, hence the charity allocates 25% of the cost of the telemarketing calls to costs in furtherance of the charity's objectives, with the remaining expenditure allocated on the basis of whether the time spent during the telephone call is in accordance with the charity's objects or otherwise.

Fund raising expenditure i.e. Text that may induce a donation from the recipient, is allocated upon the basis of the volume of the text and space that is not related to text of an educational nature.

Support costs comprise all other overhead costs for the running of the charity as an organisation.

Fund Accounting

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes. The aim and use of each fund is set out in the notes to the financial statements.

Unrestricted funds are donations and other incoming resources received or generated for expenditure on the general objectives of the charity.

Restricted funds are donations received from a donor who has specified a particular area of the charity's work to which the donation should be allocated.

**Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2023**

1 Accounting Policies (continued)

Grants Payable

Grants are recognised when they become due for payment. Included within the Statement of Financial Activities is the cost of grant instalments that are payable to charitable organisations / individuals in accordance with the charity's governing instruments, together with any grants payable for the year, but not paid by the year end date. The value of grants awarded which are subject to the completion of a future year's performance is disclosed as a Financial Commitment in Note 18.

Tangible Fixed Assets and Depreciation

Depreciation is calculated to write down the cost less estimated residual value of all tangible fixed assets held for charity use by equal annual instalments over their expected useful economic lives. The rates generally applicable are:

Office equipment, fixtures and fittings	5-7 years straight line
---	-------------------------

All tangible fixed assets costing more than £250 are capitalised at their cost to the charity.

Foreign Currencies

Transactions in foreign currencies are translated at the exchange rate ruling at the date of the transaction. Monetary assets and liabilities in foreign currencies are translated at the rates of exchange ruling at the balance sheet date. All exchange differences are dealt with through the statement of financial activities.

Leasing Commitments

Rentals payable under operating leases are charged against income on a straight line basis over the lease term.

Other Financial Instruments

i. Cash and cash equivalents

Cash and cash equivalents include cash at banks and in hand and short term deposits with a maturity date of three months or less.

ii. Investments

Current asset investments include deposits with a maturity date of more than three months.

iii. Debtors and Creditors

Debtors and creditors receivable or payable within one year of the reporting date are carried at their at transaction price. Debtors and creditors that are receivable or payable in more than one year and not subject to a market rate of interest are measured at the present value of the expected future receipts or payment discounted at a market rate of interest.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2023

2	Donations and Legacies		2023	2022	
			£	£	
	Donations		681,335	759,181	
	Lottery Programme		7,942	8,518	
	Legacies Received		524,625	820,553	
			<u>1,213,902</u>	<u>1,588,252</u>	
	Included in the above are restricted donations and legacies of £21,974 (2022: £8,665)				
3	Charitable Activities		2023	2022	
			£	£	
	Grants Received		261,504	48,231	
	Gift Aid Receipts		88,655	101,247	
			<u>350,159</u>	<u>149,478</u>	
	Included in the above are restricted grants of £253,613 (2022: £43,319)				
4	Other Charitable Trading Activities		2023	2022	
			£	£	
	Membership Subscriptions		7,392	9,336	
	Event Fees and Sponsorship		37,568	3,529	
			<u>44,960</u>	<u>12,865</u>	
5	Other income		2023	2022	
			£	£	
	Miscellaneous Income		20,775	12,457	
			<u>20,775</u>	<u>12,457</u>	
6	Fund Raising Costs		2023	2022	
			£	£	
	Caging		171,167	185,106	
	Carriers		3,474	2,086	
	Computer Charges		6,034	5,811	
	Lettershop and Data		5,629	6,353	
	Postage and Shipping		38,176	42,000	
	Printing		11,665	6,153	
	Publicity		1,163	1,533	
	Marketing Costs		-	3,025	
	Community Fundraising		16,005	16,259	
	Mail Pack Premiums		11,220	31,949	
	Lottery Costs		3,570	3,847	
	Staff Costs (see Note 12)		95,745	72,089	
	Sweepstake Winners		14,800	14,725	
			<u>378,648</u>	<u>390,936</u>	
7	Charitable Activities	2023	2023	2023	2023
		Direct	Grants	Gifts in	Support
		Expenditure	Awards	Kind	Costs
		(Note 10)	(Note 8)	(Note 9)	(Note 11)
		£	£	£	£
	Research into the Relief of Diabetes	-	311,343	-	404,867
	Raising Public Awareness of Diabetes	760,209	-	-	760,209
		<u>760,209</u>	<u>311,343</u>	<u>-</u>	<u>1,476,419</u>
		2022	2022	2022	2022
		Direct	Grants	Gifts in	Support
		Expenditure	Awards	Kind	Costs
		(Note 10)	(Note 8)	(Note 9)	(Note 11)
		£	£	£	£
	Research into the Relief of Diabetes	-	275,857	-	402,394
	Raising Public Awareness of Diabetes	961,164	-	-	961,164
		<u>961,164</u>	<u>275,857</u>	<u>-</u>	<u>1,639,415</u>

**Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2023**

8 Grant Awards	2023	2022
	£	£
University of Oxford	126,407	133,024
Cardiff University - Non Clinical Fellowship 2021	64,977	59,563
Association pour la Recherche sur la Diabete	-	200
University of East Anglia - Clinical Fellowship 2021	79,002	72,418
University College London - Non Clinical Fellowship 2022	66,853	10,722
	<hr/>	<hr/>
	337,239	275,927
Less: Unclaimed grants written back	(25,896)	(70)
	<hr/>	<hr/>
	<u>311,343</u>	<u>275,857</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2023

9 Direct Charitable Expenditure	2023	2022
	£	£
Staff Costs (see Note 12)	371,825	396,767
Postage	156,848	203,382
Printing	68,964	68,803
Publicity	1,505	11,726
Mail Pack Premiums	44,461	194,318
Educational Events	81,099	49,752
Carriers	13,766	12,684
Grant Costs	2,570	2,083
Lettershop and Data	19,171	21,649
	<u>760,209</u>	<u>961,164</u>
10 Support Costs	2023	2022
	£	£
Other Staff Costs	3,278	2,048
Professional Costs	29,097	16,755
Management Charge	156,408	159,771
Office Expenses	72,997	66,995
Establishment Expenses	33,194	47,123
Bank Charges and Interest Paid	5,283	3,984
Foreign Exchange (Loss)	5,853	5,265
Depreciation	3,516	2,717
Irrecoverable VAT	66,292	72,333
Amounts paid to Auditors	22,975	22,284
Company Secretarial Fees	513	350
Board Meeting Expenses & Trustee Expenses	180	-
Other Overhead Costs	5,281	2,769
	<u>404,867</u>	<u>402,394</u>

Support Costs are allocated to the Charitable expenditure of the charity in proportion to the direct cost of the activity

11 Wages and Salaries	2023	2022
	£	£
Wages and Salaries	419,169	419,928
Social Security Costs	34,355	35,139
Pension Costs	14,047	13,789
	<u>467,571</u>	<u>468,856</u>

The key management personnel of the charity are the Trustees and the CEO. The total amount paid for key management personnel was £71,732 (2022: £72,124).

2023	2022
No.	No.

The number of higher paid employees was in the band:

£60,000 - £70,000	1	1
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Pension contributions payable for the above individual was £2,776 (2022: £2,776).

The number of employees at the end of the year was 13 (2022: 15).

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2023

12 Payments to Trustees

No trustee or person with a family or business connection with a trustee, received remuneration in the year, directly or indirectly, from the charity.

Reimbursement to Trustees for Travel and Meeting Costs were £nil (2022: £nil).

13 Surplus of Income over Expenditure	2023	2022
	£	£
The surplus of income over expenditure is stated after charging:		
Auditors' Remuneration:		
- Audit Fee relating to the Financial Year	22,900	21,090
- In respect of non audit services	1,250	1,140
Operating Lease rentals		
- Plant & Machinery	3,066	1,824
- Other Assets	16,719	24,090
Foreign Exchange Loss	5,853	5,265
Depreciation	<u>3,516</u>	<u>2,717</u>

14 Taxation

The company, being a registered charity, is not liable for corporation tax in respect of its charitable operations for the year.

15 Tangible Fixed Assets for Charity Use

	Office equipment, fixtures and fittings £
Cost	
At 1 January 2023	37,027
Additions in Year	11,203
Disposals in Year	<u>(29,274)</u>
At 31 December 2023	<u>18,956</u>
Depreciation	
At 1 January 2023	31,186
Provided in the year	3,516
Eliminated on Disposal	<u>(27,921)</u>
At 31 December 2023	<u>6,781</u>
Net Book Value	
At 31 December 2023	<u>12,175</u>
At 31 December 2022	<u>5,841</u>

16 Debtors	2023	2022
	£	£
Trade Debtors	68,777	1,920
Other Debtors	27,424	19,144
Prepayments and Accrued Income	712,178	1,184,535
	<u>808,379</u>	<u>1,205,599</u>

All Debtors except prepayments are financial instruments and are measured at settlement value

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2023

17 Creditors : Amounts falling due within one year	2023	2022
	£	£
Trade Creditors	44,805	124,587
Grants Payable (see below)	248,706	210,955
Accruals and Deferred Income	82,274	54,852
Tax and Social Security	17,932	14,269
Other Creditors	-	-
	<u>393,717</u>	<u>404,663</u>

All Creditors except deferred income are financial instruments and are measured at settlement value

Reconciliation of Grants Payable:

Commitments at 1 January 2023	210,955	336,236
Grants Payable for the Year (see Note 8)	311,343	275,857
Grants Paid during Year	<u>(273,592)</u>	<u>(401,138)</u>
	<u>248,706</u>	<u>210,955</u>

In addition to the amounts committed and accrued noted above, the trustees have also authorised the continuation of certain grants which are subject to the recipient fulfilling certain conditions. The details of these further commitments can be found in Note 22.

18 Deferred Income	2023	2022
	£	£
Deferred Income B/FWD 1st January 2023	3,360	5,972
Released to Income in Year	(3,360)	(5,972)
Income Deferred in Year	<u>54,287</u>	<u>3,360</u>
Deferred Income C/FWD 31st December 2023	<u>54,287</u>	<u>3,360</u>

Deferred Income comprises:

- Newsletter Membership Subscriptions which are renewable annually on a rolling 12 monthly basis
- Event Registration and Exhibition Fees received in advance of the event taking place
- Restricted Grants Received that will not be utilised until future periods

19 Reserves	Balance at	Transfer	Income in	Expenditure	Net	Balance at
	1 January	from General	Year	in Year	Movement in	31 December
	2023	Reserve In			Year	2023
	£	Year	£	£	£	£
Restricted Fund relating to Diabetes Research	-	-	253,613	(204,903)	48,710	48,710
Restricted Fund relating to The Big Give Christmas Challenge	8,665	-	21,974	(8,665)	13,309	21,974
Restricted Fund relating to Diabetes Wellness Day Hartlepool	-	-	-	-	-	-
Designated Growth Fund	-	-	-	-	-	-
General Reserve	2,501,975	-	1,383,266	(1,641,499)	(258,233)	2,243,742
	<u>2,510,640</u>	<u>-</u>	<u>1,658,853</u>	<u>(1,855,067)</u>	<u>(196,214)</u>	<u>2,314,426</u>
	Balance at	Transfer	Income in	Expenditure	Net	Balance at
	1 January	from General	Year	in Year	Movement in	31 December
	2022	Reserve In			Year	2022
	£	Year	£	£	£	£
Restricted Fund relating to Diabetes Research	-	-	43,319	(43,319)	-	-
Restricted Fund relating to The Big Give Christmas Challenge	23,042	-	8,665	(23,042)	(14,377)	8,665
Restricted Fund relating to Diabetes Wellness Day Hartlepool	500	-	-	(500)	(500)	-
Designated Growth Fund	150,000	(150,000)	-	-	(150,000)	-
General Reserve	2,601,693	150,000	1,713,772	(1,963,490)	(99,718)	2,501,975
	<u>2,775,235</u>	<u>-</u>	<u>1,765,756</u>	<u>(2,030,351)</u>	<u>(264,595)</u>	<u>2,510,640</u>

During 2023 the charity participated in the Big Give Christmas Challenge 2023 to raise funds for a Pump Priming Research Grant. The funds received in the year was £21,974 (2022 £8,665).

During 2023 the charity received a £131,155 grant from Diabetes Wellness Network Sweden for research of which £48,710 will be spent in 2024.

In 2020 The trustees designated £150,000 to support the growth and diversification of activities, this was no longer required in 2022 and reverted to general reserve.

Net Assets by Fund

	Unrestricted	Restricted	Total
	£	£	£
Tangible Assets	12,175	-	12,175
Current Assets	2,625,284	70,684	2,695,968
Current Liabilities	<u>(393,717)</u>	<u>-</u>	<u>(393,717)</u>
	<u>2,243,742</u>	<u>70,684</u>	<u>2,314,426</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2023

20 Payments to Connected Charities

Connected Charity	Nature of Relationship	2023		2022		Nature of Transactions
		£ Total transactions in the year	£ Balance at the year end	£ Total transactions in the year	£ Balance at the year end	
Diabetes Research and Wellness Foundation Inc.	1	156,408	-	159,771	-	Management charges in relation to the sharing of articles and staff.
Association Pour La Recherche Sur La Diabete	2		-	200	-	This grant was made to assist with the funding of the Association's awareness and educational programmes.

Nature of Relationships

- 1 Diabetes Research and Wellness Foundation Inc. is completely separate and independent with no legal connections, but Mr. John Alahouzos sits on the Board of Trustees of the associated charity in the United States.
- 2 Association Pour La Recherche Sur La Diabete is completely separate and independent with no legal connections, but Mr W.M. Gretschel and Mr J. Alahouzos sit on the Board of Trustees of the associated charity in France.

Further details regarding the relationship can be found in the Trustees Report.

21 Financial Commitments

The charity has financial commitments of £404,517 (2022: £621,775) for grants authorised but not accrued as expenditure for the year ended 31 December 2023, as they are subject to the recipient fulfilling certain conditions. The amounts payable are as follow:

	2023 £	2022 £
Payable in 2023	-	381,522
Payable in 2024	382,270	218,006
Payable in 2025	22,247	22,247
	<u>404,517</u>	<u>621,775</u>

22 Operating Leases

At 31st December 2023, the charity has commitments under operating leases as follows:

	2023 £	2023 £	2022 £	2022 £
	Within one Year	Two to Five Years	Within one Year	Two to Five Years
Land and Buildings	24,950	26,932	28,000	21,633
Other Assets	2,433	1,852	2,946	3,946
Total	<u>27,383</u>	<u>28,784</u>	<u>30,946</u>	<u>25,579</u>

The Charity's office lease commenced on 31st January 2023 with a term of three years and a discounted period of the first three months during which the rent payable was £nil.

23 Reconciliation of Net Movement in Funds to Net Cash Flow from Operating Activities

	2023 £	2022 £
Net Movement in Funds - Surplus/(Deficit)	(196,214)	(264,595)
Add back Depreciation Charge	3,516	2,717
Deduct Interest Income shown in Investing Activities	(29,057)	(2,704)
Decrease (Increase) in Debtors	397,220	(663,774)
Increase (Decrease) in Creditors	(10,946)	(77,190)
Net Cash used in Operating Activities	<u>164,519</u>	<u>(1,005,546)</u>

24 Members' Liability

The Foundation is a company limited by guarantee. In the event of winding up, the 5 members' liability is limited to £1.

DIABETES RESEARCH & WELLNESS FOUNDATION

England & Wales - Charity number 1070607

Accounts

Diabetes Research and Wellness Foundation
(A Company Limited by Guarantee)

Charity Number: 1070607
Company Number: 03496304

Financial Statements
For the year ended
31-Dec-22

Diabetes Research and Wellness Foundation

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Diabetes Research & Wellness Foundation

Diabetes Research and Wellness Foundation (DRWF)

(A Company Limited by Guarantee)

REPORT & FINANCIAL STATEMENTS

For the year ended 31 December 2022

Registered Charity Number: 1070607

Company Number: 03496304



Megan, who has Type 1 diabetes, conquered her fear of heights by abseiling the Spinnaker Tower, Portsmouth to raise awareness and funds for DRWF. Here she is with Dad, Simon, who has type 2 diabetes.

THANK YOU! To everyone who has donated, volunteered their time, or undertaken an activity to support us. Your contribution makes all the difference, meaning that we can carry out awareness, educational programmes and research funding activities to ensure that people with diabetes are **'Staying well until a cure is found... THANK YOU!** for being part of a powerful community who are intent on investing in a brighter future for all people with diabetes **#StrongerTogether**

Message from our Co-Founder & Chairman – Michael Gretschel



After two very challenging years, we were keen to resume our community activities, with the year seeing the return of our residential T1 Family Camp, the first since 2019, as well as continuing our virtual Camp in the Cloud. We were able to run three Diabetes Wellness Days in the South, Midlands, and Northeast, and whilst all of these activities were well-attended, there was still an understandable nervousness about coming together after a prolonged period of isolation.

There is no doubt that the whole nation has been affected by the pandemic, but it was arguably a more challenging time for people living with diabetes and other long-term conditions. It was wonderful to be able to reconnect and renew our support in person, to see familiar faces and meet new friends from across the diabetes community, sharing stories of hope and determination.

Whilst we started the year with a renewed energy, it was clear that there would be ongoing challenges. Our hearts went out to the people of Ukraine as war was declared in March, and we were pleased to be able to join forces with local groups by making a modest contribution of warm clothing, diabetes awareness items and hypo treatments.

As inflation soared and the cost of living rose rapidly, it was clear that we would have to remain adaptable and flexible in our beneficiary programmes. In times of financial uncertainty and pressure, it is often people living with health challenges who are impacted the most, so we were keen to ensure that we continued to meet the most important needs. The fundraising landscape remains very challenging and whilst we endeavour to navigate these pressures, we continue to focus on diversifying our income streams to ensure that we are robust and fit for purpose and continue to make a difference to the everyday lives of people with diabetes.

Relying almost entirely on voluntary and fundraised income, none of our work would be possible without our amazing donors and supporters who make us what we are. We are truly grateful to every individual who has contributed to the continued success of the charity, helping us to ensure that people with diabetes are *'Staying well until a cure is found...'*

Finally, as we approach our 25th anniversary year, we must thank our staff, advisory board members and volunteers. It is because of the hard work, commitment, and tenacity that we have been able to help more people than ever before.

Thank you.

Mike Gretschel
March 2023

Report of the trustees for the year ended 31st December 2022

The trustees are pleased to present their report and message from the Chairman together with audited financial statements for the year ended 31st December 2022.

The financial statements comply with the Charities Act 2011; the Companies Act 2006; the Memorandum and Articles of Association and are prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102 Charities SORP) (effective from 1st January 2015).

Our purpose, aims and activities

The objects of the charity are:

- To assist in the relief of persons with diabetes and any similar or related diseases or conditions
- To raise public awareness about diabetes and any similar or related diseases or conditions, their incidence, causes, treatment, avoidance, and relief

The focus of our work

Having had two years of very little community interaction over 2020/21 due to the pandemic, it was heartening in the early part of 2022 to see an initial surge of interest in returning to in-person events and activities. This was somewhat short-lived however, due to the increasing cost of living with rapidly rising inflation and soaring energy prices, as well as a groundswell of support in response to the Ukraine war.

Whilst our initial focus was understandably on stabilising our financial position having come through what has been described as ‘the perfect storm’, it has been uppermost in our minds that financial uncertainty, rising costs, loss of jobs and increasing poverty all have a significant effect on both physical and mental health. Even more so when living with a chronic long-term condition, such as diabetes.

We saw numerous news articles and reports during the year about the significant increase in numbers of people needing to use food banks, with an upward trajectory of people not being able to access healthy or nutritious foods. Healthy eating is important for everyone but especially so for people living with diabetes as it is central to maintaining blood glucose control in order to reduce the risk of complications, some of which can be debilitating, life limiting and life threatening.

Deprivation is associated with higher levels of obesity and physical inactivity which can negatively impact on all aspects of health and increase the risk of Type 2 diabetes. Financial uncertainty also increases social isolation and causes significant stress which can lead to depression. All of which can impact on blood glucose levels; diabetes management and ultimately lead to poorer health outcomes.

Our priority in 2022 was to remain visible and accessible to everyone affected by diabetes that needed our help. Supported self-management of diabetes is central to reducing the risks associated with complications and therefore our aim was to do more to understand need and provide information and educational support programmes that provide the practical tools to support and encourage a pro-active approach to good self-care. We consider that those with the greatest knowledge of their condition will have a better understanding of the disease and will be better equipped to have an impact on the progression of their diabetes and any associated complications. Our Diabetes Wellness activities, both in the community and virtual, provide a great platform for meeting people sharing similar health concerns, making new friends, and building peer support networks, all of which serve to reduce isolation and enhance both the physical and psychosocial management of diabetes. A much-needed resource in

these difficult times, whilst the research we fund continues to improve our understanding of diabetes, it's treatment, management, and cure **#StayingWellUntilaCureIsFound...**

Demonstrating public benefit

The trustees confirm that they have referred to the general guidance set out by Charity Commission on public benefit. The trustees are satisfied that the Charity's activities meet the principles of public benefit, defined as providing an identifiable benefit/s to the public, or section of the public, and know of no detriment or harm that may be caused as a result of these activities, which are clearly set out throughout this report.

Volunteers

As a small team delivering numerous activities, we rely on the support of volunteers who participate by helping with administrative tasks in our office; delivering diabetes awareness and information materials; undertake user involvement exercises to help steer and develop our programme activities; support our educational events and community fundraising programme or sit on one of our expert panels for research or information review. The number of volunteers fluctuates each year but is crucial to helping us spread the word about the work we do and to support local and national community fundraising initiatives. Aside from our Trustees, we have an Editorial Advisory Board and a Research Advisory Board. These are panels of diabetes clinicians and scientists, and other relevant professionals, all of whom offer their time and expertise voluntarily to ensure that we meet the high standards required of us through our Association of Medical Research Charities (AMRC) accreditation and our commitment to producing clinically evidenced health and social care information. We wholeheartedly thank all of our volunteers for their time, expertise and commitment which helps us raise awareness to the charity, maximise income and maintain high standards of work.

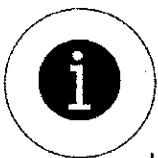
Measuring Impact

We use a mixed methods approach to monitor and evaluate our activities in order to ensure that they remain true to purpose and achieve desired outcomes. Stakeholders and beneficiaries are involved in these evaluation processes to ensure the continued relevance, quality, accessibility, and effectiveness of activities. We also undertake independent evaluation with specialist partners for specific projects where impartial opinion and/or additional expertise is required.

We keep people with diabetes at the heart of what we do. Beneficiaries and supporters are involved in numerous ways to ensure that our support and resources are relevant, accessible and meet needs, helping to steer our research priorities and programme activities.

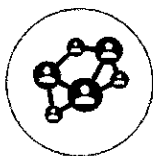
Activities & Achievements in 2022

Awareness, information & support



INFORMATION REACH: Our direct mail programme played a key part in our communications strategy during 2022, enabling us to stay connected with key audiences who do not routinely engage with online channels. We distributed 442,040 campaign packs in 2022 an increase of around 13% on the previous year. The health information contained within each campaign is targeted at beneficiaries who could act on the information, either in a preventative way (type 2 diabetes) or to inform and support those living with diabetes (all types), in their self-management of the condition. Whilst maintaining relationships with existing supporters of our appeals, we also reached out to higher volumes of prospective beneficiaries and supporters of the charity during 2022. We had an average campaign response rate of 7.3% across 4 streams resulting in over 32,170 responses from across the country. We know from experience that it is likely that many more opened and read the appeal but chose not to make direct contact with us at that time.

Historically, we have seen numbers of people respond to communications that have been distributed many months, or even years, before as they have held onto the information provided for future reference. These campaigns also act as a stewardship tool, helping us to stay connected with long-standing supporters of the charity.



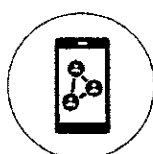
Health Unlocked Forum: The DRWF Diabetes forum within Health Unlocked provides a 'safe space' for people with diabetes to share their experiences, gain support and make a difference to others too. In 2022, the volume of members increased by 33, meaning that all time membership increased by 6.5% to 6,042 in the year. The volume of 'active' contributors declined slightly from 2021 by 9%, at 422, with people spending an average time of 04.26 minutes on the forum. This had increased in the year by almost 14%. Our forum enables people to access online resources and tools, as well as the support of others experiencing similar health issues, all of which has been shown to improve health outcomes.



WEBSITE: We launched a new website in 2022 and expected that there would be a lull in traffic/engagement for a period of time, however this did not begin to rise again when expected. There are multiple reasons for this. Firstly, a Google algorithm update at the end of 2021 made DRWF drop down the search rankings a little. This was closely followed by a more major update to the Google search algorithms at the exact time that we launched the new site. These two things happening simultaneously has proven challenging to our SEO, also affecting our AdWords campaigns. Therefore, website page views were down 24.5% over 2021 at 314,760 and the total number of unique users was down 32.29% at 182,410. A lot of work has gone into improving our SEO and in getting AdWords working more effectively, and traffic is increasing again but it is a gradual increase which is somewhat due to the resources available to us at this time. These are disappointing figures for 2022 having seen a significant upward trajectory in 2020, with a natural decline in 2021 following the spike of online activity due to the pandemic, and plan to rectify this situation in 2023.



LIVING WITH DIABETES PODCASTS & VIDEOS: We continued to produce our Living with Diabetes podcasts in 2022 which provides another channel through which to access interesting and educational diabetes content. Whilst these channels are still very much a work in progress, we have had reasonably good engagement during the year with 2,659 views/listens. We aim to develop these channels during 2023.



SOCIAL MEDIA CHANNELS: In 2022 we continued our efforts to raise awareness of our activities and services to more people through social media campaigns with most engagement being seen through our Facebook page. Our sponsored Facebook content reached over 2.4 million people, up 45% over 2021, and had 7,780,382 impressions. This increase was achieved with an identical budget in 2022 and 2021. Our Tweets received 209,900 impressions and our Instagram page reached 91,403 people, up 48% over 2021.



DIABETES WELLNESS NEWS: We distributed 103,471 copies of our newsletter, Diabetes Wellness News, to subscribers, healthcare professionals and regular givers. This is a 10% decrease in the circulation numbers of 2021. Much of this reduction is related to deceased notifications received from subscribers in the year due to the demographic of this channel of support. The newsletter is distributed to annual subscribers and on a complimentary basis to healthcare providers who share the information with their patient communities. On a quarterly basis the circulation is boosted as we focus on the research element of our work and send a copy to our regular givers. It is difficult to accurately predict the true readership of the newsletter but through anecdotal evidence, it is much wider than those who have specifically requested to receive it and is seen as a stewardship tool to maintain engagement with a variety of different supporter and beneficiary audiences. We intend to change the frequency from monthly to quarterly distribution in 2023 as we work towards meeting the needs of existing supporters of this resource, as well as take DWN online.



Quality in Care Diabetes – award winning Diabetes Wellness events

Diabetes structured education aims to provide people with diabetes with the knowledge and confidence to self-manage a long-term condition effectively. The offer of structured education across the country has improved over more recent years. However, the rates of attendance are still very low and vary widely.

For the past 23 years, we have provided an annual programme of Diabetes Wellness events. We work with diabetes, and related healthcare professionals to facilitate workshops that provide relevant, up-to-date, evidence-based information covering all aspects of diabetes and related health. Delegates choose the sessions and talks that they attend meaning that they create their own agenda for the day, improving engagement and supporting better outcomes. These events bring together a wealth of information, expertise, and peer support under one roof, with the aim of inspiring and empowering people with diabetes in their self-care.

Our Diabetes Wellness Days were acknowledged by the Quality in Care (QIC) Diabetes awards in 2017, when we won the Judges Special Award category. The Judges commented -

"The Diabetes Research and Wellness Foundation have put together a brilliant education support programme with excellent outcomes. The events are clearly user focused, providing an opportunity for peer support, and re-engaging those users who have missed out on a structured education. The programme offers huge value to future users and has great potential to reach other areas of the UK."

Network Rail – Wellbeing Wednesday



In July 2022, we were invited to host Network Rail's Wellbeing Wednesday programme, which saw 805 live and on-demand listens to our interviews and 5-minute diabetes video tips.

Diabetes Wellness Events in 2022 –

In 2022, we were able to return to in-person events, hosting three **Diabetes Wellness Days** in the South, Midlands and North-East, along with a residential **Diabetes Wellness Family Camp** for families of children with type 1 diabetes, and a virtual **T1 Camp in the Cloud**.



Diabetes Wellness Days –

Three events held in the South, Midlands and Northeast of England enabled us to provide educational support to **355 people living with type 1 and type 2 diabetes**.

These events provide an interactive programme of workshops and talks, grouped around a vibrant exhibition hub where delegates can meet healthcare and industry partners offering essential diabetes diagnostics and other products and support services. They also provide a wonderful opportunity to talk to diabetes and related healthcare professionals about all aspects of life with diabetes, as well as make new friends and connections. All of which empower self-management and improve health outcomes.



Diabetes Wellness Family Camp

62



Our first residential Camp since 2019. We received 37 family applications (134 individuals) and had to close the online application process early due to demand. We had 60 individual places available and following triage, offered 62 places to 18 families. Eleven families (43 individuals) remained on the waiting list. All families were offered places on the Autumn virtual **Camp in the Cloud**.

"I gained time to be with my family without having to constantly think about food- carbs, quantity, gluten/non gluten."

The feedback from attendees was overwhelmingly positive and we received essential critique as to how we could improve the parental discussion session, with more structure and smaller group sizes, to steer our next residential Camp offering.

"I made lots of new friends with diabetes which is important to me because sometimes I feel like the odd one out. We relaxed into camp after a very short space of time, and we managed to reconnect as a family but genuinely chatting to other caregivers, mums and dads dealing with the same things and being able to laugh about it with people who really know what you're living through. We all feel completely refreshed and less overwhelmed and just not so alone."

Virtual Camp in the Cloud



Virtual Camp was introduced during the pandemic, and due to its success and accessibility, we have decided to keep this going all the while there is an appetite for attendance.

We had anticipated that we could accommodate between 120 – 150 online attendees and were overwhelmed with the initial response, which saw 55 families (198 individuals) register their interest. The nature of an online event increases attrition rates. Thirty-nine (39) families went on to complete a full application; 37 families (140 individuals) were offered places; 35 families (135 individuals) attended on the day.

A full programme of online activities was offered, with a box of arts and crafts, and other materials, supplied beforehand to make the day as interactive and fun as possible. The final session of the day gave the parents an opportunity to relax and discuss diabetes as a small group along with DRWF staff and participate in a quiz.

“My child was diagnosed during covid, so it has been a hard lonely time.”

“My daughter was diagnosed with type one diabetes in April 2020 at the beginning of the first lockdown. She has missed out on the opportunity to meet other children with her condition as the hospital cannot run its normal family events. As a family only one parent can attend hospital appointments with Ophelia which is not ideal when she wants both parents there to support her. She started school in September 2020. Although the training was brilliant it’s been challenging not being able to meet with staff and care givers properly. All my children have experienced disruption due to Covid. The eldest three have missed a significant amount of school and my baby had been unable to go to baby groups.”

Feedback was overwhelmingly positive, with families stating that covid-19 had been a huge challenge, and incredibly isolating particularly for those that were diagnosed in 2020/21.

“It was valuable to know there are other families out there dealing with the same condition. We enjoyed completing some of the activities together. My daughter felt special receiving the gifts in the box. My husband and I found the parent talk useful and interesting. The comic book activity and coding were great. The bingo was a good ice breaker activity.”



**Diabetes
Professional
Care - DPC**

Diabetes Professional Care

For the 7th consecutive year, DRWF was the registration sponsor of Diabetes Professional Care (DPC), an event that provides free to access CPD accredited education for healthcare professionals delivering diabetes care. Almost 5000 healthcare professionals, from across the primary and secondary care spectrum, attended the event over the course of 2 days, benefitting from an educational programme facilitated by multi-disciplinary teams. The event was opened with a keynote session from Professor Partha Kar OBE, National Specialist Advisor Diabetes, NHS England and Professor Jonathan Valabhji, National Clinical Director for Diabetes and Obesity, NHS England and Improvement. We ran pre and post event surveys with registered healthcare practitioners to gauge awareness of DRWF and the information resources that we have available free of charge to support onward diabetes care of people with all types of diabetes. Of all registrations, we had a 3% response rate (147 respondents), which has helped to inform our future marketing and distribution plans of our health and social care information.

Research Funding Programme

Each year, we issue Calls for Applications in respect of our 3-year Clinical, Non-Clinical and Pump Priming awards.

DRWF Fellowships provide the necessary funding to support Early Career Researchers (ECR) which is vitally important to ensure that clinical and scientific talent stays and develops within the diabetes medical research community. ECR's represent a young and diverse research population, and provide a constant flow of talent, new ideas and new skills. Some of them will go on to be the senior diabetes researchers of the future, so with very few funding awards available to this vital community, the DRWF awards are lucrative and well positioned to attract the best and brightest young researchers.



Our Pump Priming stream is a proof-of concept funding channel, which aims to produce translational pilot study data that goes on to leverage higher value, longer term funding from other organisations to take the research conducted to the next level.

The DRWF annual funding round is offered through open competition, and as such, enables funded researchers to access support for both indirect and direct costs of research via the Charity Research Support Fund (CRSF) and NIHR Clinical Research Networks AcoRD agreement.

Institutional and discretionary awards are available when funds allow. Contract funding of key personnel within the DRWF Human Islet Isolation Facility at the Churchill Hospital, Oxford is subject to proposal and reviewed on a multi-year rolling contract basis.

DRWF is a member of the Association of Medical Research Charities (AMRC), a membership body representing the leading medical and health research charities who deliver high-quality research that saves and improves lives. Working with member charities and partners, AMRC aims to support voluntary sector effectiveness and advance medical research by developing best practice, providing information and guidance, improving public dialogue about research and science, and influencing government.

As a member, we subscribe to AMRC's criteria for the use of peer review for allocating funding and support AMRC position statements on the payment of indirect costs in universities and the use of animals in medical research which seeks to replace, refine and reduce the use of animals (3Rs) in research.

We operate a rigorous peer review process by which our Research Advisory Board (RAB), clinical and scientific experts in the field of diabetes and related health, assess applications and reports to ensure that only the highest quality and most effective research, carried out using good or best practice methodologies, receives DRWF funding.



Claire Levy – living with T2 Diabetes

"Funding research into new treatments and new technologies has transformed the lives of people living with all forms of diabetes, including myself as someone with Type 2 Diabetes. DRWF has funded some amazing research over the last 24 years, made possible by the very generous donations of our supporters, which has really advanced our knowledge of the different types of diabetes and how to manage and treat it. We will only find a cure through research and your gift could make all the difference."

2022 Professor David Matthews Non-Clinical Fellowship

We received 8 pre-applications for funding, from which 5 full applications were submitted and subsequently invited to interview. The Board of Trustees reviewed and approved the RAB's funding recommendation in December.



Dr Ana Victoria Garfield, University College London, £128,663.95 over 2 years.



Understanding how diabetes and hyperglycaemia causes cognitive decline, dementia, and abnormal brain structure. An integrated genetic epidemiological and deep phenotyping approach to disentangle pathways and interplay of risk factors.

"Dementia is one of the most feared diabetes complications. While risks are elevated in people with diabetes, glucose lowering trials are disappointing, Mendelian randomisation is a genetic tool which can help uncover true causal relationships, as genes are randomly distributed at birth and not influenced by external risk factors. Using this, I show that diabetes itself is not causally related to dementia. I now want to use this tool to identify which diabetes related factor is the true culprit, in large datasets which include measures of cognition, brain structural damage and dementia. There are four potential explanations: i) processes underlying diabetes e.g., insulin resistance, ii) associated metabolic disturbances, e.g., amino acids, iii) associated risk factors e.g., blood pressure (BP), iv) risk factors upstream of diabetes e.g., obesity. By identifying true causal determinants, I can then pinpoint interventions to be tested in clinical trials to reduce dementia risk in diabetes."



Islet Cell Research & Transplant

DRWF has made a considerable contribution to the funding of islet cell research and transplant in the UK and around the world. The DRWF Human Islet Isolation Facility at Churchill Hospital, Oxford plays a pivotal role in providing islets for research and transplant as part of a national treatment programme, the clinical element of which is funded by the NHS.

Three personnel are funded within the facility (around 30% of facility staff):

- Lab Manager
- Deputy Facility Manager (post doc researcher)
- Islet Transplant Administrator

During the year, we renewed our commitment to the Deputy Facility manager post, offering the continuation of 1 year's funding. Ordinarily, these posts are funded for between 3-5 years, giving continuity and stability to the individual post holders and wider facility/teams. This is vitally important to ensure sustainability of expertise within the research group, given that this facility works on rotation to isolate islet cells for human transplant, as well as supply islets for research across the UK and Europe. On this occasion, and as the post was vacant at the time of review, we erred on the side of caution given the ongoing challenges of fundraising activity. By making the commitment, the university were able to proceed with recruitment and we intend to review the ongoing financial commitment in 2023 when the post has been filled.

Impact report from the Director of the DRWF Islet Isolation Facility Churchill Hospital, Oxford by Professor Paul Johnson

During the pandemic, the University closed many of its research facilities for various periods of time. This limited research activity, but the team continued to be research active whenever it was possible. Whilst official lockdown

restrictions had become less robust in late 2021 and into 2022, many hospitals and research facilities maintained their own restrictions to support their recovery from the significant impact of the pandemic.

The Oxford team continues to be one of only 3 clinical islet isolation facilities in the UK (one of only 2 in England and Wales) which remains on an alternate weekly isolation rota with King's in London. Between April 2021 and March 2022, the team undertook 23 clinical islet allo-isolations from a wide range of pancreas donors, with 64% of isolations achieving transplantable yields with 30% of isolations being distributed to transplantation to the islet transplant centres around the UK. The outcomes for this 12-month period match international standards. The clinical islet transplant programme has expanded in this time and is now transplanting for the Bristol catchment area, as well as transplanting islet patients for the Royal Free. A new satellite clinic in Leicester is also planned.

The NHS-commissioned total pancreatectomy with islet auto-transplantation (TPIAT) programme for chronic pancreatitis continues to develop. Islet isolation for these fibrotic pancreases is difficult but the team has achieved good results and have also been evaluating some novel modifications to the isolation protocol, which they hope to promote internationally. Clinical outcomes are encouraging, and they are now in the process of applying for NHS-commissioning for TPIAT in children, which Oxford is well placed to provide.

The DRWF Isolation Facility in Oxford continues to provide human islets for research to a network of type 1 and type 2 diabetes researchers around the UK. The team has now provided 15.1 million islet equivalents (IEQ) (the international standardised way of counting islets) from 86 islet preparations that have resulted in over 46 peer reviewed research publications. A new initiative with NHSBT, the *'Increasing the Number of Organs Available for Research'* (INOAR) is now established enabling organs from donors with diabetes to now be retrieved routinely from across the UK for research purposes.

The Oxford DRWF Islet Isolation leads the 'Islet Platform' for the related Quality in Organ Donation (QUOD) with responsibility for isolating and distributing islets for research from these rare pancreases.

In November 2022, DRWF released a short film sharing impact stories around diagnosis and life with Type 1 and Type 2 diabetes, showcasing the difference that an islet transplant makes to quality of life and independence. Professor Johnson contributed to this film along with an islet transplant recipient. The film can be viewed at <https://www.drwf.org.uk/drwf-research/our-heroes/>

How we raised our money in 2022

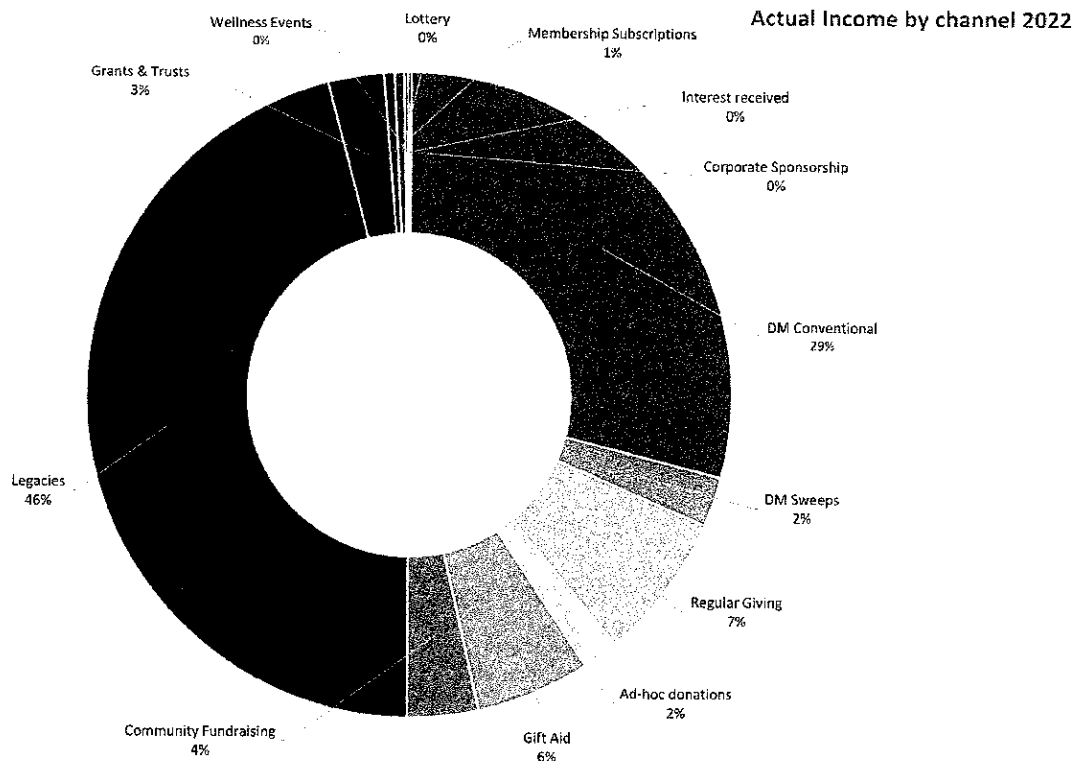
Our approach to fundraising – The Trustees are aware of their responsibility and accountability to ensure that the charity fundraises legally, responsibly, and effectively.

Our plan for 2022 was to maintain focus on building resilience and sustainability for the future through succession planning, diversification of income streams and delivery of purposeful programs that continue to meet the ever-changing needs of people with diabetes.

In the hope of returning to more normal levels of activity in 2022, we set our sights on an ambitious income expectation to support diversification of our fundraising activities. This is key to support future sustainability.

Whilst we had hoped to see pre-pandemic behaviours return in 2022, the Ukraine War, rising inflation and cost of living challenges, had a big impact throughout the year.

These challenges affected our actual income in the year which was £1,765,756 a shortfall of 4% on our budget expectation of £1,836,508. However, income was 5% higher than FYE 2021. This was mainly due to high levels of legacy bequests received in the year and an increase of reach via our direct mail programme.



Corporate Partnerships:

We do not endorse products, but we will support initiatives that increase awareness to DRWF and our activities, and where there is an appropriate message, product, or service for people with diabetes. To this end, we have worked to explore meaningful partnership and corporate sponsorship opportunities, where there is a synergy in mission, vision, and values. Any potential partnership is assessed for feasibility, compatibility with our own objectives, and risk to ensure there is no detrimental effect to our reputation or fundraising potential. Robust risk assessment supports our desire to only engage in suitable and best value partnerships. Detailed discussion and negotiation ensure that the aims of both parties are complementary and mutually beneficial. This maintains transparency and integrity in all partnerships.

Professional Fundraisers:

Whilst we use the services of fundraising consultants, as and when needed, to advise on some of our activities, we did not work with a professional fundraiser during the year. Commercial participation agreements are in place where necessary.

YOU make all the difference!

As a charity that exists almost entirely, at this time, on voluntary donations and fundraised income, we are always humbled and heartened by the support that we receive.

Here is a snapshot of some of the community activities that took place in 2022 that helped raise awareness of diabetes, the charity, and its services, as well as vital funds to support all of our charitable activities -

MEGAN MANAGED BRILLIANTLY...

Spotting the signs of diabetes early could save lives.

A young woman who nearly died from undiagnosed type 1 diabetes is campaigning to save the lives of others by raising awareness of the symptoms while fundraising for DRWF.

Megan Jansen overcame her fear to abseil more than 550 feet down Portsmouth's iconic Spinnaker Tower to celebrate the fact she's still alive after defying a deadly complication from undiagnosed type 1 diabetes just over five years ago.

Megan hoped her participation in this challenge would help to raise awareness of the symptoms to save the lives of other young people and children.

"Knowing the symptoms of diabetes is lifesaving and had it not been for the intensive care unit team at Torbay Hospital in Torquay I would have lost my life in 2016," warned Megan, 22.

"I think DRWF has a great understanding of how devastating a diagnosis of diabetes can be and their attitude towards wellbeing has helped me become more confident in myself."

Simon Jansen, Megan's father who has type 2 diabetes joined his daughter in the abseil for DRWF. He added: *"I am so proud and grateful to have been 'roped in' to abseil the Spinnaker Tower to support my daughter's efforts to raise money for DRWF.*

Megan said: *"Diabetes is not just as simple as controlling your glucose levels and DRWF has helped people develop healthy relationships with their diabetes. The abseil was exhilarating and so important for me to constantly challenge myself. Even more exciting was that my dad chose to take up a place as well, especially as he is living with type 2 diabetes."*

"One more thing – please remember if you're struggling with your diabetes, reach out to DRWF and make the most of the incredible support networks that they can provide. Do not let your diabetes get in the way of what you want to achieve, whether it be a big abseil, a work goal or a personal life goal. Living with diabetes does not define you.

Megan Jansen

KATIE, BOOTS ON RUNNING FOR DIABETES...

In February half term 2022, shortly after his eighth birthday, Eddie was admitted to the Royal Surrey County Hospital where he was diagnosed with Type 1 Diabetes. We'd been worried about him for a while as he'd he been unwell and lost a lot of weight. The diagnosis was a horrible shock to the whole family, and we immediately tried to work out 'why' 'what' 'when' and 'how'. The care we received that week from the paediatric diabetes team was incredible. We found ourselves on a steep learning curve attempting to process how this autoimmune disease affects the body, test blood glucose levels through finger pricks and, learning how to deal with often scary 'hypos and hypers'. We were taught how to give Eddie multiple daily insulin injections (practicing on Brian the Satsuma!). Once home from hospital we had to determine how to fit this care into Eddie's incredibly active life and we began the 24/7 juggle of managing exercise, food, stress, medication, technology, and BG levels.



Eddie has been through so much. His first question whilst in A&E was 'Mummy, how long will I have this for?' The realisation that this condition wouldn't go away like a cold or chicken pox was something hard to break to him.

DRWF was one of the first online resources we found to educate ourselves on the practicalities of T1D. Their mission of **'Staying well until a cure is found'** resonates as this is how we choose to support Eddie in his day-to-day life. We are committed to making sure that T1D won't ever stop him from being involved in anything he wants to be part of. We not only support but want to be involved in future research and development that strives to find a cure and before that, the more seamless management of diabetes.

Eddie is passionate about athletics and being active. He was so keen to get back to his track sessions at the Young Athletes Club after coming out of hospital that I stood trackside with him in the dark, in the rain, throwing jelly babies in his mouth every time he ran past me. After 18 minutes of his first session back at Young Athletes Club we had to come off as he had a dangerously low 'hypo'. He cried, I cried, frustrated at how unfair 'stupid diabetes' was but he went back the following week stronger and more determined than ever not to let T1D stop him.

Katie Boots, mummy to Eddie and London Marathon runner for DRWF

DANCE FOR DIABETES, in collaboration with FunKidz Dance

Schoolchildren in Portsmouth took part in collaborative event between DRWF and Dance School Funkidz Dance Limited.

A fundraising playground dance event across three schools in Portsmouth raised more than £9,000 for DRWF.

The Dance for Diabetes event was organised by DRWF in partnership with Portsmouth-based Dance School Funkidz Dance Limited, owned and managed by Samantha Collins.

Throughout the month of May each participating school was given a fun dance routine to learn from a series of videos.



This was done during school hours and worked into lessons where appropriate; whilst being made available on school platforms to practice at home.

More than 1,500 children aged between 4 and 11 years old (School years R to 6) took part raising a total of £9,209. All sponsorship monies raised were split equally between DRWF and the participating school.

The partnership had five aims: promote physical and mental wellbeing; develop new skills; nurture new and existing friendships; offer an introduction to dance; and to raise funds for charity.

Samantha Collins and DRWF Head of Community Fundraising, Tim Green, visited all participating schools to perform the dance in the playground alongside all teachers and school staff. It was a fantastic celebration of keeping active, collaborating with friends, and having fun!

Every participating child received a certificate; with special class certificates being awarded to those that demonstrated most improved confidence; most improved performance; and highest-class fundraiser.

Samantha said: "A lot of children love dancing but don't always find it easy to fit in with the structure of a dance school environment. In my experience dance also comes with a lot of additional costs such as costumes and footwear. I wanted to strip this back and do something that is just about being themselves, feeling comfortable, wearing their own clothes, and using their feet! An experience I feel gives children such a confidence boost that really helps their development and social skills."

"Working alongside DRWF is so important to me as it is a condition that not only impacts my family directly but affects so many of our children's families too. Diabetes is a lifelong condition that is something we don't speak about enough, so I am thrilled to be able to raise awareness and funds by organising this danceathon."

Fundraising Regulator: We are a levy-paying member of the Fundraising Regulator and subscribe to the associated fundraising codes of practice. The charity suppresses individual supporter records against the Mailing Preference Service, Telephone Preference Service, and the Fundraising Preference Service, which helps to ensure that we do not approach individuals who have expressly requested that we do not contact them. During the year, we were notified of 23 FPS requests, which are suppressed from all contact, 9% higher than received in 2021.

Complaints: The charity has a published complaints procedure, available on its website, and endeavours to respond to enquiries and complaints within the stated timeframe. Most contacts tend to be a request to opt-out of charity communications by existing supporters and we monitor the basis on which people request this i.e., content of appeal, volume of contact; type of contact; method of contact to inform our campaigns with the aim of reducing any perception of unreasonable intrusion, persistent approach or undue pressure to support. We didn't receive any complaints about our fundraising practices during the year.

GDPR and Data Protection: We are committed to protecting the personal information and privacy of individuals that we engage with and comply with relevant legislation and codes of practice, whilst carrying out our essential work of raising awareness of diabetes, providing information and support, and raising funds. Our privacy policy, published at drwf.org.uk sets out how we capture, process, manage and retain personal information.

Financial Review

Principal income streams in the year were direct mail campaigns; regular giving via direct debit; legacy income and gift aid associated with voluntary donations.

Income and expenditure are monitored on a weekly basis with budgets/forecasts adjusted accordingly.

Income:

Total income was £1,765,756. This was 4% lower than budgeted income (£1,836,508) but an increase of 5% on income received in 2021 (£1,686,061). Voluntary donations including gift aid receipts at £812,809 was up by 13.5% on 2021 (£715,671). Legacy income, having been budgeted for on a 3-year average (less 1 unusually large legacy), was £808,983 which was 47% higher than budget; 7% lower than received in 2021 (£868,611).

Expenditure:

Total expenditure was £2,030,351 which was 9% below budget (£2,235,970), this was an increase of 7% on expenditure in 2021 (£1,900,422). At year-end we had a deficit of £264,595. This was 34% less than we had budgeted for (-£399,462), 23% higher than the deficit recorded in 2021 (£-214,361).

Direct charitable expenditure was 81p in every £1 spent (84p in 2021).

Government Grants

The charity claimed £43,319 from the Government's Covid Medical Research Charity Support Fund (BEIS) to support early career researchers. The charity made use of the Government's Kickstart Scheme to fund digital jobs for six months for 16 to 24-year-olds on Universal Credit. £4,912 was claimed under this scheme.

Investment Policy

Under the Memorandum and Articles of Association, the charity has the power to invest in any way the trustees see fit. The trustees, in order to minimise risk and having regard to the liquidity requirements of the charity, and to the reserves policy, have historically operated a policy of keeping available funds in a higher interest-bearing deposit account seeking to achieve a rate of deposit interest which matches or exceeds inflation as measured by the retail prices index.

The trustees have regularly reviewed opportunities to increase investment return from short-term, easy access, options bearing in mind the desire to ensure that we can react quickly to appropriate requests for additional research support as they arise.

The trustees are also conscious of on-going cash-flow requirements during a challenging time where historical fundraising methods are raising less income and where new methods of fundraising are being tested at higher cost.

All things considered, the trustees believe it appropriate to continue to explore investment opportunities as they present themselves, with a view to maximising return on its deposits.

With interest rates rising in 2022, the Board felt it important to consider whether there was opportunity to deposit surplus cash into short-term, higher interest-bearing bank accounts to maximise return. To this end, the charity opened a CAF (Charities Aid Foundation) Charity Deposit Platform account, provided by Flagstone, which gives access to around 80 notice and fixed term accounts with 20+ banks. The interest rates offered via this platform are better than can be obtained by the charity approaching the banks individually. Accounts created on the Flagstone platform with onshore UK banks provide the same FSCS protection as if the deposit had been placed directly with that bank. An annual management fee of 0.225% of account balance is charged. This platform will be set-up in 2023.

Reserves Policy

To safeguard the need for sufficient funds to cover on going management, administration, and support costs, as well as respond to further grant requests that might arise, the Board aims to maintain unrestricted, free reserves at a level that equals 3-6 months of operating and charitable expenditures, which equates to between £474,894 and £949,788.

During financial year 2022, total expenditure was £2,030,351. Allowing for adjustments and forward research commitments, the charity's expenditures for financial year 2023 are likely to be in the region of £1,899,576. At 31st December 2022, the charity held free reserves (unrestricted reserves less fixed assets) of £2,501,975. This is the equivalent of approximately 15.8 months operating and charitable expenditures.

The trustees are committed to strengthening existing income streams whilst diversifying fundraising activities to reduce reliance on single sources. It is accepted that this will take investment in activities where the accuracy of predicting response rates, in terms of volume or value of gift, will be more challenging in the first instance.

Current reserves, whilst in excess of those anticipated, will enable us to navigate these more challenging times whilst diversifying income generation and developing the charity's objective activities, for future sustainability.

Going concern

The trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements having considered known commitments, forecasts and projections and possible pressures on income generation. After making these considerations, the trustees conclude that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing the financial statements.

Our focus in 2022 and beyond

The pandemic showed us the need to be agile, integrated, and adaptive in our approach. The past couple of years have been incredibly challenging and with the ongoing cost of living crisis we need, more than ever, to be resourceful and innovative in our approach.

We are experiencing rising costs in all of our charitable and fundraising activities due to inflation, at the same time our individual donors are reviewing their own outgoings and tightening their belts; and corporate partnership and grant funding opportunities are in short supply and all the more competitive. Ironically, at this time of financial uncertainty for everyone, more people than ever are turning to charities for their support.

As we approach our 25th anniversary in 2023, we are intent on reversing the negative impact that both the pandemic and the current economic climate have had on our ability to diversify and develop our fundraising portfolio and deliver Wellness programmes that meet the needs of the diabetes community and the healthcare professionals that look after them.

Our focus is very much on ensuring that we have the necessary funds to build a resilient and sustainable organisation that can meet the ongoing, and ever-changing, needs of our beneficiaries.

To do this effectively, we plan to –

- Restructure our supporter database to ensure that we are taking a personalised approach to stewardship of our beneficiaries and donors recognising that there are increasing financial pressures on our supporters; we anticipate that recruitment of new supporters will be more difficult, so retention and good stewardship of existing supporters is ever more important.
- Review our current Wellness Programme activities to ensure that they meet need and deliver impactful outcomes whilst maximising opportunity for DRWF to engage in partnerships that deliver revenue and benefit for all parties.
- Effect organisational change within the charity to create cost-efficiencies and make for an organisation that can navigate the ongoing challenges and is robust and fit for the future.

Reference and Administrative Details

Charity Number:	1070607
Company number:	03496304
Registered Office:	Building 1000 Langstone Park Havant, Hampshire PO9 1SA Tel: 023 92 637808 Website: drwf.org.uk
Trustees & Directors:	Mr W. Michael Gretschel (Chairman) Mr John Alahouzos Mrs Valerie Hussey Mr Jeffrey Harab (retired April 2022) Mr Steve Jones (elected October 2019) Dr Shivani Misra (elected January 2020) Mr Christian Gretschel (elected May 2022)
Chief Executive:	Mrs Sarah Tutton (Bone)

Advisers

Bankers:	Barclays Bank Plc 1 Churchill Place London E14 5HP
Solicitors:	Blake Morgan LLP New Kings Court Tollgate Chandlers Ford Eastleigh SO53 3LG
Secretary:	Blake Morgan Company Secretary Services
Auditors:	6 th Floor, 9 Appold Street LONDON EC2A 2AP

Structure, Governance & Management

Governing Document - The Diabetes Research and Wellness Foundation, also known as DRWF, is a registered charitable company (Registered Charity No. 1070607 and Company No 03496304) limited by guarantee and governed by its Memorandum and Articles of Association dated 15 January 1998 and amended by special resolutions passed on 15th June 1998, 2nd December 2001 and 24th April 2005.

Recruitment & Appointment of Trustees - The charity trustees are also the directors of the company for the purposes of company law.

As dictated by the charity's Articles of Association, directors are appointed by the Company Members. Any person desiring to be admitted to the membership of the company is required to apply in writing. No person shall be admitted until approved by resolution passed in accordance with the Articles of Association by the existing members, who hold absolute discretion as to the admission of any person.

The Trustees of the charity, being mindful that the board should offer a diversity of skills to fulfil statutory and fiduciary duties, are open to recommendations for new board members.

The business and medical/health related skills within the existing board member pool are supported by personal experience of diabetes, which assists the board in ensuring that objective activities meet beneficiary need.

Additionally, the board is supported in its decision-making processes by a Research Advisory Board, which has an independent Chairman. The RAB members review applications and make recommendation for research funding awards. An Editorial Advisory Board provides support to the provision of health and social care information. Both boards are made up of clinicians, scientists and other 'experts' in the field of diabetes and related health and strengthen the services that the charity offers its beneficiaries.

All board members are subject to 'conflict of interest' policies and processes.

Trustee Induction and Training – Newly elected Trustees receive an Induction Pack that outlines the role and responsibilities of the Trustee, along with a history of the structure and purpose of the charity.

The pack includes a copy of the governing document and contact details of all board members. There is also an outline of the Chairman of the Board's role and responsibilities along with details of the executive officer taking responsibility for the daily management of the charity. Trustees are required to comply with the eligibility requirements set out by Charity Commission and to review and update an annual Register of Interests.

Trustees are kept up to date with various governance publications and notices from appropriate professional advisory memberships. Additionally, trustees might be advised of appropriate governance courses that they may benefit from attending to ensure diversity and continuity of knowledge and skills within the Board.

Newly elected trustees are invited to attend a Review Meeting with the chair, after an agreed time lapse, in order to feedback their first impressions and address any concerns. Trustees are actively encouraged to participate in the charity's outreach programme of educational events.

Organisation - The strategic direction and policy of the charity is the responsibility of the Board of Trustees. During 2022 six trustees served on the Board, from a variety of professional backgrounds relevant to the work of the charity. The Board meets routinely throughout the year post-quarter end to review activities and management accounts. Additional meetings are organised as required. Historically, the Board would meet at least once per year in person however this changed during the Covid-19 pandemic due to travel restrictions, with all meetings being held virtually. This continued during 2022 and there were no meetings in-person during the year.

The Chief Executive carries out the daily operations of the charity and is responsible to the Board of Trustees.

Connected & Related Parties – DRWF co-operates on several intellectual matters including sharing articles and reports with the Diabetes Research and Wellness Foundation Inc., a 501C3 Not for Profit Company operating in the United States; Association pour la recherche sur le diabete (A-rd) in France; Insamlingsstiftelsen Diabetes Wellness Network Sverige (Sweden); Diabetes Wellness Suomi (Finland) and Diabetes Wellness Norge (Norway). These organisations are completely autonomous and independent with no legal connections.

- Mr. W. Michael Gretschel is the Chairman of the Board of Trustees of the Diabetes Research and Wellness Foundation and is the volunteer President of the Diabetes Research and Wellness Foundation Inc (USA) but does not serve on its board of directors. He is also a Board member of A-rd (France), DWNS (Sweden), DWS (Finland) and DWN (Norway).
- Mr. John Alahouzos is the Chairman of the Diabetes Research and Wellness Foundation Inc (USA) and serves on the Board of Trustees of the Diabetes Research and Wellness Foundation. He also is a Board member of A-rd (France), DWNS (Sweden), DWS (Finland) and DWN (Norway).
- Mrs. Valerie Hussey sits on the Board of Trustees of Diabetes Research & Wellness Foundation and is also an 'alternate member' on the Board of DWNS (Sweden).
- The Chief Executive of the Diabetes Research & Wellness Foundation, Sarah Tutton, sits on the Board of DWN (Norway).

Links between these independent organisations, has proved invaluable to the charity in helping to strengthening it's international presence, for the purpose of supporting diabetes research programmes and global awareness activities.

A Register of Interests for Board Members and Key Management Personnel is maintained and reviewed on an annual basis.

Remuneration Policy for senior staff - The Trustees, who are also the directors, and the Chief Executive Officer comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity on a day-to-day basis.

All trustees give their time freely and no trustee received remuneration in the year. Details of trustees' expenses and related party transactions are disclosed in note 13 to the accounts.

The salary of all staff, including the chief executive officer, is reviewed annually and normally increased in accordance with average earnings. In view of the nature of the charity, its size and structure, the trustees undertake a benchmarking exercise, using online research/tools, comparing the charity's salaries against pay levels offered for similar roles within other charities and companies.

The benchmark is the mid-point of the range paid for these similar roles with consideration given to workload, level of responsibility, anticipated rate of inflation and other published research on third sector rates of pay.

The charity considers that its remuneration policy –

- Ensures delivery of the charity's objectives
- Attracts and retains a motivated workforce with the skills and expertise necessary to ensure organisational effectiveness.
- Is equitable and coherent across the organisation.
- Reflects the purposes, aims and values of the charity.
- Ensures that pay levels and pay increases are appropriate in the context of the interests of our beneficiaries.

Risk Management – The Trustees have examined the major strategic, business, reputational and operational risks that the charity faces. This involves identifying specific risks; assessing their likelihood of occurrence and potential impact; determining what steps could be taken to mitigate those risks and delegating responsibility to key staff for overseeing management of the associated controls. The risk register is reviewed annually to ensure the adequacy of internal control mechanisms.

Our approach to risk assessment and management is evidenced across the organisation and throughout our activities. The risk register was formally scored by all trustees in early December and resulting risks discussed at a Board meeting held on 22nd December.

The Board considers that the major risks facing the charity at present, are –

- Fundraising and dependency on single income streams
- Competition
- Business continuity

The past few years have been incredibly challenging for all charities, with clear impact on fundraising activities and attrition in channels that, historically, have been very solid in their return. The charity is focused on diversifying activities to reduce reliance on unpredictable or single income streams with our Core Fundraising Group meeting monthly to review and develop strategy and operational plans to support this.

The fundraising landscape is highly competitive at present, with more charities than ever applying for grant funding; individual donors reviewing their financial commitments because of the rising cost of living; and legacy income, which is an entirely unpredictable income source, contributing a higher percentage than ever of our overall income.

We are mindful that fluctuations in income could impact on our ability to deliver direct charitable activities, and so remain agile in our approach to protect our aims and objectives. We are monitoring income and expenditure very closely and endeavour to scale back expenditure in line with income generation where possible.

The trustees consider that the Charity has robust internal procedures, systems and processes and believe that risk assessment is embedded throughout the organisation.

Trustees' responsibilities in relation to the financial statements – The trustees, who are also directors of Diabetes Research and Wellness Foundation for the purposes of company law, are responsible for preparing the trustees' annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice.)

Company law requires trustees to prepare financial statements for each financial year that give a true and fair view of the state of the affairs of the charitable company and of the outgoing resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charities SORP.
- make judgements and estimates that are reasonable and prudent.
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

Auditors – Moore Kingston Smith LLP have indicated their willingness to continue in office and are deemed to be reappointed in accordance with section 487(2) of the Companies Act 2006.

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

On Behalf of the Trustees



Michael Gretschel Chairman

08/06/2023

Dated

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF DIABETES RESEARCH & WELLNESS FOUNDATION

Opinion

We have audited the financial statements of Diabetes Research & Wellness Foundation ('the company') for the year ended 31 December 2022 which comprise the Statement of Financial Activities, the Summary Income and Expenditure Account, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 'The Financial Reporting Standard Applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2022 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, 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 trustees' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. 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. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements themselves. 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 2006

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

- the information given in the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' annual report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' annual report.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; [or]
- we have not received all the information and explanations we require for our audit. [or]
- the trustees were not entitled to prepare the financial statements in accordance with the small companies' regime and take advantage of the small companies exemption in preparing the trustees' annual report and from preparing a strategic report.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 24, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees 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 trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company 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 (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs (UK) we exercise professional judgement and maintain professional scepticism throughout the audit. We are 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 purposes of expressing an opinion on the effectiveness of the charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' 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 charitable company'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 charitable company 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.

Explanation as to what extent the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below.

The objectives of our audit in respect of fraud, are to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charitable company.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity (FRS102) SORP, and UK financial reporting standards as issued by the Financial Reporting Council
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.

- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of management and those charged with governance and obtaining additional corroborative evidence as required.

There are inherent limitations in the audit procedures described above. We are less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the company'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 any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Moore Kingston Smith LLP

.....
Neil Finlayson (Senior Statutory Auditor)

for and on behalf of Moore Kingston Smith LLP, Statutory Auditor

Date: 8 June 2023.

6th Floor
9 Appold Street
London
EC2A 2AP

Diabetes Research and Wellness Foundation
Statement of Financial Activities (Incorporating the Summary Income and Expenditure Account)
For the year ended 31 December 2022

		Unrestricted Funds £	Restricted Funds £	2022 TOTAL £	Unrestricted Funds £	Restricted Funds £	2021 TOTAL £
Income	Note						
Donations and Legacies	2	1,536,268	51,984	1,588,252	1,530,774	15,286	1,546,060
Charitable Activities	3	149,478	-	149,478	119,664	-	119,664
Other Charitable Trading Activities	4	12,865	-	12,865	15,219	-	15,219
Investments		2,704	-	2,704	250	-	250
Income from Charitable Activities		1,701,315	51,984	1,753,299	1,665,907	15,286	1,681,193
Other Income	5	12,457	-	12,457	4,868	-	4,868
Total Income		<u>1,713,772</u>	<u>51,984</u>	<u>1,765,756</u>	<u>1,670,775</u>	<u>15,286</u>	<u>1,686,061</u>
Expenditure On:							
Raising Funds	6	390,936	-	390,936	311,127	-	311,127
Charitable Activities	7	1,572,554	66,861	1,639,415	1,589,295	-	1,589,295
Other		-	-	-	-	-	-
		<u>1,963,490</u>	<u>66,861</u>	<u>2,030,351</u>	<u>1,900,422</u>	<u>-</u>	<u>1,900,422</u>
Net Income		<u>(249,718)</u>	<u>(14,877)</u>	<u>(264,595)</u>	<u>(229,647)</u>	<u>15,286</u>	<u>(214,361)</u>
Transfer between Funds	20	-	-	-	-	-	-
Net Movement in Funds		<u>(249,718)</u>	<u>(14,877)</u>	<u>(264,595)</u>	<u>(229,647)</u>	<u>15,286</u>	<u>(214,361)</u>
Total Funds brought forward		2,751,693	23,542	2,775,235	2,981,340	8,256	2,989,596
Total funds carried forward at 31 December 2022		<u>2,501,975</u>	<u>8,665</u>	<u>2,510,640</u>	<u>2,751,693</u>	<u>23,542</u>	<u>2,775,235</u>

There were no recognised gains or losses other than the deficit reported for the financial year. All activities in the year relate to continuing operations.

The accompanying notes form an integral part of these financial statements.

Diabetes Research and Wellness Foundation
Balance Sheet
As at 31 December 2022

	Note	2022 £	2022 £	2021 £	2021 £
Fixed Assets					
Tangible Assets	16				
			5,841		6,535
Current Assets					
Debtors	17	1,205,599		541,825	
Cash at bank and in hand		<u>1,703,863</u>		<u>2,708,728</u>	
		2,909,462		3,250,553	
Creditors : Amounts falling due within one year	18	<u>(404,663)</u>		<u>(481,853)</u>	
Net Current Assets			<u>2,504,799</u>		<u>2,768,700</u>
Total Net Assets			<u><u>2,510,640</u></u>		<u><u>2,775,235</u></u>
 Reserves					
Restricted Fund	20		8,665		23,542
General Reserve	20		<u>2,501,975</u>		<u>2,751,693</u>
			<u><u>2,510,640</u></u>		<u><u>2,775,235</u></u>

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime within Part 15 of the companies Act 2006 and with the Financial Reporting Standard FRS 102 SORP (effective January 2015)

The financial statements were approved, and authorised for distribution, by the Trustees on 08/06/2023 and signed on their behalf by:



..... Trustee

Michael Gretschel

The accompanying notes form an integral part of these financial statements

Company number: 03496304

Diabetes Research and Wellness Foundation
Statement of Cash Flows
For the year ended 31 December 2022

	Note	2022 £	2021 £
Cash used in Operating Activities	24	(1,005,546)	(448,411)
Cash Flows from Investing Activities	Interest on Bank Deposit Fixed Assets	2,704 <u>(2,023)</u>	250 <u>(4,016)</u>
Cash Flows from Financing Activities		0	0
Change in cash and cash equivalents in the year		<u>(1,004,865)</u>	<u>(452,177)</u>
Cash and cash equivalents brought forward 1st January		2,708,728	3,160,905
Cash and cash equivalents at 31st December 2022		<u><u>1,703,863</u></u>	<u><u>2,708,728</u></u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements
For the year ended 31 December 2022

1 Accounting Policies

The financial statements have been prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102). The Charitable Company is a public benefit company for the purposes of FRS 102 and therefore the Charity also prepared its financial statements in accordance with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (The FRS 102 Charities SORP), the Companies Act 2006 and the Charities Act 2011.

The trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charity to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of approval of the financial statements. In particular the trustees have considered the charity's forecasts and projections and have taken account of pressures on donations income. After making enquiries the trustees have concluded that there is a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. The charity therefore continues to adopt the going concern basis in preparing its financial statements.

The financial statements are prepared in sterling, which is the functional currency of the company. Monetary amounts in these financial statements are rounded to the nearest pound. The financial statements have been prepared on the historical cost convention, modified to include certain financial instruments at fair value. The principal accounting policies adopted are set out below.

Critical accounting estimates and areas of judgement

In the view of the trustees in applying the accounting policies adopted, no judgements were required that have a significant effect on the amounts recognised in the financial statements nor do any estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

The principal accounting policies of the company are set out below:

Income

Income is included on an accruals basis except that donations under gift aid together with the associated income tax recoveries are credited as income when the donations are received. Membership Subscriptions are apportioned across the membership subscription period.

Legacies

Legacies are recognised following probate and once there is sufficient evidence that receipt is probable and the amount of the legacy receivable can be measured reliably. Where entitlement to a legacy exists but there is uncertainty as to its receipt or the amount receivable, details are disclosed as a contingent asset until the criteria for income recognition are met.

Public Donations and Gifts-in-Kind

Incoming resources in the form of Gifts-in-Kind are included in the Statement of Financial Activities only when assets donated to the charity are distributed. Gifts-in-Kind are donations of commodities directly usable in charitable programmes, such as food, blankets, books, agricultural and medical supplies. The Charity has an internationally recognised and accepted monitoring programme in place to ensure that commodities are appropriately valued at wholesale or less, culturally appropriate for the designated programme, and can be both properly shipped and distributed gratis to the designated beneficiaries.

Gift Aid Repayments

Income from gift aid repayment claims is only included for claims which have been submitted for tax periods ending on or before the year end and when the receipt of this income is certain.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2022

1 Accounting Policies (continued)

Expenditure

Expenditure, which is charged on an accruals basis, is allocated between:

- expenditure incurred directly in the effort to raise voluntary contributions (cost of generating funds);
- expenditure incurred directly to the fulfilment of the charity's objectives (charitable expenditure);

Charitable expenditure comprises all the expenditure incurred by the charity in meeting its charitable objectives and is further analysed between:

- grants payable in the furtherance of the charity's objectives
- costs of activities in furtherance of the charity's objectives
- support costs of the charity

Cost Apportionment

Where items of expenditure involve more than one cost category these costs have been apportioned on a reasonable basis as determined by the trustees. One particular area where the cost is material to the charity is in the production and distribution of direct mailings.

One of the purposes of the mail shot is to develop a database of names of people with a particular interest in the activities of the charity and its charitable objects. It is held that individuals who make a £10 or greater donation, in response to the mailing, have a degree of interest in diabetes. They are interested because they suffer from diabetes, know somebody who does or could themselves be at risk of developing the condition. These are precisely the people whom the charity is trying to help and consequently they receive the benefits of the educational material provided by the charity. These high interest individuals constitute 25% of the total responses; so the charity allocates 25% of the cost of the mailing to costs in furtherance of the charity's objects.

Furthermore the remaining expenditure has been allocated on the basis of whether the educational content of the individual mailing is significantly high enough so as to be material. When this holds true the remaining cost of the mailing is allocated on a pro-rata basis comparing the educational content (costs in furtherance of the charity's objects) to the fund raising content (costs of generating funds). The educational content is determined by the amount of text and space on each mailing that is dedicated to material of an educational nature.

Telemarketing expenditure is allocated in a consistent manner with mailings, as described above, hence the charity allocates 25% of the cost of the telemarketing calls to costs in furtherance of the charity's objectives, with the remaining expenditure allocated on the basis of whether the time spent during the telephone call is in accordance with the charity's objects or otherwise.

Fund raising expenditure i.e. Text that may induce a donation from the recipient, is allocated upon the basis of the volume of the text and space that is not related to text of an educational nature.

Support costs comprise all other overhead costs for the running of the charity as an organisation.

Fund Accounting

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes. The aim and use of each fund is set out in the notes to the financial statements.

Unrestricted funds are donations and other incoming resources received or generated for expenditure on the general objectives of the charity.

Restricted funds are donations received from a donor who has specified a particular area of the charity's work to which the donation should be allocated.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2022

1 Accounting Policies (continued)

Grants Payable

Grants are recognised when they become due for payment. Included within the Statement of Financial Activities is the cost of grant instalments that are payable to charitable organisations / individuals in accordance with the charity's governing instruments, together with any grants payable for the year, but not paid by the year end date. The value of grants awarded which are subject to the completion of a future year's performance is disclosed as a Financial Commitment in Note 18.

Tangible Fixed Assets and Depreciation

Depreciation is calculated to write down the cost less estimated residual value of all tangible fixed assets held for charity use by equal annual instalments over their expected useful economic lives. The rates generally applicable are:

Office equipment, fixtures and fittings	5-7 years straight line
---	-------------------------

All tangible fixed assets costing more than £250 are capitalised at their cost to the charity.

Foreign Currencies

Transactions in foreign currencies are translated at the exchange rate ruling at the date of the transaction. Monetary assets and liabilities in foreign currencies are translated at the rates of exchange ruling at the balance sheet date. All exchange differences are dealt with through the statement of financial activities.

Leasing Commitments

Rentals payable under operating leases are charged against income on a straight line basis over the lease term.

Other Financial Instruments

i. Cash and cash equivalents

Cash and cash equivalents include cash at banks and in hand and short term deposits with a maturity date of three months or less.

ii. Debtors and Creditors

Debtors and creditors receivable or payable within one year of the reporting date are carried at their at transaction price. Debtors and creditors that are receivable or payable in more than one year and not subject to a market rate of interest are measured at the present value of the expected future receipts or payment discounted at a market rate of interest.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2022

2 Donations and Legacies	2022	2021			
	£	£			
Donations	759,181	654,919			
Lottery Programme	8,518	8,605			
Legacies Received	820,553	882,536			
	<u>1,588,252</u>	<u>1,546,060</u>			
Included in the above are restricted donations of £51,984 (2022: £15,286)					
3 Charitable Activities	2022	2021			
	£	£			
Grants Received	48,231	20,548			
Gift Aid Receipts	101,247	99,116			
	<u>149,478</u>	<u>119,664</u>			
4 Other Charitable Trading Activities	2022	2021			
	£	£			
Membership Subscriptions	9,336	10,223			
Event Fees and Sponsorship	3,529	4,996			
	<u>12,865</u>	<u>15,219</u>			
5 Other income	2022	2021			
	£	£			
Miscellaneous Income	12,457	4,868			
	<u>12,457</u>	<u>4,868</u>			
6 Fund Raising Costs	2022	2021			
	£	£			
Caging	185,106	139,103			
Carriers	2,086	1,064			
Computer Charges	5,811	5,489			
Lettershop and Data	6,353	10,183			
Postage and Shipping	42,000	34,346			
Printing	6,153	7,996			
Publicity	1,533	2,286			
Marketing Costs	3,025	100			
Community Fundraising	16,259	7,439			
Mail Pack Premiums	31,949	15,491			
Lottery Costs	3,847	3,866			
Staff Costs (see Note 12)	72,089	70,353			
Sweepstake Winners	14,725	13,411			
	<u>390,936</u>	<u>311,127</u>			
7 Charitable Activities	2022	2022	2022	2022	2022
	Direct	Grants	Gifts in	Support	Total
	Expenditure	Awards	Kind	Costs	
	(Note 10)	(Note 8)	(Note 9)	(Note 11)	
	£	£	£	£	£
Research into the Relief of Diabetes	-	275,857	-	402,394	678,251
Raising Public Awareness of Diabetes	961,164	-	-	-	961,164
	<u>961,164</u>	<u>275,857</u>	<u>-</u>	<u>402,394</u>	<u>1,639,415</u>
	2021	2021	2021	2021	2021
	Direct	Grants	Gifts in	Support	Total
	Expenditure	Awards	Kind	Costs	
	(Note 10)	(Note 8)	(Note 9)	(Note 11)	
	£	£	£	£	£
Research into the Relief of Diabetes	-	372,177	-	397,316	769,493
Raising Public Awareness of Diabetes	819,802	-	-	-	819,802
	<u>819,802</u>	<u>372,177</u>	<u>-</u>	<u>397,316</u>	<u>1,589,295</u>

**Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2022**

8 Grant Awards	2022 £	2021 £
University of Oxford	133,024	122,386
University of Exeter (previously Kings's College London) – Non Clinical Fellowship 2018		64,978
Cardiff University - Non Clinical Fellowship 2021	59,563	64,978
Association pour la Recherche sur la Diabete	200	900
University of Exeter - 2021 Pump Priming Award		19,989
University of Exeter - 2021 Pump Priming Award		20,000
University of Oxford - 2021 Pump Priming Award		19,985
University of Roehampton - 2021 Pump Priming Award		20,000
Nottingham Trent University - 2021 Pump Priming Award		19,760
Newcastle University - 2021 Pump Priming Award		19,962
University of East Anglia - Clinical Fellowship 2021	72,418	
University College London - Non Clinical Fellowship 2022	10,722	
	275,927	372,938
Less: Unclaimed grants written back	(70)	(761)
	275,857	372,177

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2022

9 Gifts-in-Kind

The following donations made during the year were claimed as Gifts-in-Kind and are valued in accordance with current market conditions prevailing when the gift was made.

Number of Shipments	Gifts-in-Kind value	Shipping Costs	2022 Total	2021 Total
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-

10 Direct Charitable Expenditure

	2022 £	2021 £
Staff Costs (see Note 12)	396,767	378,118
Postage	203,382	163,383
Printing	68,803	87,870
Publicity	11,726	15,183
Mail Pack Premiums	194,318	119,918
Educational Events	49,752	18,141
Carriers	12,684	8,241
Grant Costs	2,083	819
Lettershop and Data	21,649	28,129
	<u>961,164</u>	<u>819,802</u>

11 Support Costs

	2022 £	2021 £
Other Staff Costs	2,048	2,051
Professional Costs	16,755	29,665
Management Charge	159,771	141,810
Office Expenses	66,995	84,748
Establishment Expenses	47,123	43,881
Bank Charges and Interest Paid	3,984	3,444
Foreign Exchange (Loss)	5,265	3,998
Depreciation	2,717	2,281
Irrecoverable VAT	72,333	65,877
Amounts paid to Auditors	22,284	15,022
Company Secretarial Fees	350	350
Other Overhead Costs	2,769	4,189
	<u>402,394</u>	<u>397,316</u>

Support Costs are allocated to the Charitable expenditure of the charity in proportion to the direct cost of the activity

12 Wages and Salaries

	2022 £	2021 £
Wages and Salaries	419,928	404,366
Social Security Costs	35,139	31,241
Pension Costs	13,789	12,864
	<u>468,856</u>	<u>448,471</u>

The key management personnel of the charity are the Trustees and the CEO. The total amount paid for key management personnel was £72,124 (2021: £70,339).

	2022 No.	2021 No.
The number of higher paid employees was in the band:		
£60,000 - £70,000	1	1

Pension contributions payable for the above individual was £2,776 (2021: £2,722).

The average number of full-time equivalent employees during the year was 12.9 (2021: 12.5).

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2022

13 Payments to Trustees

No trustee or person with a family or business connection with a trustee, received remuneration in the year, directly or indirectly, from the charity.

Trustee Expenses for Travel and Meeting Costs were £nil (2021: £nil) of which £nil (2021: £nil) was reimbursed directly to nil (2021: nil) Trustees.

14 Surplus of Income over Expenditure	2022	2021
	£	£
The surplus of income over expenditure is stated after charging:		
Auditors' Remuneration:		
- Audit Fee relating to the Financial Year	21,090	15,500
- In respect of non audit services	1,140	1,965
Operating Lease rentals		
- Plant & Machinery	1,824	3,081
- Other Assets	24,090	28,000
Foreign Exchange Loss	5,265	3,998
Depreciation	<u>2,717</u>	<u>2,281</u>

15 Taxation

The company, being a registered charity, is not liable for corporation tax in respect of its operations for the year.

16 Tangible Fixed Assets for Charity Use

	Office equipment, fixtures and fittings
	£
Cost	
At 1 January 2022	35,004
Additions in Year	2,023
Disposals in Year	-
At 31 December 2022	<u>37,027</u>
Depreciation	
At 1 January 2022	28,469
Provided in the year	2,717
Eliminated on Disposal	-
At 31 December 2022	<u>31,186</u>
Net Book Value	
At 31 December 2022	<u>5,841</u>
At 31 December 2021	<u>6,535</u>

17 Debtors	2022	2021
	£	£
Trade Debtors	1,920	6,000
Other Debtors	19,144	25,013
Prepayments and Accrued Income	1,184,535	510,812
	<u>1,205,599</u>	<u>541,825</u>

All Debtors except prepayments are financial instruments and are measured at settlement value

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2022

18 Creditors : Amounts falling due within one year	2022	2021
	£	£
Trade Creditors	124,587	71,390
Grants Payable (see below)	210,955	336,236
Accruals and Deferred Income	54,852	61,650
Tax and Social Security	14,269	12,577
Other Creditors	-	-
	<u>404,663</u>	<u>481,853</u>

included within other creditors is a pension creditor of £nil (2021: £nil)

All Creditors except deferred income are financial instruments and are measured at settlement value

Reconciliation of Grants Payable:

Commitments at 1 January 2022	336,236	205,741
Grants Payable for the Year (see Note 8)	275,857	372,177
Grants Paid during Year	<u>(401,136)</u>	<u>(241,682)</u>
	<u>210,955</u>	<u>336,236</u>

In addition to the amounts committed and accrued noted above, the trustees have also authorised the continuation of certain grants which are subject to the recipient fulfilling certain conditions. The details of these further commitments can be found in Note 22.

19 Deferred Income	2022	2021
	£	£
Deferred Income B/FWD 1st January 2022	5,972	4,040
Released to Income in Year	(5,972)	(4,040)
Income Deferred In Year	3,360	5,972
Deferred Income C/FWD 31st December 2022	<u>3,360</u>	<u>5,972</u>

Deferred Income comprises:

- Newsletter Membership Subscriptions which are renewable annually on a rolling 12 monthly basis
- Event Registration and Exhibition Fees received in advance of the event taking place
- Restricted Grants Received that will not be utilised until future periods

20 Reserves	Balance at	Transfer	Income in	Expenditure	Net	Balance at
	1 January	from General	Year	in Year	Movement in	31 December
	2022	Reserve In			Year	2022
	£	Year	£	£	£	£
Restricted Fund relating to Diabetes Research	-	-	43,319	(43,319)	-	-
Restricted Fund relating to The Big Give Christmas Challenge	23,042	-	8,665	(23,042)	(14,377)	8,665
Restricted Fund relating to Diabetes Wellness Day Hartlepool	500	0	-	(500)	(500)	-
Designated Growth Fund	150,000	(150,000)	-	-	(150,000)	-
General Reserve	2,601,693	150,000	1,713,772	(1,963,490)	(99,718)	2,501,975
	<u>2,775,235</u>	<u>-</u>	<u>1,765,756</u>	<u>(2,030,351)</u>	<u>(264,595)</u>	<u>2,510,640</u>
	Balance at	Transfer	Income in	Expenditure	Net	Balance at
	1 January	from General	Year	in Year	Movement in	31 December
	2021	Reserve In			Year	2021
	£	Year	£	£	£	£
Restricted Fund relating to Diabetes Research	-	-	-	-	-	-
Restricted Fund relating to The Big Give Christmas Challenge	8,256	-	14,786	-	14,786	23,042
Restricted Fund relating to Diabetes Wellness Day Hartlepool	-	-	500	-	500	500
Designated Growth Fund	150,000	-	-	-	-	150,000
General Reserve	2,831,340	-	1,670,775	(1,900,422)	(229,647)	2,601,693
	<u>2,969,596</u>	<u>-</u>	<u>1,686,061</u>	<u>(1,900,422)</u>	<u>(214,361)</u>	<u>2,775,235</u>

During 2022 the charity participated in the Big Give Christmas Challenge 2022 to raise funds for the 2023 programme of Educational Events. The funds received in the year was £8,665 (2021 £14,786).

Net Assets by Fund	Unrestricted	Restricted	Total
	£	£	£
Tangible Assets	5,841	-	5,841
Current Assets	2,909,797	8,665	2,909,462
Current Liabilities	<u>(404,663)</u>	<u>-</u>	<u>(404,663)</u>
	<u>2,501,975</u>	<u>8,665</u>	<u>2,510,640</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2022

21 Payments to Connected Charities

Connected Charity	Nature of Relationship	2022		2021		Nature of Transactions
		£	£	£	£	
		Total transactions in the year	Balance at the year end	Total transactions in the year	Balance at the year end	
Diabetes Research and Wellness Foundation Inc.	1	159,771	-	141,810	-	Management charges in relation to the sharing of articles and staff.
Association Pour La Recherche Sur La Diabete	2	200	-	900	-	This grant was made to assist with the funding of the Association's awareness and educational programmes.

Nature of Relationships

- 1 Diabetes Research and Wellness Foundation Inc. is completely separate and independent with no legal connections, but Mr. John Alahouzos sit on the Board of Trustees of the associated charity in the United States.
- 2 Association Pour La Recherche Sur La Diabete is completely separate and independent with no legal connections, but Mr W.M. Gretschel, Mr J. Alahouzos and Mr J. Harab (resigned 24th April 2022) sit on the Board of Trustees of the associated charity in France.

Further details regarding the relationship can be found in the Trustees Report.

22 Financial Commitments

The charity has financial commitments of £621,775 (2021: £575,884) for grants authorised but not accrued as expenditure for the year ended 31 December 2022, as they are subject to the recipient fulfilling certain conditions. The amounts payable are as follow:

	2022 £	2021 £
Payable in 2022	-	248,667
Payable in 2023	381,522	221,995
Payable in 2024	218,006	105,222
Payable in 2025	22,247	
	<u>621,775</u>	<u>575,884</u>

23 Operating Leases

At 31st December 2022, the charity has commitments under operating leases as follows:

	2022 £	2022 £	2021 £	2021 £
	Within one Year	Two to Five Years	Within one Year	Two to Five Years
Land and Buildings	28,000	21,633	28,000	49,633
Other Assets	2,946	3,946	2,946	4,598
Total	<u>30,946</u>	<u>25,579</u>	<u>30,946</u>	<u>54,231</u>

The charity's office lease commenced 9th October 2018 with a term of six years at a rent of £28,000.25 p.a. with two discounted periods of 10 months each, during which the rent payable was reduced by 50%. At the landlord's request the charity moved to a different office in the same location on 31st January 2023 with a new lease of 3 years and a discounted period of 3 months during which the rent payable was £nil.

24 Reconciliation of Net Movement in Funds to Net Cash Flow from Operating Activities

	2022 £	2021 £
Net Movement in Funds - Surplus/(Deficit)	(264,595)	(214,361)
Add back Depreciation Charge	2,717	2,281
Deduct Interest income shown in Investing Activities	(2,704)	(250)
Decrease (Increase) in Debtors	(663,774)	(402,360)
Increase (Decrease) in Creditors	(77,190)	166,279
Net Cash used in Operating Activities	<u>(1,005,546)</u>	<u>(448,411)</u>

25 Members' Liability

The Foundation is a company limited by guarantee. On the event of winding up, the member's (5) (2021 - 5) liability is limited to £1.

DIABETES RESEARCH & WELLNESS FOUNDATION

England & Wales - Charity number 1070607

Accounts

Diabetes Research and Wellness Foundation
(A Company Limited by Guarantee)

Charity Number: 1070607
Company Number: 03496304

Financial Statements
For the year ended
31-Dec-21

Diabetes Research and Wellness Foundation

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Diabetes Research & Wellness Foundation

Diabetes Research and Wellness Foundation (DRWF)

(A Company Limited by Guarantee)

REPORT & FINANCIAL STATEMENTS

For the year ended 31 December 2021

Registered Charity Number: 1070607

Company Number: 03496304



2021 – marking the centenary anniversary of the discovery of insulin

Frederick Banting and Charles Best, who successfully isolated the hormone insulin, one of the greatest medical breakthroughs in the treatment of diabetes.

THANK YOU! To everyone who donated or undertook an activity to support us, all over the UK, during the most difficult of times. Your contribution has helped to safeguard our awareness, educational programmes and research funding activities. **THANK YOU!** for being part of a powerful community who are intent on investing in a brighter future for all people with diabetes **#PartofTheNextBigBreakthrough**

Message from our Co-Founder & Chairman – Michael Gretschel



Following the challenges of 2020, we worked hard to maintain focus on returning to 'normal'. This was easier said than done of course, given the continuation of the Covid-19 crisis and the ebb and flow of lockdown restrictions which impacted our ability to run in-person and community engagement activities.

Notwithstanding the continuing challenges of the pandemic, the year gave us the wonderful opportunity to celebrate the centenary anniversary of the discovery of insulin and focus on what is one of the greatest medical breakthroughs in the treatment of diabetes; a treatment that transformed a fatal disease into a manageable condition and prolonger of life.

In celebration of *#100YearsofInsulin*, we ran a week-long programme of online activities which commenced on World Diabetes Day, 14th November. Professor Emeritus David Matthews, Oxford University and past Chairman of the DRWF Research Advisory Board, hosted a panel of diabetes experts who explored the advances of diabetes research past and present, and discussed hopes for the future.

The discovery remains one of the most important medical breakthroughs in history. To the present day, millions of people still rely on insulin. It ignited a century of development in diabetes care and treatment and has undoubtedly saved millions of lives.

At DRWF, we think it is time for the next big breakthrough; our goal is to find a cure for diabetes. In pursuit of this, we fund some of the best and brightest diabetes researchers in the UK and around the world, whose work improves our understanding of diabetes; explores new treatments; develops self-management strategies; and seeks out potential cure pathways.

Existing on voluntary income, the donations that we receive from our supporters are an investment in a brighter future for people with diabetes.

We have learned much throughout the pandemic. We have all seen how worldwide collaboration in the research community can achieve great things at pace. The dedication and commitment of our diabetes research community is second to none. Now is the time for the next big breakthrough!

I would like to thank everyone who has supported our work in the past year. Whilst we may have been more remote than we have ever been, our supporters and beneficiaries have been uppermost in our minds.

Our hope for the future is clear. We are more focused than ever on our goal of a cure for diabetes. You have our word.

Thank you.

Mike Gretschel

March 2022

Report of the trustees for the year ended 31st December 2021

The trustees are pleased to present their report and message from the Chairman together with audited financial statements for the year ended 31st December 2021.

The financial statements comply with the Charities Act 2011; the Companies Act 2006; the Memorandum and Articles of Association and are prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102 Charities SORP) (effective from 1st January 2015).

Our purpose, aims and activities

The objects of the charity are:

- To assist in the relief of persons with diabetes and any similar or related diseases or conditions
- To raise public awareness about diabetes and any similar or related diseases or conditions, their incidence, causes, treatment, avoidance and relief

The focus of our work

There are more than 4 million people diagnosed with diabetes in the UK. This figure has more than doubled in the last 20 years and it is anticipated that if nothing changes, this will rise to 5 million in the next 4 years.

Around 90% of people with diabetes have type 2, which can often be prevented. There are a number of risk factors which increase the likelihood of a type 2 diagnosis, such as being overweight or obese, which puts people at greater risk of a range of chronic health conditions and ultimately increased risk of premature death.

Approximately 10% of people with diabetes have type 1 diabetes which is a chronic autoimmune condition where the body is unable to produce insulin which is required to regulate blood sugar levels. Type 1 diabetes cannot be prevented.

It is estimated that up to 5% of those diagnosed with diabetes have rare types such as MODY (maturity onset diabetes in the young), CFRD (cystic fibrosis related diabetes), LADA (latent autoimmune diabetes in adults) and a small handful of other types.

It is estimated that the care and treatment of diabetes costs the NHS around 10% of its annual spend, which equates to approximately £10 billion per year. This is a staggering £1.1 million per hour.

Whilst all diabetes can lead to significant health challenges, such as increased risk of cardiovascular disease, blindness and amputation, it is important to remember that type 2 diabetes can be prevented, or onset delayed. There is also evidence of people with type 2 diabetes achieving 'remission' where they have had major weight loss through restrictive diets or bariatric surgery.

Self-management of diabetes is central to reducing the risks associated with complications and therefore much of our work is focused on providing information and educational support programmes that empower self-management and seek to encourage a pro-active approach to good self-care. We consider that those with the greatest knowledge of their condition will have a better understanding of the disease and will be better equipped to have an impact on the progression of their diabetes and any associated complications. Our Diabetes Wellness activities in the community provide a great platform for meeting people sharing similar health concerns, making new friends and building peer support networks, all of which serve to enhance both the physical and psychosocial management of diabetes.

The research we fund spans all types of diabetes and related health, helping improve understanding of cause, treatment and management with our goal being to find a cure for what is, considered to be, one of the 21st century's global health challenges. With the commitment of a multi-disciplinary Research Advisory Board, and a rigorous peer review process for applications, we invest in innovative proof of concept Pump Priming projects, Clinical and Non-Clinical Fellowships which we believe will demonstrate impact for people with diabetes in the fastest timeframe. To-date, we have committed almost £13 million to research since our first awards were made in 1999.

Demonstrating public benefit

The trustees confirm that they have referred to the general guidance set out by Charity Commission on public benefit. The trustees are satisfied that the Charity's activities meet the principles of public benefit, defined as providing an identifiable benefit/s to the public, or section of the public, and know of no detriment or harm that may be caused as a result of these activities, which are clearly set out throughout this report.

Volunteers

As a small team delivering numerous activities, we rely on the support of volunteers who, participate by helping with administrative tasks in our office; delivering diabetes awareness and information materials; undertake user involvement exercises to help steer and develop our programme activities; support our educational events and community fundraising programme or sit on one of our expert panels for research or information review. The number of volunteers fluctuates each year but is crucial to helping us spread the word about the work we do and to support local and national community fundraising initiatives. We had hoped to grow our volunteer network through a higher level of community activity in 2021, however the pandemic prevented us from doing so. We hope to be able to resume community activity as soon as Covid-19 allows and plan to build on the number of volunteers who support the charity as soon as possible. In the meantime, we wholeheartedly thank all of our volunteers for their time, expertise and commitment to our work which helps us raise awareness to the charity, maximise income and maintain high standards of work.


Measuring Impact

We use a mixed methods approach to monitor and evaluate our activities in order to ensure that they remain true to purpose and achieve desired outcomes. Stakeholders and beneficiaries are involved in these evaluation processes to ensure the continued relevance, quality, accessibility and effectiveness of activities. We also undertake independent evaluation with specialist partners for specific projects where impartial opinion and/or additional expertise is required.

Beneficiary need is at the heart of our support programmes and research funding. Service users are involved in lay review of our Diabetes Wellness News and patient information literature helping us to meet our commitment to delivering relevant, clinically evidenced and accessible information. Additionally, beneficiaries are invited to participate in Focus Groups which ensures that service users steer our programme development, helping us to demonstrate the impact that our work has on day-to-day management of diabetes and quality of life.

Activities & Achievements in 2021 - *#100YearsofInsulin*


Our impact, through Awareness, information & support


 Our Direct Mail programme played a key part in our communications strategy during 2021, enabling us to stay connected with key audiences who do not routinely engage with online channels. We distributed 400,114 campaign packs in 2021 an increase of around 55% on the previous year. The health information contained within each campaign is targeted at beneficiaries who could act on the information, either in a preventative way (type 2 diabetes) or to inform and support those living with diabetes (all types), in their self-management of the condition. Whilst maintaining relationships with existing supporters of our appeals, we also reached out to higher volumes of prospective beneficiaries and supporters of the charity during 2021. We had


an average campaign response rate of 9.5% across 4 streams resulting in over 38,149 responses from across the country. We know from experience that it is likely that many more opened and read the appeal but chose not to make direct contact with us at that time. Historically, we have seen numbers of people respond to communications that have been distributed many months, or even years, before as they have held onto the information provided for future reference. These campaigns also act as a stewardship tool, helping us to stay connected with long-standing supporters of the charity.


 **Health Unlocked Forum:** Our awareness messages are reaching wider audiences than ever before supported by our increased provision of news and articles on our website and social media channels and via our Health Unlocked community forum, the world's largest social network for health. The DRWF Diabetes HU forum has a total 6011 all-time members an increase of 6% on 2020. Around 10% of all members are very active in posting and joining discussions and average session time in the forum has increased by 14% to 4.5 minutes. The forum provides a 'safe space' for people with diabetes to share their experiences, gain support and make a difference to others too.

 We continued to focus a lot of time and attention to online engagement during the year. This was essential in order to maintain our connection with the wider diabetes community when we couldn't engage through in-person activity. We doubled our efforts to generate regular reliable news items, with additional online self-management resources, such as our podcast series and pre-recorded video content. Our website received a total of 416,916 page views from 366,312 unique visitors. This continues the upward trajectory of engagement seen in 2020 by 12% in overall traffic, with a small decline of 1.5% in unique visits.

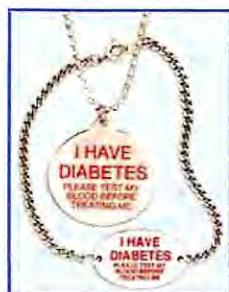
 In 2020 we saw a massive three-fold increase in the volume of patient information resources downloaded from the website. This was as a result of our significant efforts to divert audiences to our site when covid-19 hit. This had reduced in 2021 to what we would consider to be more 'normal' levels with a total of 5124 pdf downloads; 240 audio downloads in addition to the 8100 hard copy resources that were ordered via telephone/email. These resources, whilst still appropriate in content for people with diabetes are currently under review as part of our Wellness Action Group activity to reconsider 'what good looks like' for the diabetes community going forward.

 Whilst in 2020 we saw an increase in the number of visitors to our podcast series 'Living with Diabetes' which resulted in 549 downloads, this had reduced in line with the number of information resource downloads in general, in 2021. There were 380 downloads in total, a reduction of around 30% on the previous year. The podcast programme is a work in progress and another channel through which we can offer support through the sharing of lived experience. We look forward to developing this avenue of our work in the future.

 In 2021 we increased our efforts to raise awareness of our activities and services to more people through social media campaigns with most engagement being seen through our Facebook page. Our sponsored content reached almost 1.7 million people with 5,431,690 impressions. There are some fluctuations in our social activity at present, and it is very much a growing area of activity through a platform that enables us to engage in conversation with a diverse audience, often answering general diabetes related self-management queries, addressing confusions about diabetes, and increasingly responding to questions and comments about diabetes research and recent advances. There was less reach in 2021 than in 2020 but we see this partly as a reflection of the knee-jerk reaction to high numbers of people turning to online methods of connection in 2020. By 2021 some of this had dwindled as people were keen to get back to 'real life' engagement.

 We distributed 114,860 copies of our newsletter, Diabetes Wellness News, to subscribers, healthcare professionals and regular givers. This is a 2% decrease in the circulation numbers of 2020. Much of this reduction is related to deceased notifications received from subscribers in the year. The newsletter is distributed to annual subscribers and on a complimentary basis to healthcare providers who share the information with their patient communities. On a quarterly basis the circulation is boosted as we focus on the research element of our work and send a copy to our regular givers. It is difficult to accurately predict the true

readership of the newsletter but through anecdotal evidence, it is much wider than those who have specifically requested to receive it and is seen as a stewardship tool to maintain engagement with a variety of different supporter and beneficiary audiences.



Our Diabetes Awareness Necklace is distributed free of charge to people with diabetes and healthcare professionals for onward distribution. These necklaces provide emergency identification for those with diabetes should they be unable to alert the emergency services to their condition. They carry the wording 'I have diabetes, please test my blood before treating me'. They are distributed along with medical check-up cards that are used to record tests and results to inform self-management strategies. We responded to 1437 specific requests for free necklaces during the year, a small reduction of 1% on the previous year. This is not unexpected given that a large percentage of these resources are distributed at face-to-face events.



Quality in Care Diabetes – award winning Diabetes Wellness educational events

Diabetes structured education aims to provide people with diabetes with the knowledge and confidence to self-manage a long-term condition effectively. The offer of structured education across the country has improved over more recent years. However, the rates of attendance are still very low and vary widely. Self-management is central to diabetes care. Yet, it is reported that high numbers of people with diabetes experience emotional or psychological problems, such as depression, anxiety and diabetes distress, all of which can impact the ability and motivation to self-manage effectively. This leads to poorer health outcomes, reduced quality of life and increased healthcare costs. Being able to access appropriate support is integral to good self-management.

We have been running an annual programme of Diabetes Wellness events since 2001. We work with diabetes, and related healthcare professionals to facilitate workshops that provide relevant, up-to-date, evidence-based information covering all aspects of diabetes and related health. Delegates choose the sessions and talks that they attend meaning that they create their own agenda for the day, improving engagement and supporting better outcomes. These events bring together a wealth of information, expertise and peer support under one roof.

We know that managing diabetes is challenging and effective coping strategies are crucial to support optimal health. These coping strategies are important not just to people living with diabetes but their family, friends and carers. Peer support plays an important part in emotional wellbeing and this in turn can have an obvious impact on the ability to self-manage effectively. For this reason, we feel it is important to include family, friends and carers in workshops and discussions which facilitates discussion around managing diabetes, perceptions and expectations, in an environment where everyone has experienced or is experiencing something similar. These events are relaxed and welcoming in approach. They are inclusive and provide for diverse needs. They also provide an amazing opportunity to spend time with a whole host of health care professionals asking the questions that really matter to the individual, in a relaxed and informal environment.

The continuation of Covid-19 restrictions in the first half of the year meant that we were unable to run our in-person Diabetes Wellness Events. However, every effort was made to ensure that we were still able to connect with the wider diabetes community through offline and online activities. To that end, we hosted a number of digital events throughout the year to ensure that we remained in touch with beneficiaries and supporters of the charity.

Diabetes Wellness Family ‘Camp in the Cloud’

There are around 29,000 children and young people in the UK living with Type1 Diabetes. For these young people, quality of life can be adversely affected by isolation and their inability to participate in many of the everyday

activities enjoyed by their friends and peers. This often results in a growing lack of self-esteem and confidence, which can become a barrier to future growth and development.

Having provided a very successful residential Diabetes Wellness Family Camp in partnership with Over The Wall in 2019, we had planned to expand on this offering in 2020 and 2021. The pandemic had a significant impact on this programme but the OTW team, working with digital consultants, devised a unique online platform to enable a virtual **Camp in the Cloud** (CiTC) to take place.

This online platform meant that we were able to present a wonderful opportunity for families with children with Type 1 diabetes to connect with others experiencing similar health issues, reducing the feeling of isolation during a particularly isolating period. We recognise that the online experience and associated benefits are somewhat different to an in-person event, but there is opportunity through this platform to reach those children who may not have been eligible to attend an in-person residential event, due to significant health challenges. This potentially widens our reach quite significantly and so we intend to explore the possibility of carrying out online and residential events of this sort, going forward.

Camp in the Cloud enabled us to engage with 68 families in 2021, just over 200 participants in our activities, in total.

Dr Mayank Patel, Consultant in Diabetes and Acute Medicine at University Hospital Southampton NHS Foundation Trust and member of the DRWF Editorial Advisory Board, said: *“I was delighted to be approached by the DRWF to support their virtual Diabetes Wellness Family Camp. To spend some time online, seeing and hearing from kids living with type 1 diabetes and their parents, whilst watching them create their own brilliant array of diabetes related comic characters live was fantastic!”*

*“As co-creators of the **Type 1 Origins** comic series, Professor Partha Kar, Danny at Revolve Comics and I, have been pleased with how well this has been received by those living with type 1 diabetes and those close to them, healthcare professionals and members of the public.”*



In the future, we hope to support families of children with type 1 diabetes through a mix of virtual and residential events allowing children to experience the mischief and magic of camp, regardless of the constraints of their illness.

Amy and Sophie along with their parents participated in **Camp in the Cloud**. They thoroughly enjoyed the comic book workshop hosted by Dr Mayank Patel and Revolve Comic's, Jim Lavery.

They were tasked with creating their own Type 1 diabetes cartoon character. There were a whole host of amazing characters designed by the children with one design selected to be transformed into a fabulous piece of cartoon artwork. Amy and Sophie are pictured here with their winning design of **Pancreas Power and Evil Keto**.

As well as the fun element of Camp, all families are invited to participate in a Q&A session hosted by diabetes and related healthcare professionals. In 2021, Dr Shivani Misra, Diabetes

Consultant Physician from Imperial College, London and DRWF Trustee, and Hayley Faulds, diabetes paediatric/transition nurse from University Hospital, Southampton, supported these events sharing their wealth of expertise and experience, answering questions and facilitating discussion amongst the families.

The importance of feeling support with a diagnosis of Type 1 diabetes -

Sophie's story...

"Sophie was diagnosed with type 1 diabetes aged eight around Christmas time in 2020.

We had noticed she wasn't herself on Christmas Eve; she seemed tired and not as excited as she should be before Christmas. This continued for a couple of days and on Boxing Day evening she was sick and became very poorly. After ringing 111 the doctor told us to call for an ambulance as he suspected she had type 1 diabetes. When we got to hospital her blood sugar was 36 and the ketones were too high to measure. It was terrifying to see how poorly Sophie became so quickly. There was also a feeling of tremendous guilt as to why we had not spotted this sooner.

The hospital staff at Leeds Teaching Hospitals were all amazing and we can't thank them enough for the care we received. Sophie spent a night in ICU (intensive care unit) and then moved to the ward where we had a steep and fast learning curve to comprehend how to carb count, monitor blood, give insulin and more so we could manage Sophie's type 1 diabetes and be able to go home.

This learning was further complicated by Covid-19 as only one parent was allowed on the ward so there was a lot of pressure on me while Sophie's dad and older sister Amy were only able to join via video calls which were much tougher for them to hear and understand the information.

The third lockdown gave us some much-needed time together as a family where we could adjust to our new way of life without the pressure of school. The downside was we were quite isolated, and Sophie was not able to meet other children with type 1 diabetes or get support from wider family and friends.

The Leeds Children and Young People's Diabetes Service are a brilliant team who are very supportive and always available to help. But what we soon discovered was that we are the experts. Sophie, like all children, is unique, and although the hospital team helps us with things like school care plans and reviewing CGM data, we are best placed to manage Sophie's care - a statement we couldn't imagine saying only 10 months ago.

We are still learning; we are still dealing with lots of firsts and the variety and combination of variables that impact Sophie's blood sugar levels.

We found out about the 'Camp in the Cloud' and were excited to do it and enjoyed the day participating in activities as a family. Sophie and Amy both love drawing and thoroughly enjoyed the comic book workshop. They were delighted some of their creations were selected for a type 1 comic!

We want to enjoy all the activities we did before and for type 1 diabetes not to dictate our lives. We have learnt that no two days are the same! We know we still have more firsts to come, but we are proud of where we are now, almost a year after diagnosis."

United Through Diabetes - #100YearsofInsulin

As 2021 was the centenary anniversary of the discovery of insulin, much of our awareness and promotional work was hinged on this historical breakthrough in the treatment of diabetes.

To that end, we worked collaboratively with Closer Still Media to run a series of activities which commenced on World Diabetes Day, 14th November.

Our activities began with a panel session, entitled **100 Years of Diabetes Research - Past, Present and Future**. A historic look back at the timeline of diabetes research since the discovery of insulin and key advances to date. Discussion also explored clinical outcomes and patient benefits, and our hopes for the future through the continuation of research.

Professor Emeritus David Matthews, Professor of Diabetic Medicine University of Oxford and past Chairman of the DRWF Research Advisory Board hosted the panel of experts which included, Dr Eleanor Kennedy DRWF Research Manager; Dr David Strain, Senior Clinical Lecturer University of Exeter; Professor John Wilding, Professor of Medicine Institute of Life Course and Medical Sciences, University of Liverpool; Dr Mark Evans, University Lecturer (Clinical) Department of Medicine, University of Cambridge; Dr Shivani Misra, Honorary Clinical Senior Lecturer Department of Metabolism, Digestion and Reproduction Imperial College London and DRWF Trustee; and Dr Chloe Rackham, DRWF Research Fellow, University of Exeter.

Throughout the following week, we hosted a series of live and pre-recorded 1-hour evening workshops, which focused on several aspects of diabetes treatment, management and complications. These sessions were facilitated by numerous diabetes experts and attended by a wide mix of people with type 1 and type 2 diabetes, families, parents, carers and others. Additionally, we referred our audiences to a wealth of supporting resources including video and podcast content for further information.

In total, 530 people participated in the event which was run over a 5-day period. Many of these people also revisited the pre-recorded content that was offered.



**Diabetes
Professional
Care - DPC**

Diabetes Professional Care 2021

For the past 6 years, DRWF has been a key supporter of Diabetes Professional Care (DPC), an event that provides free to access CPD accredited education for healthcare professionals delivering diabetes care. As the registration sponsor for this event, we are well positioned to engage with the diabetes specialist teams and industry partners that facilitate and support this event. In 2021, we were able to re-establish a face-to-face connection following the tumultuous year of 2020. A total of 4984 healthcare professionals, from across the primary and secondary care spectrum, attended the event over the course of 2 days, benefitting from an educational programme facilitated by multi-disciplinary teams. The event was opened with a keynote session from Professor Partha Kar OBE, National Specialist Advisor Diabetes, NHS England and Professor Jonathan Valabhji, National Clinical Director for Diabetes and Obesity, NHS England and Improvement.

What do people with diabetes really think about remote consultations?

Virtual consultations and telehealth are not new concepts, however in 2020 with the advent of the pandemic, more people than ever were moving to 'remote' consultations. In order to avoid face-to-face contact in all but the most essential circumstances, digital consultation became mandatory rather than optional. Following this wholesale move, healthcare professionals and health organisations started to look at the pros and cons of such consultations and commissioned surveys to assess user satisfaction. DRWF was asked to support Anne Kilvert Diabetes Consultant,

Northamptonshire Community Diabetes Team, Daventry, UK Charles Fox Honorary Senior Lecturer, Leicester Diabetes Centre, Leicester, UK in their work to answer the question, ‘what do people with diabetes really think about remote consultations?’ The results of the study were published in *Practical Diabetes* Vol 38 No 4, 2021.

Conclusions Without doubt, remote consultations will form a large part of diabetes care in the future. These online and paper surveys demonstrate that many people with access to technology find virtual consultations very acceptable, but there are concerns about confidentiality, safeguarding and ability to communicate or identify emotional distress. The DRWF paper survey provides important information about preferences, irrespective of access to technology. This may partly reflect differences between primary and secondary care, but personal preference was influenced by a wide range of factors, including time and travel; confidentiality and safeguarding; ability to be open and honest in either the virtual or face-to-face setting. There is no ‘one size fits all’ and individual preferences are not dependent on specific categories, such as type of diabetes or even access to technology. More work needs to be done to ensure that remote clinics meet the needs of the whole diabetes population, in particular the provision of a ‘safe space’ for all users.

Abstract

In 2017 the diabetes service in Newham reported a positive response to a trial of virtual clinics but their own NHS trust (Barts Health) struggled to expand the number of virtual services offered. When COVID struck in March 2020, the NHS immediately obtained a licence to a secure platform for video consultations; many appointments took place by phone and the number of face-to-face clinics declined dramatically.

Whether people with diabetes prefer face-to-face, telephone or video consultations depends on whom you ask. We summarise the findings of two published online surveys and report the results of our own paper survey, distributed through the Diabetes Research & Wellness Foundation monthly newsletter, *Diabetes Wellness News*. Respondents to the online surveys were positive about the benefits of virtual consultations, although there were concerns about confidentiality, safeguarding and identification of emotional issues. In contrast, the paper survey (n=301) found that 91% of respondents preferred a face-to-face consultation. Although 36% of respondents had access to video technology, only 7.2% had been offered a video consultation (24% with type 1 diabetes and 3.8% with type 2) and 87% of remote consultations had been by phone. While two-thirds of respondents were at least fairly satisfied with their remote consultations, most people preferred to return to face to face when possible, the most common reason being that communication was easier.

In conclusion, remote consultations will remain an important option in the future, but individual preferences must be taken into account; a combination of remote and face to face may be the most effective approach. Copyright © 2021 John Wiley & Sons.

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Key words

remote consultations; diabetes consultations during COVID-19; consultation preferences

KEY POINTS

- The COVID pandemic has prompted a rapid move to remote consultations for people with diabetes
- Online surveys report a positive response to video consultations but exclude the views of people without access to technology
- A paper survey revealed an overwhelming preference for face-to-face appointments when possible, even among those who possessed the technology
- A wide range of factors influence individual choice. These include: time and travel; confidentiality and safeguarding; ability to be open and honest in either the virtual or face-to-face setting
- Remote consultations are an established option but services need to address individual needs when offering remote or face-to-face appointments. Many people may prefer a combination of both

Research Funding Programme

We provide research grants to researchers whose work we consider offers the best hope and most expedient path to improved understanding of all types of diabetes, new and improved treatments and management strategies, and ultimately a cure. Awards are offered as a 3-year Clinical and Non-Clinical Fellowship and 1-year Pump Priming project awards. Institutional and discretionary awards are available when funds allow. Contract funding of key personnel within the DRWF Human Islet Isolation Facility at the Churchill Hospital, Oxford is subject to proposal and review on a multi-year rolling contract basis.

DRWF is a member of the Association of Medical Research Charities (AMRC), a membership body representing the leading medical and health research charities who deliver high-quality research that saves and improves lives. Working with member charities and partners, AMRC aims to support voluntary sector effectiveness and advance medical research by developing best practice, providing information and guidance, improving public dialogue about research and science, and influencing government.

As a member, we subscribe to AMRC's criteria for the use of peer review for allocating funding and support AMRC position statements on the payment of indirect costs in universities and the use of animals in medical research which seeks to replace, refine and reduce the use of animals (3Rs) in research.

Our annual funding round is offered through open competition, and as such, enables funded researchers to access support for both indirect and direct costs of research via the Charity Research Support Fund (CRSF) and NIHR Clinical Research Networks AcoRD agreement.

We operate a rigorous peer review process by which our Research Advisory Board, clinical and scientific experts in the field of diabetes and related health, assess applications and reports to ensure that only the highest quality and most effective research, carried out using good or best practice methodologies, receives DRWF funding.



As an AMRC member we abide by the five principles of peer review –

- Accountability
- Balance
- Independence
- Rotation
- Impartiality

AMRC carry out an audit of member charities and their peer review processes every 5 years. The 2020 scheduled audit was delayed due to the pandemic and subsequently conducted during 2021. We were successful in achieving continued certification for best practice in peer review.



UEA University of East Anglia

2021 Sutherland-Earl Clinical Fellowship

We received 9 pre-applications for funding, from which 4 full applications were submitted. All 4 candidates were invited to interviews which were carried out by video call on 12th November. The Board of Trustees met on 7th December to review the recommendation for funding and subsequently agreed that the 3-year Fellowship be offered to **Dr Tara Lee, University of East Anglia, for a total of £237,007.**

Tara's work – DILIGENT: Use of Diabetes technology on blrthweight, Labour, Inpatient and postpartum Glycaemia of pregnant womEN with Type 1 diabetes.

“Despite increased use of continuous glucose monitoring (CGM) and insulin pumps, most pregnant women with type 1 diabetes struggle to manage their glucose levels in pregnancy. Many deliver large birthweight babies and experience additional challenges managing their diabetes during hospital admissions and after birth. My project will examine how the mother’s glucose levels and insulin therapy relate to baby’s growth patterns and birthweight. It will also examine which diabetes technologies help pregnant women to achieve their glucose targets during hospital admissions and after birth. I will perform three studies: firstly, focusing on understanding baby’s growth patterns, secondly on examining mother’s glucose levels during hospital admissions, labour and delivery, and thirdly, during the six months after birth. My project addresses three top priority diabetes pregnancy research questions; (1) use of diabetes technology to improve pregnancy care; (2) women’s experiences and choices surrounding labour and delivery and (3) postnatal care and support.”

Pump Priming 2021

A total of 27 applications were received for funding. Applications were reviewed by the DRWF Research Advisory Board on 7th April with recommendations for funding approved by the Board of Trustees on 19th May. Six awards were offered totalling **£119,696.00**. Pump Priming project grants are considered ‘proof of concept’ awards and are funded for a period of 1 year to a maximum of £20,000 per award.



Dr Joanne Boldison, University of Exeter £19,989

Title: Single cell isolations from pancreatic tissue for high-dimensional immune profiling

“Type 1 diabetes occurs when the immune-system attacks a healthy pancreas. Cells of the immune-system, invade the pancreas and insulin-producing cells in the pancreas are destroyed, which results in a loss of blood glucose control. To develop targeted therapy for individuals affected by diabetes, we need to understand the immune cells that invade the pancreas. In humans, access to the pancreas is limited, however the QUOD Bank supports studies by providing tissue samples post-mortem. First, we will setup a new method to separate immune cells from tissue samples of human pancreas to study different cell types, then develop sophisticated analyses to evaluate our data, so we are not bias. To complement our approach, we will use the current method to study pancreatic immune cells from donors with diabetes. This funding will establish a new way, using state-of-the-art technology, to evaluate the invading pancreatic immune cells in more depth.”



Dr Yu Hsuan Carol Yang, University of Exeter £20,000

Title: Interventional neurobiology to regulate hormone secretion: The critical role of galanin in pancreatic islet physiology

“Since its discovery, the role of neurons in pancreas biology remains controversial. This is in part due to the lack of tools required for directly controlling pancreatic nerves and assessing the effects in living animals. Zebrafish studies are translatable to human development and disease given the high conservation of organs and physiology. I have established assays necessary for live zebrafish analysis of pancreas neurobiology and plan to implement these tools by targeting neurons that produce the galanin neuropeptide. The pancreatic islets are important for producing the hormones that help regulate blood glucose levels. Following the increase or decrease in galanin signals, we will visualize the effects on pancreatic islet formation and activity. The tools developed from these studies will be used to help us understand neural control of pancreas biology (including the regulation of hormone release) under normal and diseased states.”



Dr Nerys Astbury, Nuffield Department of Primary Care Health Sciences, Oxford £19,985

Title: Exploring the Long-term health Outcomes following a PrEgnancy with Gestational Diabetes Mellitus (ELOPEGDM)

“Gestational diabetes is a form of diabetes that affects pregnant women. It usually goes away after birth. Getting GDM increases the risk of problems during pregnancy and birth. There is also evidence that women who develop GDM are at much higher risk of developing conditions like type 2 diabetes. But the effect of getting GDM on other conditions as well as on the health of the baby has not been widely investigated.”

Using one of the UK's largest databases of routine healthcare records we will measure the effect getting GDM has on health and disease risks in mothers and their babies. Insight into the full effects that GDM has on women and their babies will provide a boost to research efforts for the early detection, prevention and treatment of GDM."



Dr Astrid Hauge-Evans, University of Roehampton £20,000

Title: A novel and sex-specific role for LEAP2 in the regulation of pancreatic islet function

"Both obesity and increased blood sugar are important factors in the development of type 2 diabetes (T2D). They are controlled by hormones such as insulin and ghrelin. Ghrelin stimulates food intake, promotes weight gain and inhibits insulin secretion from islets in the pancreas, which in turn leads to higher blood sugar levels. Targeting ghrelin action may therefore be a way of preventing or treating obesity and/or T2D, but so far no useful pharmaceutical blockers of ghrelin have been discovered.

Importantly, a new protein from the liver and small intestine has now been found to counteract the effects of ghrelin. Our initial experiments suggest that this small protein, Liver-Enriched Antimicrobial Peptide-2 (LEAP2), stimulates insulin secretion. Interestingly, this action differs between males and females. Our study will investigate the role of LEAP2 in regulating blood sugar levels, focusing on sex-specific differences and the way this peptide affects pancreatic islet function."



University of Nottingham
UK | CHINA | MALAYSIA

Dr Richard Hulse, Nottingham Trent University £19,760

Title: Functional significance of HIF1 α activated dorsal horn sensory neurons in the manifestation of type 2 diabetic neuropathic pain

"We have shown that in type 1 and 2 diabetes, if the spinal cord sensory neurons fail to receive blood, they become damaged and long-lasting pain develops. We think that pain develops in diabetes as reduced blood flow prevents oxygen getting to the spinal cord. Pain signals are generated in our hands and feet, travel along sensory nerves until they reach the spinal cord, where pain information is filtered. Spinal cord sensory neurons normally turn this signal down or off. In diabetes these neurons lose their ability to turn pain signals off, resulting in people with diabetes feeling pain. It is currently unknown why these neurons change their function. HIF1 α is found in neurons when there is reduced oxygen. A mouse model of Type 2 diabetes will be used and, in these animals, I will stop them producing HIF1 α in the neurons, to prevent diabetic neuropathic pain from developing."



Dr Guy Taylor, Newcastle University £19,962

Title: REBEL – CV study: Does Residual β -cELL function and exercise offer synergistic protection against hyperglycaemic induced Circulating Vaso protective dysfunction in type 1 diabetes?

"For people with T1D, exercise is beneficial, potentially reducing the progression of diabetes-related complications. Many people (up to 80%) with T1D still release small amounts of insulin together with C-peptide, a molecule involved in the creation of insulin, from the pancreas. This may also help protect against diabetes complications, although exactly how is currently unknown. One possible way is through endothelial progenitor cells (EPCs), which circulate in the blood and repair blood vessels; with T1D associated with having lower numbers of these important cells. We have recently discovered that individuals who no longer produce any insulin/C-peptide are not able to increase the number of EPCs after exercise, compared to those who still produce insulin/C-peptide from the pancreas. We propose exploring how having some ability to still make insulin/C-peptide may influence how well EPCs work in normal and high blood glucose conditions, and whether this works in combination with exercise."



Islet Cell Research & Transplant

DRWF has made a considerable contribution to the funding of islet cell research and transplant in the UK and around the world. The DRWF Human Islet Isolation Facility at Churchill Hospital, Oxford plays a pivotal role in providing islets for research and transplant as part of a national treatment programme, the clinical element of which is funded by the NHS.

Three personnel are funded within the facility (around 30% of facility staff):

- Lab Manager
- Deputy Lab Manager (post doc researcher)
- Islet Transplant Co-ordinator

During the year, we renewed our commitment to the Lab Manager post with a further 3 years funding totalling £228,752. Dr Stephen Hughes, long-standing Lab Manager retired in October having been funded by DRWF since the facility was launched in 2006. Dr Rebecca Spiers takes up this position with the ongoing commitment of DRWF funding.

Additionally, we agreed a no-cost extension to funding in place for the Deputy Lab Manager post which remained vacant in 2021. We expect this post to be filled in early 2022. The funding for the Islet Transplant Co-ordinator position will be revisited when the current award terminates on 30th April, 2022.

Impact report from the Director of the DRWF Islet Isolation Facility Churchill Hospital, Oxford by Professor Paul Johnson

During the pandemic, the University closed many of its research facilities for various periods of time. This has limited our research activity, but the team has continued to be research active whenever this has been possible. We continue to undertake novel research into the development of physiological islet scaffolds and islet macro-capsules, design of a novel islet culture, and optimisation of islet oxygenation including proteomic characterisation during islet isolation. We were a key partner in a Horizon 20/20 European Grant and continue to be central to two themes (Surgical & Diabetes) of the Oxford Biomedical Research Centre.

The Oxford DRWF Isolation team have continued to be highly recognised in the islet transplant and islet research fields. Professor Paul Johnson has continued to Chair the NHSBT UK Islet Transplant Steering Group throughout this difficult time. This has involved close liaising with the NHS and difficult decisions about keeping islet transplant recipients safe. He has continued to give invited lectures to learned societies, albeit increasingly in a virtual format. Team members have continued to present at international scientific meetings and continue to publish work regularly in peer-reviewed journals with appropriate DRWF acknowledgement.

We have already started to see the return of normal islet isolation activity and have started to reactivate our islet transplant recipient list. We have just started an exciting new initiative with NHSBT called 'Increasing the Number of Organs Available for Research' (INOAR). This important project will enable donor organs from donors with diabetes to now be retrieved routinely from across the UK for research purposes. Up until now, this has been very sporadic and there has been no infrastructure for research retrievals. The Oxford DRWF Islet Isolation Facility will lead an 'Islet Platform' with responsibility for isolating and distributing islets for research from these rare pancreases. This will be a unique resource for researchers as they try to find a cure for diabetes. The 'Islet Platform' has only been made possible as a result of DRWF's long-term partnership with the Oxford Facility.

The impact of an Islet Transplant -

The journey of a transplant recipient –

“I became diabetic at the age of 19 following a viral infection, it came as a shock as there was no history of diabetes in my family. However, once diagnosed I was determined that diabetes would not define my life and I ensured I had good control and lead a full and active life.

Once I had my children, my diabetes control became challenging, particularly in recognising hypos. Suddenly I was not getting the symptoms, and this was leaving me vulnerable. This was life changing for myself and for my family, it began to limit what we felt it was safe for me to do. Eventually, the lack of hypo awareness led to a seriously low episode where I ended up in A&E. After this we self-funded a CGM which helped me stay safe and manage my glucose control.

I was under the care of Good Hope Hospital, and I will always be grateful to my consultant at the time. He acknowledged my struggle with hypo-unawareness and talked to me about an islet transplant, which was ground-breaking at the time. My husband and I met with him several times before deciding to speak to Professor Johnson and his team, who gave us a detailed explanation of the procedure, the benefits and the risks. After careful consideration, I decided that it was the correct course of action for me, as my life had become very limited, and I had a strong fear of losing my future independence. I welcomed the opportunity to explore this exciting prospect.

After comprehensive testing to ensure I was physically fit enough to have the transplant I was put on the waiting list in 2012 and had my first Islet transplant in October 2012. This saw a reduction in insulin, and I began to get my hypo awareness back. The process is not easy, and I initially struggled with the immunosuppression tablets, but the level of support and care from the Birmingham and Oxford team was phenomenal. In April 2013, I had my second transplant, and this was the life changing transplant for me. Slowly, but surely working very closely with the Oxford team, (who were there for me, even at the weekends), I took my first steps to being Insulin free. I cannot describe the immense elation that bought me and my family. To eat a sandwich and to see my islet self-correct my glucose was life changing. I ensured I looked after the islets well and was very careful about what I ate, ensuring I did not over stress the islets. My islet transplants brought me as well as my family newfound freedom, and for the first time in a long time my husband could go to work without worrying about me and I could forget about being diabetic. It truly was amazing.

I was a Deputy Head Teacher at a Primary school at the time of my transplant and believed that because of my poor hypo awareness, I would not be able to take the step into headship. However, following my transplant I had the confidence in my health to apply for the position and have been in that role for nearly six years.

I had five wonderful years insulin free, but slowly my islet function slowed down and overtime, I had to move onto using more insulin. Having recently had COVID, this led to a significant loss of function, and I am now back on an insulin pump. Although this did bring some heartache at the time, I am full of gratitude for my time without insulin and to the wonderful team who supported me. My life is still much better than it was back in 2012, I am independent and still have hypo awareness, which was the main goal of the transplants.

I feel blessed to have been given this opportunity and hope that many diabetics like myself get the same chance.”

Ann

How we raised our money in 2021

Our approach to fundraising – The Trustees are aware of their responsibility and accountability to ensure that the charity fundraises legally, responsibly and effectively.

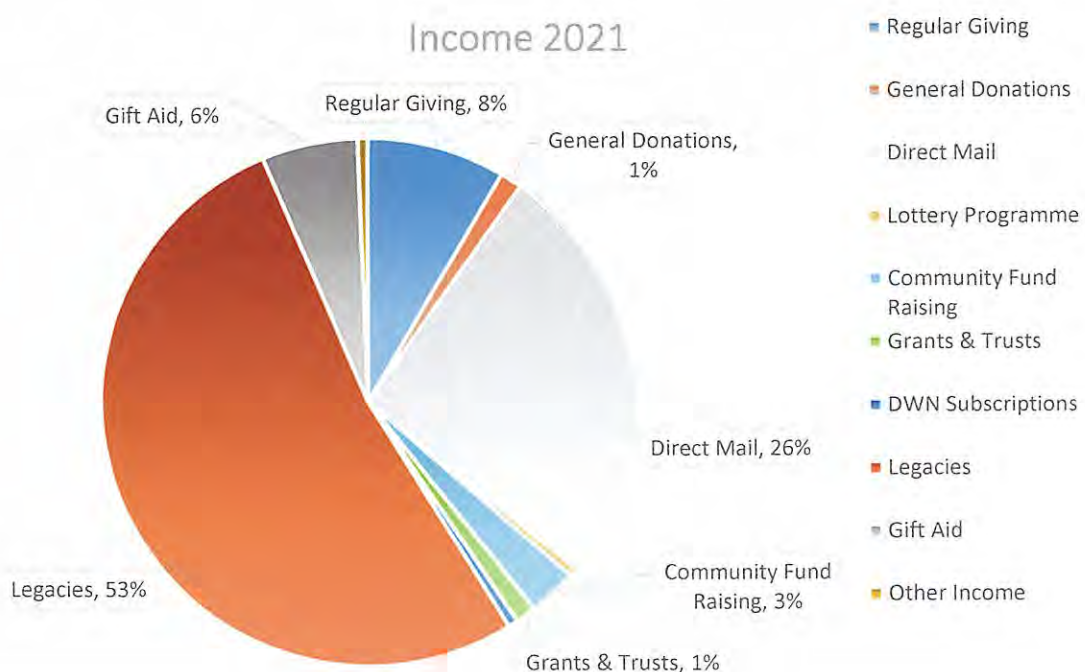
Our plan for 2021 was to maintain focus on building resilience and sustainability for the future through succession planning, diversification of income streams and delivery of purposeful programs that continue to meet the ever-changing needs of people with diabetes.

In the hope of returning to more normal levels of activity in 2021, we set our sights on an ambitious income expectation. This was to support a higher level of expenditure that would occur in the year, particularly in the payment of research grants which had seen an unprecedented level of no-cost extension requests, due to the inability to carry out research work in 2020.

However, it was clear early in the year that our activities would continue to be impacted by Covid-19. Community engagement was still affected with our inability to run both in-person Wellness Day programme activities and fundraising events in any meaningful way until late July/early August, when we started to see a marked increase in interest. Additionally, there was the global impact of supply and shipping issues to navigate which had a significant effect on our Direct Mail programme, causing us to refine the volume of campaigns distributed during the year and manage a few delays in campaigns being mailed.

Direct Mail continues to be the mainstay of our donation related fundraising activity along with Regular Giving and associated Gift Aid. Whilst we saw an increase in the number of deceased notifications received in the year, our committed supporters continued to contribute in response to direct mail appeals with net average gifts maintaining pre-covid levels. Attrition in our Regular Giving programme was stable at around 7%, as has been the case for the past 5 years with most of the attrition relating to deceased notification rather than direct cancellation of support. Whilst unpredictable in nature, legacies increased significantly in the year and accounted for around 53% of total income.

We have identified numerous opportunities to diversify and develop our income streams and are focused on implementing new strategies to strengthen income through all channels.



Corporate Partnerships:

We do not endorse products, but we will support initiatives that increase awareness to DRWF and our activities, and where there is an appropriate message, product or service for people with diabetes. To this end, we have worked to explore meaningful partnership and corporate sponsorship opportunities, where there is a synergy in mission, vision and values. Any potential partnership is assessed for feasibility, compatibility with our own objectives, and risk to ensure there is no detrimental effect to our reputation or fundraising potential. Robust risk assessment supports our desire to only engage in suitable and best value partnerships. Detailed discussion and negotiation ensure that the aims of both parties are complementary and mutually beneficial. This maintains transparency and integrity in all partnerships.

Professional Fundraisers:

We did not work with a professional fundraiser during the year. Commercial participation agreements are in place where necessary.

We can't do this without our amazing supporters!

With the continuation of the pandemic and associated restrictions, much of our planned community fundraising activity was curtailed until the summer months. In August and September, when Covid restrictions had become less stringent, people slowly started to undertake activities outside of their computers and gardens. We continued to rely on committed supporters coming up with novel fundraising ideas, to generate awareness and financial support for our ongoing operations.

Susan Dixon, self-confessed adrenalin junkie abseils the Spinnaker Tower.

Susan Dixon celebrated her 70th birthday by taking on a 100-metre abseil down the Spinnaker Tower, Portsmouth's iconic landmark, with two friends to raise funds for DRWF.

Susan, a retired WREN, said she loved the experience: "I always wanted my family to look up to me. It went far too quickly for me, and I think I'll have to do it again!"

On her reasons for supporting DRWF, Susan said: "I know too many people living with diabetes, and I wanted to raise the profile of this locally based charity and boost their funds to help more people."



Susan abseiled with good friends Dotty Jackson and Charlene Pirie as part of a team to fundraise for DRWF. Susan is no stranger to attempting new challenges on landmark anniversaries. It started with a parachute jump when she was 40 and a trip on the Route 66 across the United States aged 66. The Spinnaker Tower abseil has now got her thinking about doing a tandem parachute jump next.

Penny Durrant and her daughter Sophia decided to go for a close shave and keep a cool head in support of son, Charles, who has type 1 diabetes.



A mother and daughter shaved their heads to raise money for DRWF to raise awareness about type 1 diabetes. Like many people living with type 1 diabetes, Charles Durrant, has experienced some difficulty keeping control of his blood sugar levels during warmer weather. His mother and sister, Penny and Sophia Durrant, felt one way to combat the heat, in solidarity with Charles, would be to keep a cool head – and so they shaved off their hair.

Charles was diagnosed with type 1 diabetes when he was aged 12 – he is now 25. Penny said: "Sophia and I shaved our heads and wore DRWF t-shirts. We are both loving how easy it is to not have much hair. My son, Charles, was diagnosed with type 1 diabetes aged 12. He had been constantly thirsty and urinating frequently – recognised symptoms of type 1 diabetes. I took him to the GP and we were sent straight to hospital. His blood sugars were so high that the hospital couldn't get a reading on them.

Charles stayed in for two or three days learning how to do his insulin injections. We were given an emergency insulin pen and I was told how to use it and warned of the risks that Charles could possibly go into a coma if not in control of the condition. Charles has been really

struggling lately with his blood sugars going too high and then dropping down low into a hypo (hypoglycaemic episode – low blood glucose levels). I think the heat is to blame."

Fundraising Regulator: We are a levy-paying member of the Fundraising Regulator and subscribe to the associated fundraising codes of practice. The charity suppresses individual supporter records against the Mailing Preference Service, Telephone Preference Service and the Fundraising Preference Service, which helps to ensure that we do not approach individuals who have expressly requested that we do not contact them. During the year, we were notified of 21 FPS requests, which are suppressed from all contact, 20% less than received in 2020.

Complaints: The charity has a published complaints procedure, available on its website, and endeavours to respond to enquiries and complaints within the stated timeframe. Most contacts tend to be a request to opt-out of charity communications by existing supporters and we monitor the basis on which people request this i.e. content of appeal, volume of contact; type of contact; method of contact to inform our campaigns with the aim of reducing any perception of unreasonable intrusion, persistent approach or undue pressure to support. We received 1 complaint about our fundraising practices during the year, which was satisfactorily resolved.

GDPR and Data Protection: We are committed to protecting the personal information and privacy of individuals that we engage with and comply with relevant legislation and codes of practice, whilst carrying out our essential work of raising awareness of diabetes, providing information and support, and raising funds. Our privacy policy, published at drwf.org.uk sets out how we capture, process, manage and retain personal information.

Additional security measures were put in place to ensure that remote working practices remained GDPR compliant. The team also undertook GDPR refresher training during the year, facilitated by Hybrid Legal.

Financial Review

Principal income streams in the year were direct mail campaigns; regular giving via direct debit; legacy income and gift aid associated with voluntary donations.

During the pandemic, we adopted a short-term reactive, medium term pro-active and long-term strategic approach to manage the many challenges that we encountered across the year. Income and expenditures were monitored on a weekly basis with budgets/forecasts adjusted accordingly.

Total income was £1,686,061. This was a decrease of 20% on budgeted income but an increase of 0.8% on income received in 2020. Voluntary donations including gift aid receipts at £1,665,724 was up by 1% on 2020. Legacy income, having been budgeted for very cautiously on notes of intent only, was £882,536, down by 3.5% on budgeted income, and £132,726 (17.7%) more than received in 2020.

Total expenditure in the year at £1,900,422 was 12.0% below budget but an increase of 13.5% on expenditure in 2020. At year-end we were showing a deficit of £214,361. This was £162,206 more than the deficit we had budgeted at £52,155.

Direct charitable expenditure was 84p in every £1 spent (84p in 2020).

Government Grants

The charity made use of the Government's Kickstart Scheme to fund digital jobs for six months for 16- to 24-year-olds on Universal Credit. £20,336 was claimed under this scheme. A £212 SSP Covid-19 rebate was also claimed to claim back employees' statutory sick pay related to Covid-19.

Investment Policy

Under the Memorandum and Articles of Association, the charity has the power to invest in any way the trustees see fit. The trustees, in order to minimise risk and having regard to the liquidity requirements of the charity, and to the reserves policy, have historically operated a policy of keeping available funds in a higher interest-bearing deposit account seeking to achieve a rate of deposit interest which matches or exceeds inflation as measured by the retail prices index.

The trustees have regularly reviewed opportunities to increase investment return from short-term, easy access, options bearing in mind the desire to ensure that we can react quickly to appropriate requests for additional research support as they arise.

The trustees are also conscious of on-going cash-flow requirements during a challenging time where historical fundraising methods are raising less income and where new methods of fundraising are being tested at higher cost.

All things considered, the trustees believe it appropriate to continue to explore investment opportunities as they present themselves, with a view to maximising return on its deposits.

Reserves Policy

To safeguard the need for sufficient funds to cover on going management, administration and support costs, as well as respond to further grant requests that might arise, the Board aims to maintain unrestricted, free reserves at a level that equals 3-6 months of operating and charitable expenditures, which equates to between £558,993 and £1,117,986.

During financial year 2021, total expenditure was £1,900,422. Allowing for adjustments and forward research commitments, the charity's expenditures for financial year 2022 are likely to be in the region of £2,235,970. At 31st

December 2021, the charity held free reserves (unrestricted reserves less fixed assets) of £2,751,693. This is the equivalent of approximately 15 months operating and charitable expenditures.

The trustees are committed to strengthening existing income streams whilst diversifying fundraising activities to reduce reliance on single sources. It is accepted that this will take investment in activities where the accuracy of predicting response rates, in terms of volume or value of gift, will be more challenging in the first instance.

Current reserves, whilst in excess of those anticipated, will enable us to navigate these more challenging times whilst diversifying income generation and developing the charity's objective activities, for future sustainability.

Going concern

The trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements having considered known commitments, forecasts and projections and possible pressures on income generation. After making these considerations, the trustees conclude that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing the financial statements.

Our focus in 2022 and beyond

The pandemic period of 2020/21 has shown us the need to be agile, integrated and adaptive in our approach. Whilst the past year has been incredibly challenging, we have been resourceful where possible and gained invaluable experience that will help us reconfigure our approach to 'what good looks like' for DRWF, our supporters and beneficiaries.

To this end, we have scoped out a 3-year growth strategy which clearly defines our vision, mission and values and the direction that we will take to build a robust organisation that is well-positioned for the future.

Through the work of our Core Fundraising Group, we have identified numerous ways in which to refine and develop existing fundraising activities to enable us to strengthen and diversify income streams.

Through our Wellness Action Group, we have engaged with a broad spread of beneficiaries to discuss current DRWF service/support provision; the availability of support and resources in the wider diabetes community; opportunities and threats to current activities and ways in which to develop and expand on our portfolio of programmes.

Whilst current reserves are in-excess of the operating and direct charitable expenditures required to meet the stated 3–6-month policy, it is expected that investment will be required to test and develop new income streams over time, whilst allowing us to navigate fluctuations in current activities and remain responsive to requests for discretionary research funding. The Trustees will consider designating a percentage of current reserves to support investment in our growth strategy in 2022.

Our focus is very much on ensuring that we have the necessary funds to build a resilient and sustainable organisation that can meet the ongoing, and ever-changing, needs of our beneficiaries.

Reference and Administrative Details

Charity Number:	1070607
Company number:	03496304
Registered Office:	Building 6000 Langstone Technology Park Havant, Hampshire PO9 1SA Tel: 023 92 637808 Website: drwf.org.uk
Trustees & Directors:	Mr W. Michael Gretschel (Chairman) Mr John Alahouzos Mr Jeffrey Harab Mrs Valerie Hussey Mr Steve Jones (elected October 2019) Dr Shivani Misra (elected January 2020)
Chief Executive:	Mrs Sarah Tutton (Bone)

Advisers

Bankers:	Barclays Bank Plc 1 Churchill Place London E14 5HP
Solicitors:	Blake Morgan LLP New Kings Court Tollgate Chandlers Ford Eastleigh SO53 3LG
Secretary:	Blake Morgan Company Secretary Services
Auditors:	Moore Kingston Smith LLP Devonshire House 60 Goswell Road London EC1M 7AD

Structure, Governance & Management

Governing Document - The Diabetes Research and Wellness Foundation, also known as DRWF, is a registered charitable company (Registered Charity No.1070607 and Company No 03496304) limited by guarantee and governed by its Memorandum and Articles of Association dated 15 January 1998 and amended by special resolutions passed on 15th June 1998, 2nd December 2001 and 24th April 2005.

Recruitment & Appointment of Trustees - The charity trustees are also the directors of the company for the purposes of company law.

As dictated by the charity's Articles of Association, directors are appointed by the Company Members. Any person desiring to be admitted to the membership of the company is required to apply in writing. No person shall be admitted until approved by resolution passed in accordance with the Articles of Association by the existing members, who hold absolute discretion as to the admission of any person.

The Trustees of the charity, being mindful that the board should offer a diversity of skills to fulfil statutory and fiduciary duties, are open to recommendations for new board members.

The business and medical/health related skills within the existing board member pool are supported by personal experience of diabetes, which assists the board in ensuring that objective activities meet beneficiary need.

Additionally, the board is supported in its decision-making processes by a Research Advisory Board, which has an independent Chairman. The RAB members review applications and make recommendation for research funding awards. An Editorial Advisory Board provides support to the provision of health and social care information. Both boards are made up of clinicians, scientists and other 'experts' in the field of diabetes and related health and strengthen the services that the charity offers its beneficiaries.

All board members are subject to 'conflict of interest' policies and processes.

Trustee Induction and Training – Newly elected Trustees receive an Induction Pack that outlines the role and responsibilities of the Trustee, along with a history of the structure and purpose of the charity.

The pack includes a copy of the governing document and contact details of all board members. There is also an outline of the Chairman of the Board's role and responsibilities along with details of the executive officer taking responsibility for the daily management of the charity. Trustees are required to comply with the eligibility requirements set out by Charity Commission and to review and update an annual Register of Interests.

Trustees are kept up to date with various governance publications and notices from appropriate professional advisory memberships. Additionally, trustees might be advised of appropriate governance courses that they may benefit from attending to ensure diversity and continuity of knowledge and skills within the Board.

Newly elected trustees are invited to attend a Review Meeting with the chair, after an agreed time lapse, in order to feedback their first impressions and address any concerns. Trustees are actively encouraged to participate in the charity's outreach programme of educational events.

Organisation - The strategic direction and policy of the charity is the responsibility of the Board of Trustees. During 2021 six trustees served on the Board, from a variety of professional backgrounds relevant to the work of the charity. Ordinarily, the Board meets at least once each year in person and holds quarterly teleconference meetings with additional meetings organised as required. Due to the continuation of coronavirus and ever-changing restrictions, the Board continued to conduct meetings via Zoom. There were no meetings in-person during the year.

The Chief Executive carries out the daily operations of the charity and is responsible to the Board of Trustees.

Connected & Related Parties – DRWF co-operates on several intellectual matters including sharing articles and reports with the Diabetes Research and Wellness Foundation Inc., a 501C3 Not for Profit Company operating in the United States; Association pour la recherche sur le diabete (A-rd) in France; Insamlingsstiftelsen Diabetes Wellness Network Sverige (Sweden); Diabetes Wellness Suomi (Finland) and Diabetes Wellness Norge (Norway). These organisations are completely autonomous and independent with no legal connections.

- Mr. W. Michael Gretschel is the Chairman of the Board of Trustees of the Diabetes Research and Wellness Foundation and is the volunteer President of the Diabetes Research and Wellness Foundation Inc (USA) but does not serve on its board of directors. He is also a Board member of A-rd (France), DWNS (Sweden), DWS (Finland) and DWN (Norway).
- Mr. John Alahouzos is the Chairman of the Diabetes Research and Wellness Foundation Inc (USA) and serves on the Board of Trustees of the Diabetes Research and Wellness Foundation. He also is a Board member of A-rd (France), DWNS (Sweden), DWS (Finland) and DWN (Norway).
- Mr. Jeffrey Harab sits on the Board of Trustees of the Diabetes Research & Wellness Foundation and is also a Board member of A-rd (France).
- Mrs. Valerie Hussey sits on the Board of Trustees of Diabetes Research & Wellness Foundation and is also an 'alternate member' on the Board of DWNS (Sweden).
- The Chief Executive of the Diabetes Research & Wellness Foundation, Sarah Tutton, sits on the Board of DWN (Norway).

Links between these independent organisations, has proved invaluable to the charity in helping to strengthening it's international presence, for the purpose of supporting diabetes research programmes and global awareness activities.

A Register of Interests for Board Members and Key Management Personnel is maintained and reviewed on an annual basis.

Remuneration Policy for senior staff - The Trustees, who are also the directors, and the Chief Executive Officer comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity on a day-to-day basis.

All trustees give their time freely and no trustee received remuneration in the year. Details of trustees' expenses and related party transactions are disclosed in note 13 to the accounts.

The salary of all staff, including the chief executive officer, is reviewed annually and normally increased in accordance with average earnings. In view of the nature of the charity, its size and structure, the trustees undertake a benchmarking exercise, using online research/tools, comparing the charity's salaries against pay levels offered for similar roles within other charities and companies.

The benchmark is the mid-point of the range paid for these similar roles with consideration given to workload, level of responsibility, anticipated rate of inflation and other published research on third sector rates of pay.

The charity considers that its remuneration policy –

- Ensures delivery of the charity's objectives
- Attracts and retains a motivated workforce with the skills and expertise necessary to ensure organisational effectiveness
- Is equitable and coherent across the organisation
- Reflects the purposes, aims and values of the charity
- Ensures that pay levels and pay increases are appropriate in the context of the interests of our beneficiaries

Risk Management – The Trustees have examined the major strategic, business, reputational and operational risks that the charity faces. This involves identifying specific risks; assessing their likelihood of occurrence and potential impact; determining what steps could be taken to mitigate those risks and delegating responsibility to key staff for overseeing management of the associated controls. The risk register is reviewed annually to ensure the adequacy of internal control mechanisms. The trustees consider that the Charity has robust internal procedures, systems and processes and believe that risk assessment is embedded throughout the organisation.

The risk register was reviewed and scored in September and resulting risks discussed by the Board at a meeting held on 28th October.

There were several risks which ranked as **MEDIUM** (3 – 5 amber) where additional control measures or alternative methods of working may be required, and these are being monitored. There were no high-level risks (score 6-9) identified during the review. The higher-ranking risks identified in 2020 were largely related to business-continuity during the initial pandemic period. These risks have now reduced in score.

The Board considers that the major risks facing the charity at present, are –

- Fundraising and dependency on single income streams
- Data security including loss of data
- Loss of key staff
- Reserves policy and cash flow sensitivity
- Government policy
- Disaster recovery

The charity is focused on diversifying activities to reduce reliance on unpredictable or single income streams with a ‘Core Fundraising Group’ meeting monthly to review and develop strategy to support this. We are conscious that any major fluctuations in our biggest key streams will impact on our reserves and potentially affect our ability to deliver on purpose-related activities. As a small team of staff, the loss of any one of the team would have a considerable impact on our ability to carry out certain activities. To support retention, we have implemented several ‘motivational mapping’ exercises over the last few years to ensure that we play to individual strengths and retain expertise. Equally our remuneration policy is designed to ensure that we attract and retain staff. However, we are putting in additional contingency measures by way of out-sourced service support where appropriate. We continue to monitor external factors through business continuity planning.

Covid-19 risk assessment/business continuity

When the impact of Covid-19 hit in 2020, we developed a pandemic response/business continuity checklist that outlined key considerations to help us manage –

- Health and safety of employees
- Critical activities
- Dependencies – staffing
- Key suppliers/contractors (disaster recovery/business continuity plans)
- Communications strategy
- Technology requirements
- Activation plans

This has served as an effective way to manage the risk and potential impact on employees, stakeholders, beneficiaries and our key activities and we continue to work within this risk management framework.

Trustees' responsibilities in relation to the financial statements – The trustees, who are also directors of Diabetes Research and Wellness Foundation for the purposes of company law, are responsible for preparing the trustees' annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice.)

Company law requires trustees to prepare financial statements for each financial year that give a true and fair view of the state of the affairs of the charitable company and of the outgoing resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently.
- observe the methods and principles in the Charities SORP.
- make judgements and estimates that are reasonable and prudent.
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

Auditors – Moore Kingston Smith LLP have indicated their willingness to continue in office and are deemed to be reappointed in accordance with section 487(2) of the Companies Act 2006.

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

On Behalf of the Trustees



Michael Gretschel Chairman

04-05-2022

Dated

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF DIABETES RESEARCH & WELLNESS FOUNDATION

Opinion

We have audited the financial statements of Diabetes Research & Wellness Foundation ('the company') for the year ended 31 December 2021 which comprise the Statement of Financial Activities, the Summary Income and Expenditure Account, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 'The Financial Reporting Standard Applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2021 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, 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 trustees' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. 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. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements themselves. 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 2006

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

- the information given in the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' annual report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' annual report.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; [or]
- we have not received all the information and explanations we require for our audit. [or]
- the trustees were not entitled to prepare the financial statements in accordance with the small companies' regime and take advantage of the small companies exemption in preparing the trustees' annual report and from preparing a strategic report.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 25, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees 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 trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company 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 (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs (UK) we exercise professional judgement and maintain professional scepticism throughout the audit. We are 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 purposes of expressing an opinion on the effectiveness of the charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' 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 charitable company'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 charitable company 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.

Explanation as to what extent the audit was considered capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below.

The objectives of our audit in respect of fraud, are to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charitable company.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity (FRS102) SORP, and UK financial reporting standards as issued by the Financial Reporting Council
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.

- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of management and those charged with governance and obtaining additional corroborative evidence as required.

There are inherent limitations in the audit procedures described above. We are less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the company'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 any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Moore Kingston Smith LLP

.....
Neil Finlayson (Senior Statutory Auditor)

for and on behalf of Moore Kingston Smith LLP, Statutory Auditor

Date: 6 May 2022.....

Devonshire House
60 Goswell Road
London
EC1M 7AD

Diabetes Research and Wellness Foundation
Statement of Financial Activities (Incorporating the Summary Income and Expenditure Account)
For the year ended 31 December 2021

		Unrestricted Funds £	Restricted Funds £	2021 TOTAL £	Unrestricted Funds £	Restricted Funds £	2020 TOTAL £
Income	Note						
Donations and Legacies	2	1,530,774	15,286	1,546,060	1,494,220	24,525	1,518,745
Charitable Activities	3	119,664	-	119,664	131,303	-	131,303
Other Charitable Trading Activities	4	15,219	-	15,219	8,004	-	8,004
Investments		250	-	250	6,101	-	6,101
Income from Charitable Activities		1,665,907	15,286	1,681,193	1,639,628	24,525	1,664,153
Other Income	5	4,868	-	4,868	8,232	-	8,232
Total Income		<u>1,670,775</u>	<u>15,286</u>	<u>1,686,061</u>	<u>1,647,860</u>	<u>24,525</u>	<u>1,672,385</u>
Expenditure On:							
Raising Funds	6	311,127	-	311,127	265,996	-	265,996
Charitable Activities	7	1,589,295	-	1,589,295	1,392,125	16,269	1,408,394
Other		-	-	-	-	-	-
		<u>1,900,422</u>	<u>-</u>	<u>1,900,422</u>	<u>1,658,121</u>	<u>16,269</u>	<u>1,674,390</u>
Net Income		<u>(229,647)</u>	<u>15,286</u>	<u>(214,361)</u>	<u>(10,261)</u>	<u>8,256</u>	<u>(2,005)</u>
Transfer between Funds	20	-	-	-	-	-	-
Net Movement in Funds		<u>(229,647)</u>	<u>15,286</u>	<u>(214,361)</u>	<u>(10,261)</u>	<u>8,256</u>	<u>(2,005)</u>
Total Funds brought forward		2,981,340	8,256	2,989,596	2,991,601		2,991,601
Total funds carried forward at 31 December 2021		<u>2,751,693</u>	<u>23,542</u>	<u>2,775,235</u>	<u>2,981,340</u>	<u>8,256</u>	<u>2,989,596</u>

There were no recognised gains or losses other than the deficit reported for the financial year. All activities in the year relate to continuing operations.

The accompanying notes form an integral part of these financial statements.

Diabetes Research and Wellness Foundation
Balance Sheet
As at 31 December 2021

	Note	2021 £	2021 £	2020 £	2020 £
Fixed Assets					
Tangible Assets	16		6,535		4,800
Current Assets					
Debtors	17	541,825		139,465	
Cash at bank and in hand		<u>2,708,728</u>		<u>3,160,905</u>	
		3,250,553		3,300,370	
Creditors : Amounts falling due within one year	18	<u>(481,853)</u>		<u>(315,574)</u>	
Net Current Assets			<u>2,768,700</u>		<u>2,984,796</u>
Total Net Assets			<u><u>2,775,235</u></u>		<u><u>2,989,596</u></u>
 Reserves					
Restricted Fund	20		23,542		8,256
General Reserve	20		<u>2,751,693</u>		<u>2,981,340</u>
			<u><u>2,775,235</u></u>		<u><u>2,989,596</u></u>

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime within Part 15 of the companies Act 2006 and with the Financial Reporting Standard FRS 102 SORP (effective January 2015)

The financial statements were approved, and authorised for distribution, by the Trustees on 04-05-2022 and signed on their behalf by:


 Trustee
 Michael Gretschel

The accompanying notes form an integral part of these financial statements

Company number: 03496304

Diabetes Research and Wellness Foundation
Statement of Cash Flows
For the year ended 31 December 2021

	Note	2021 £	2020 £
Cash used in Operating Activities	24	(448,411)	(104,230)
Cash Flows from Investing Activities	Interest on Bank Deposit Fixed Assets	250 <u>(4,016)</u>	6,101 <u>(3,225)</u>
Cash Flows from Financing Activities		0	0
Change in cash and cash equivalents in the year		<u>(452,177)</u>	<u>(101,354)</u>
Cash and cash equivalents brought forward 1st January		3,160,905	3,262,259
Cash and cash equivalents at 31st December 2021		<u><u>2,708,728</u></u>	<u><u>3,160,905</u></u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements
For the year ended 31 December 2021

1 Accounting Policies

The financial statements have been prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102). The Charitable Company is a public benefit company for the purposes of FRS 102 and therefore the Charity also prepared its financial statements in accordance with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (The FRS 102 Charities SORP), the Companies Act 2006 and the Charities Act 2011.

The trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charity to continue as a going concern. The charity has given due consideration for the effects of the Covid-19 outbreak. The charity will continue with a full programme of direct mail campaigns to ensure continuity of its major income streams in the next financial year. The annual programme of Awareness Events and Fund Raising Events will be a combination of online and traditional events and it is anticipated the income streams will increase in the next financial year. The trustees have made this assessment for a period of at least one year from the date of approval of the financial statements. In particular the trustees have considered the charity's forecasts and projections and have taken account of pressures on donations income. After making enquiries the trustees have concluded that there is a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. The charity therefore continues to adopt the going concern basis in preparing its financial statements.

The financial statements are prepared in sterling, which is the functional currency of the company. Monetary amounts in these financial statements are rounded to the nearest pound. The financial statements have been prepared on the historical cost convention, modified to include certain financial instruments at fair value. The principal accounting policies adopted are set out below.

Critical accounting estimates and areas of judgement

In the view of the trustees in applying the accounting policies adopted, no judgements were required that have a significant effect on the amounts recognised in the financial statements nor do any estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

The principal accounting policies of the company are set out below:

Income

Income is included on an accruals basis except that donations under gift aid together with the associated income tax recoveries are credited as income when the donations are received. Membership Subscriptions are apportioned across the membership subscription period.

Legacies

Legacies are recognised following probate and once there is sufficient evidence that receipt is probable and the amount of the legacy receivable can be measured reliably. Where entitlement to a legacy exists but there is uncertainty as to its receipt or the amount receivable, details are disclosed as a contingent asset until the criteria for income recognition are met.

Public Donations and Gifts-in-Kind

Incoming resources in the form of Gifts-in-Kind are included in the Statement of Financial Activities only when assets donated to the charity are distributed. Gifts-in-Kind are donations of commodities directly usable in charitable programmes, such as food, blankets, books, agricultural and medical supplies. The Charity has an internationally recognised and accepted monitoring programme in place to ensure that commodities are appropriately valued at wholesale or less, culturally appropriate for the designated programme, and can be both properly shipped and distributed gratis to the designated beneficiaries.

Gift Aid Repayments

Income from gift aid repayment claims is only included for claims which have been submitted for tax periods ending on or before the year end and when the receipt of this income is certain.

**Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2021**

1 Accounting Policies (continued)

Expenditure

Expenditure, which is charged on an accruals basis, is allocated between:

- expenditure incurred directly in the effort to raise voluntary contributions (cost of generating funds);
- expenditure incurred directly to the fulfilment of the charity's objectives (charitable expenditure);

Charitable expenditure comprises all the expenditure incurred by the charity in meeting its charitable objectives and is further analysed between:

- grants payable in the furtherance of the charity's objectives
- costs of activities in furtherance of the charity's objectives
- support costs of the charity

Cost Apportionment

Where items of expenditure involve more than one cost category these costs have been apportioned on a reasonable basis as determined by the trustees. One particular area where the cost is material to the charity is in the production and distribution of direct mailings.

One of the purposes of the mail shot is to develop a database of names of people with a particular interest in the activities of the charity and its charitable objects. It is held that individuals who make a £10 or greater donation, in response to the mailing, have a degree of interest in diabetes. They are interested because they suffer from diabetes, know somebody who does or could themselves be at risk of developing the condition. These are precisely the people whom the charity is trying to help and consequently they receive the benefits of the educational material provided by the charity. These high interest individuals constitute 25% of the total responses; so the charity allocates 25% of the cost of the mailing to costs in furtherance of the charity's objects.

Furthermore the remaining expenditure has been allocated on the basis of whether the educational content of the individual mailing is significantly high enough so as to be material. When this holds true the remaining cost of the mailing is allocated on a pro-rata basis comparing the educational content (costs in furtherance of the charity's objects) to the fund raising content (costs of generating funds). The educational content is determined by the amount of text and space on each mailing that is dedicated to material of an educational nature.

Telemarketing expenditure is allocated in a consistent manner with mailings, as described above, hence the charity allocates 25% of the cost of the telemarketing calls to costs in furtherance of the charity's objectives, with the remaining expenditure allocated on the basis of whether the time spent during the telephone call is in accordance with the charity's objects or otherwise.

Fund raising expenditure i.e. Text that may induce a donation from the recipient, is allocated upon the basis of the volume of the text and space that is not related to text of an educational nature.

Support costs comprise all other overhead costs for the running of the charity as an organisation.

Fund Accounting

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes. The aim and use of each fund is set out in the notes to the financial statements.

Unrestricted funds are donations and other incoming resources received or generated for expenditure on the general objectives of the charity.

Restricted funds are donations received from a donor who has specified a particular area of the charity's work to which the donation should be allocated.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2021

1 Accounting Policies (continued)

Grants Payable

Grants are recognised when they become due for payment. Included within the Statement of Financial Activities is the cost of grant instalments that are payable to charitable organisations / individuals in accordance with the charity's governing instruments, together with any grants payable for the year, but not paid by the year end date. The value of grants awarded which are subject to the completion of a future year's performance is disclosed as a Financial Commitment in Note 18.

Tangible Fixed Assets and Depreciation

Depreciation is calculated to write down the cost less estimated residual value of all tangible fixed assets held for charity use by equal annual instalments over their expected useful economic lives. The rates generally applicable are:

Office equipment, fixtures and fittings	5-7 years straight line
---	-------------------------

All tangible fixed assets costing more than £250 are capitalised at their cost to the charity.

Foreign Currencies

Transactions in foreign currencies are translated at the exchange rate ruling at the date of the transaction. Monetary assets and liabilities in foreign currencies are translated at the rates of exchange ruling at the balance sheet date. All exchange differences are dealt with through the statement of financial activities.

Leasing Commitments

Rentals payable under operating leases are charged against income on a straight line basis over the lease term.

Other Financial Instruments

i. Cash and cash equivalents

Cash and cash equivalents include cash at banks and in hand and short term deposits with a maturity date of three months or less.

ii. Debtors and Creditors

Debtors and creditors receivable or payable within one year of the reporting date are carried at their at transaction price. Debtors and creditors that are receivable or payable in more than one year and not subject to a market rate of interest are measured at the present value of the expected future receipts or payment discounted at a market rate of interest.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2021

2 Donations and Legacies				2021	2020
				£	£
Donations				654,919	760,750
Lottery Programme				8,605	8,185
Legacies Received				882,536	749,810
				<u>1,546,060</u>	<u>1,518,745</u>
Included in the above are restricted donations of £15,286 (2020: £24,525)					
3 Charitable Activities				2021	2020
				£	£
Grants Received				20,548	22,721
Gift Aid Receipts				99,116	108,582
				<u>119,664</u>	<u>131,303</u>
4 Other Charitable Trading Activities				2021	2020
				£	£
Membership Subscriptions				10,223	6,216
Event Fees and Sponsorship				4,996	1,788
				<u>15,219</u>	<u>8,004</u>
5 Other income				2021	2020
				£	£
Miscellaneous Income				4,868	8,232
				<u>4,868</u>	<u>8,232</u>
6 Fund Raising Costs				2021	2020
				£	£
Caging				139,103	125,046
Carriers				1,064	1,535
Computer Charges				5,489	3,038
Lettershop and Data				10,183	3,179
Postage and Shipping				34,346	16,510
Printing				7,996	1,654
Publicity				2,286	2,331
Marketing Costs				7,539	7,602
Mail Pack Premiums				15,491	14,995
Lottery Costs				3,866	7,175
Staff Costs (see Note 12)				70,353	68,431
Sweepstake Winners				13,411	14,500
				<u>311,127</u>	<u>265,996</u>
7 Charitable Activities					
	2021	2021	2021	2021	2021
	Direct	Grants	Gifts in	Support	Total
	Expenditure	Awards	Kind	Costs	
	(Note 10)	(Note 8)	(Note 9)	(Note 11)	
	£	£	£	£	£
Research into the Relief of Diabetes	-	372,177	-	415,457	787,634
Raising Public Awareness of Diabetes	801,661	-	-	-	801,661
	<u>801,661</u>	<u>372,177</u>	<u>-</u>	<u>415,457</u>	<u>1,589,295</u>
	2020	2020	2020	2020	2020
	Direct	Grants	Gifts in	Support	Total
	Expenditure	Awards	Kind	Costs	
	(Note 10)	(Note 8)	(Note 9)	(Note 11)	
	£	£	£	£	£
Research into the Relief of Diabetes	-	289,471	-	407,605	697,076
Raising Public Awareness of Diabetes	711,318	-	-	-	711,318
	<u>711,318</u>	<u>289,471</u>	<u>-</u>	<u>407,605</u>	<u>1,408,394</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2021

8 Grant Awards	2021	2020
	£	£
University of Oxford	122,386	103,351
University of Exeter (previously Kings's College London) – Non Clinical Fellowship 2018	64,978	64,978
Cardiff University - Non Clinical Fellowship 2021	64,978	
Association pour la Recherche sur la Diabete	900	864
Diabetes Wellness Network Canada		(700)
Diabetes Research Institute Foundation – University of Miami		50,415
University of Bristol - 2020 Pump Priming Award		18,000
University of Cambridge - 2020 Pump Priming Award		20,000
University of Strathclyde - 2020 Pump Priming Award		19,926
University of Exeter - 2020 Pump Priming Award		20,000
University of Dundee - 2020 Pump Priming Award		19,693
University of Exeter - 2020 Pump Priming Award		19,600
University of Exeter - 2021 Pump Priming Award	19,989	
University of Exeter - 2021 Pump Priming Award	20,000	
University of Oxford - 2021 Pump Priming Award	19,985	
University of Roehampton - 2021 Pump Priming Award	20,000	
Nottingham Trent University - 2021 Pump Priming Award	19,760	
Newcastle University - 2021 Pump Priming Award	19,962	
	<u>372,938</u>	<u>336,127</u>
Less: Unclaimed grants written back	(761)	(46,656)
	<u><u>372,177</u></u>	<u><u>289,471</u></u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2021

9 Gifts-in-Kind

The following donations made during the year were claimed as Gifts-in-Kind and are valued in accordance with current market conditions prevailing when the gift was made.

Number of Shipments	Gifts-in-Kind value	Shipping Costs	2021 Total	2020 Total
-	-	-	-	-
-	-	-	-	-

10 Direct Charitable Expenditure

	2021 £	2020 £
Staff Costs (see Note 12)	378,118	373,572
Postage	163,383	141,033
Printing	87,870	42,629
Publicity	15,183	13,247
Mail Pack Premiums	119,918	107,114
Carriers	8,241	10,962
Grant Costs	819	1,165
Lettershop and Data	28,129	21,596
	<u>801,661</u>	<u>711,318</u>

11 Support Costs

	2021 £	2020 £
Other Staff Costs	2,051	5,643
Professional Costs	29,665	22,012
Management Charge	141,810	141,483
Office Expenses	84,748	82,792
Establishment Expenses	43,881	44,278
Bank Charges and Interest Paid	3,444	3,298
Foreign Exchange (Loss)	3,998	5,175
Depreciation	2,281	1,675
Irrecoverable VAT	65,877	70,801
Amounts paid to Auditors	15,022	17,644
Company Secretarial Fees	350	350
Other Overhead Costs	22,330	12,454
	<u>415,457</u>	<u>407,605</u>

Support Costs are allocated to the Charitable expenditure of the charity in proportion to the direct cost of the activity

12 Wages and Salaries

	2021 £	2020 £
Wages and Salaries	404,366	398,678
Social Security Costs	31,241	31,138
Pension Costs	12,864	12,187
	<u>448,471</u>	<u>442,003</u>

The key management personnel of the charity are the Trustees and the CEO. The total amount paid for key management personnel was £70,339 (2020: £66,941).

2021 No.	2020 No.
-------------	-------------

The number of higher paid employees was in the band:

£60,000 - £70,000	1	-
-------------------	---	---

Pension contributions payable for the above individual was £2,722 (2020: £2,592).

The average number of full-time equivalent employees during the year was 12.5 (2020: 11.5).

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2021

13 Payments to Trustees

No trustee or person with a family or business connection with a trustee, received remuneration in the year, directly or indirectly, from the charity.

Trustee Expenses for Travel and Meeting Costs were £nil (2020: £nil) of which £nil (2020: £nil) was reimbursed directly to nil (2020: nil) Trustees.

14 Surplus of Income over Expenditure	2021	2020
	£	£
The surplus of income over expenditure is stated after charging:		
Auditors' Remuneration:		
- Audit Fee relating to the Financial Year	15,500	15,250
- In respect of non audit services	1,965	1,965
Operating Lease rentals		
- Plant & Machinery	3,081	3,126
- Other Assets	28,000	28,001
Foreign Exchange Loss	3,998	5,175
Depreciation	<u>2,281</u>	<u>1,675</u>

15 Taxation

The company, being a registered charity, is not liable for corporation tax in respect of its operations for the year.

16 Tangible Fixed Assets for Charity Use

	Office equipment, fixtures and fittings
	£
Cost	
At 1 January 2021	30,988
Additions in Year	4,016
Disposals in Year	-
At 31 December 2021	<u>35,004</u>
Depreciation	
At 1 January 2021	26,188
Provided in the year	2,281
Eliminated on Disposal	-
At 31 December 2021	<u>28,469</u>
Net Book Value	
At 31 December 2021	<u>6,535</u>
At 31 December 2020	<u>4,800</u>

17 Debtors

	2021	2020
	£	£
Trade Debtors	6,000	-
Other Debtors	25,013	9,111
Prepayments and Accrued Income	510,812	130,354
	<u>541,825</u>	<u>139,465</u>

All Debtors except prepayments are financial instruments and are measured at settlement value

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2021

18 Creditors : Amounts falling due within one year	2021	2020
	£	£
Trade Creditors	71,390	45,101
Grants Payable (see below)	336,236	205,741
Accruals and Deferred Income	61,650	50,929
Tax and Social Security	12,577	12,414
Other Creditors	-	1,389
	<u>481,853</u>	<u>315,574</u>

Included within other creditors is a pension creditor of £nil (2020: £nil)

All Creditors except deferred income are financial instruments and are measured at settlement value

Reconciliation of Grants Payable:

Commitments at 1 January 2021	205,741	309,784
Grants Payable for the Year (see Note 8)	372,177	289,471
Grants Paid during Year	<u>(241,682)</u>	<u>(393,514)</u>
	<u>336,236</u>	<u>205,741</u>

In addition to the amounts committed and accrued noted above, the trustees have also authorised the continuation of certain grants which are subject to the recipient fulfilling certain conditions. The details of these further commitments can be found in Note 22.

19 Deferred Income	2021	2020
	£	£
Deferred Income B/FWD 1st January 2021	4,040	4,303
Released to Income in Year	(4,040)	(4,303)
Income Deferred In Year	<u>5,972</u>	<u>4,040</u>
Deferred Income C/FWD 31st December 2021	<u>5,972</u>	<u>4,040</u>

Deferred Income comprises:

- Newsletter Membership Subscriptions which are renewable annually on a rolling 12 monthly basis
- Event Registration and Exhibition Fees received in advance of the event taking place
- Restricted Grants Received that will not be utilised until future periods

20 Reserves	Balance at 1 January 2021	Transfer from General Reserve In	Income in Year	Expenditure in Year	Net Movement in Year	Balance at 31 December 2021
	£	£	£	£	£	£
Restricted Fund relating to Diabetes Research	-	-	-	-	-	-
Restricted Fund relating to The Big Give Christmas Challenge	8,256	-	14,786	-	14,786	23,042
Restricted Fund relating to Diabetes Wellness Day Hartlepool	-	-	500	-	500	500
Designated Growth Fund	150,000	-	-	-	-	150,000
General Reserve	<u>2,831,340</u>	<u>-</u>	<u>1,670,775</u>	<u>(1,900,422)</u>	<u>(229,647)</u>	<u>2,601,693</u>
	<u>2,989,596</u>	<u>-</u>	<u>1,686,061</u>	<u>(1,900,422)</u>	<u>(214,361)</u>	<u>2,775,235</u>
	Balance at 1 January 2020	Transfer from General Reserve In Year	Income in Year	Expenditure in Year	Net Movement in Year	Balance at 31 December 2020
	£	£	£	£	£	£
Restricted Fund relating to Diabetes Research	-	-	1,000	(1,000)	-	-
Restricted Fund relating to The Big Give Christmas Challenge	-	-	8,256	-	8,256	8,256
Restricted Fund relating to 2020 Pump Priming Award	-	-	15,269	(15,269)	-	-
Designated Growth Fund	-	150,000	-	-	150,000	150,000
General Reserve	<u>2,991,601</u>	<u>(150,000)</u>	<u>1,647,860</u>	<u>(1,658,121)</u>	<u>(160,261)</u>	<u>2,831,340</u>
	<u>2,991,601</u>	<u>-</u>	<u>1,672,385</u>	<u>(1,674,390)</u>	<u>(2,005)</u>	<u>2,989,596</u>

In 2021 a bequest of £500 was made to benefit the people of Hartlepool.

During 2021 the charity participated in the Big Give Christmas Challenge 2021 to raise funds for the 2022 programme of Educational Events. The funds received in the year was £14,786 (2020 £8,256)

Net Assets by Fund	Unrestricted	Restricted	Total
	£	£	£
Tangible Assets	6,535	-	6,535
Current Assets	3,227,011	23,542	3,250,553
Current Liabilities	<u>(481,853)</u>	<u>-</u>	<u>(481,853)</u>
	<u>2,751,693</u>	<u>23,542</u>	<u>2,775,235</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2021

21 Payments to Connected Charities

Connected Charity	Nature of Relationship	2021		2020		Nature of Transactions
		£ Total transactions in the year	£ Balance at the year end	£ Total transactions in the year	£ Balance at the year end	
Diabetes Research and Wellness Foundation Inc.	1	141,810	-	141,483	-	Management charges in relation to the sharing of articles and staff.
Association pour la recherche sur la diabete	2	900	-	864	-	This grant was made to assist with the funding of the Association's awareness and educational programmes.
Diabetes Wellness Network Canada	3	-	-	(700)	-	This grant was made to assist in the funding of the Network's set up costs, this is the refund of an overpayment.

Nature of Relationships

- 1 Diabetes Research and Wellness Foundation Inc. is completely separate and independent with no legal connections, but Mr. John Alahouzos sit on the Board of Trustees of the associated charity in the United States.
- 2 Association pour la recherche sur la diabete is completely separate and independent with no legal connections, but Mr W.M. Gretschel, Mr J. Alahouzos and Mr J. Harab sit on the Board of Trustees of the associated charity in France.
- 3 Diabetes Wellness Network Canada is completely separate and independent with no legal connections, but Mr W M Gretschel and Mr J Alahouzos also sit on the Board of Trustees of the associated charity in Canada.

Further details regarding the relationship can be found in the Trustees Report.

22 Financial Commitments

The charity has financial commitments of £575,884 (2020: £488,272) for grants authorised but not accrued as expenditure for the year ended 31 December 2021, as they are subject to the recipient fulfilling certain conditions. The amounts payable are as follow:

	2021 £	2020 £
Payable in 2021	-	329,241
Payable in 2022	248,667	94,054
Payable in 2023	221,995	64,977
Payable in 2024	105,222	-
	<u>575,884</u>	<u>488,272</u>

23 Operating Leases

At 31st December 2021, the charity has commitments under operating leases as follows:

	2021 £ Within one Year	2021 £ Two to Five Years	2020 £ Within one Year	2020 £ Two to Five Years
Land and Buildings	28,000	49,633	22,167	-
Other Assets	2,946	4,598	2,484	974
Total	<u>30,946</u>	<u>54,231</u>	<u>24,651</u>	<u>974</u>

During 2018 year the charity moved its business office and Registered Office to new premises. The new lease commenced on the 9th October 2018 with a term of six years at a rent of £28,000.25p per annum. The lease includes a break clause allowing the tenant to terminate after three years. The lease provides for two discounted periods of 10 months each during which the rent payable is reduced by 50%.

24 Reconciliation of Net Movement in Funds to Net Cash Flow from Operating Activities

	2021 £	2020 £
Net Movement in Funds - Surplus/(Deficit)	(214,361)	(2,005)
Add back Depreciation Charge	2,281	1,675
Deduct Interest Income shown in Investing Activities	(250)	(6,101)
Decrease (Increase) in Debtors	(402,360)	50,218
Increase (Decrease) in Creditors	166,279	(148,017)
Net Cash used in Operating Activities	<u>(448,411)</u>	<u>(104,230)</u>

25 Members' Liability

The Foundation is a company limited by guarantee. On the event of winding up, the member's (5) (2020 - 5) liability is limited to £1.

DIABETES RESEARCH & WELLNESS FOUNDATION

England & Wales - Charity number 1070607

Accounts

Diabetes Research and Wellness Foundation

(A Company Limited by Guarantee)

Charity Number: 1070607
Company Number: 03496304

Financial Statements

For the year ended

31-Dec-20

Diabetes Research and Wellness Foundation

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Diabetes Research & Wellness Foundation

Diabetes Research and Wellness Foundation (DRWF)
(A Company Limited by Guarantee)

REPORT & FINANCIAL STATEMENTS

For the year ended 31 December 2020

Registered Charity Number: 1070607

Company Number: 03496304



Cameron Muir, London – Edinburgh cycle ride, August 2020

THANK YOU! To everyone who donated or undertook a challenge all over the UK, during the most difficult of times. Your support has helped to safeguard our awareness, educational programmes and research funding activities. **THANK YOU!** for being part of a powerful community who are intent on investing in a brighter future for all people with diabetes.

Message from our Co-Founder & Chairman – Michael Gretschel

Our focus for 2020 was on building resilience and sustainability for the future through succession planning, diversification of income streams and delivery of purposeful programs that continue to meet the ever-changing needs of, and make a difference to, people living with diabetes.

To that end, Dr Shivani Misra, Consultant in Metabolic Medicine & Diabetes at Imperial College London, was elected to the Board of Trustees in January. Shivani brings a wealth of clinical and scientific knowledge to the Board having been recognised as one of London's leading health influencers in the Evening Standard's annual Progress 1000 list in 2018. We have known Shivani for many years as she was awarded a DRWF Fellowship in 2012 and went on to conduct the national My Diabetes Study. We are really pleased to have her join the DRWF family.



We had planned to grow and develop many of our activities in 2020 but of course the Covid-19 pandemic brought the world pretty much to a standstill, with our daily lives significantly impacted. It has been a challenging time for everyone but our small DRWF team really dug deep and were magnificent in coping with the change of working arrangements, and cancellation of activities and events which ultimately resulted in several team members being furloughed. We're very lucky to have been able to bring these team members back to their full roles, when many charities have not been so blessed.

The health and safety of our team has been paramount during the pandemic months and we are extremely fortunate to have arrived at this point without having encountered any significant illness due to Covid-19. Our hearts go out to all those that have lost family and friends.

Much has been learned during these difficult months and we've identified a number of areas in our structure and activities which require investment of funds, time and expertise. It is often quoted that 'necessity is the mother of invention' and we certainly discovered this to be the truth in 2020, being pushed perhaps more quickly than we might have been comfortable with, into exploring online and digital activities in greater depth.

Our learnings from the pandemic have played a big part in helping us scope out our next 3-year growth strategy, but we are benefitting from having a stable and well-run charity with the reserves that enable us to invest in future sustainability, whilst being responsive to the needs of the people that we support and the researchers that we fund.

Most importantly, we learned that in the world's hour of need, medical research pushed all boundaries and found a vaccine for Covid-19 that is now being rolled-out with lightening-speed to protect our communities. Diabetes is one of the world's leading health challenges – we must act with the same determination in our research for a CURE!

As we continue to navigate these uncertain times, I want to thank the DRWF team, trustees, advisory board members, supporters and volunteers who work so tirelessly and give so generously to our cause.

We could not achieve what we do without you all. **Thank you!**

Mike Gretschel

April 2021

Report of the trustees for the year ended 31st December 2020

The trustees are pleased to present their report and message from the Chairman together with audited financial statements for the year ended 31st December 2020.

The financial statements comply with the Charities Act 2011; the Companies Act 2006; the Memorandum and Articles of Association and are prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102 Charities SORP) (effective from 1st January 2015).

Our purpose, aims and activities

The objects of the charity are:

- To assist in the relief of persons with diabetes and any similar or related diseases or conditions
- To raise public awareness about diabetes and any similar or related diseases or conditions, their incidence, causes, treatment, avoidance and relief

The focus of our work

There are more than 4 million people diagnosed with diabetes in the UK. This figure has more than doubled in the last 20 years and it is anticipated that if nothing changes, this will rise to 5 million in the next 4 years.

Around 90% of people with diabetes have type 2, which can often be prevented. There are a number of risk factors which increase the likelihood of a type 2 diagnosis, such as being overweight or obese, which puts people at greater risk of a range of chronic health conditions and ultimately increased risk of premature death.

Approximately 10% of people with diabetes have type 1 diabetes which is a chronic autoimmune condition where the body is unable to produce insulin which is required to regulate blood sugar levels. Type 1 diabetes cannot be prevented.

It is estimated that up to 5% of those diagnosed with diabetes have rare types such as MODY (maturity onset diabetes in the young), CFRD (cystic fibrosis related diabetes), LADA (latent autoimmune diabetes in adults) and a small handful of other types.

It is estimated that the care and treatment of diabetes costs the NHS around 10% of its annual spend, which equates to approximately £10 billion per year. This is a staggering £1.1 million per hour.

Whilst all diabetes can lead to significant health challenges, such as increased risk of cardiovascular disease, blindness and amputation, it is important to remember that type 2 diabetes can be prevented or at least its onset delayed. There is also evidence of people with type 2 diabetes achieving 'remission' where they have had major weight loss through restrictive diets or bariatric surgery.

Self-management of diabetes is central to reducing the risks associated with complications and therefore much of our work is focused on providing information and educational support programmes that empower self-management and seek to encourage a pro-active approach to good self-care. We consider that those with the greatest knowledge of their condition will have a better understanding of the disease and will be better equipped to have an impact on the progression of their diabetes and any associated complications. Our Diabetes Wellness activities in the community provide a great platform for meeting people sharing similar health concerns, making new friends and building peer support networks, all of which serve to enhance both the physical and psychosocial management of diabetes.

The research we fund spans all types of diabetes and related health, helping improve understanding of cause, treatment and management with our ultimate goal being to find a cure for what is considered to be one of the 21st century's leading health challenges, worldwide. With the commitment of a multi-disciplinary

Research Advisory Board, and a rigorous peer review process for applications, we invest in innovative Pump Priming projects and Fellowships which we believe will demonstrate impact for people with diabetes in the fastest time-frame. To-date, we have committed almost £13 million to research since our first awards were made in 1999.

Demonstrating public benefit

The trustees confirm that they have referred to the general guidance set out by Charity Commission on public benefit. The trustees are satisfied that the Charity's activities meet the principles of public benefit, defined as providing an identifiable benefit/s to the public, or section of the public, and know of no detriment or harm that may be caused as a result of these activities, which are clearly set out throughout this report.

Volunteers


As a small team delivering numerous activities, we rely on the support of volunteers who, participate by helping out with administrative tasks in our office; delivering diabetes awareness and information materials; undertake user involvement exercises to help steer and develop our programme activities; support our educational events and community fundraising programme or sit on one of our expert panels for research or information review. The number of volunteers fluctuates each year but is crucial to helping us spread the word about the work we do and to support local and national community fundraising initiatives. We had hoped to grow our volunteer network through a higher level of community activity in 2020, however the pandemic prevented us from doing so. We hope to be able to resume community activity as soon as Covid-19 allows and plan to build on the number of volunteers who support the charity as soon as possible. In the meantime, we wholeheartedly thank all of our volunteers for their time, expertise and commitment to our work which helps us raise awareness to the charity, maximise income and maintain high standards of work.


Measuring Impact

We use qualitative and quantitative approaches to monitor and evaluate our activities in order to ensure that they remain true to purpose and that the outcomes aimed for are achieved. Stakeholders and beneficiaries are involved in these evaluation processes to ensure the continued relevance, quality, accessibility and effectiveness of activities. We also undertake independent evaluation with specialist partners for specific projects where expert input is required.

Activities & Achievements in 2020

Awareness, information & support

 Direct mail played a key part in our communications strategy during 2020, supporting our desire to stay connected with key audiences who do not routinely engage with online channels. We distributed 257,187 campaign packs in 2020. The health information contained within each campaign is targeted at beneficiaries who could act on the information, either in a preventative way (type 2 diabetes) or to inform and support those living with diabetes (all types), in their self-management of the condition. With a positive response from around 14% of those mailed, we know that at least 38,425 people across the country read the information contained within the campaigns. We know from experience that it is likely that many more opened and read the information but chose not to make direct contact with us at that time. Historically, we have seen numbers of people respond to communications that have been distributed many months, or even years before, as they have held onto the information provided for future reference.

 **Health Unlocked Forum:** Our awareness messages are reaching wider audiences than ever before supported by our increased provision of news and articles on our website and social media channels and via our Health Unlocked community forum, the world's largest social network for health. The DRWF Diabetes HU forum has a total 5785 all time members and this has grown by 30% since early 2019. Around 10% of all members are very active in posting and joining discussions. This is enabling us to interact with more diverse communities where the risk and/or impact of diabetes can be

higher and where people feel that they have a safe space within which to share their experiences, gain support and make a difference to others too.

➔ It was clear from the outset of the pandemic that our ability to reach those that we support through digital channels was going to be crucial to our continued operations. To that end, we had to adapt quickly to engage with supporters and beneficiaries alike with lockdown measures accelerating our use of digital channels. This was essential in order to stay connected with the diabetes community during a time of considerable stress, when people with diabetes were being told that they were at greater risk of significant illness if they contracted coronavirus. We doubled our efforts to generate regular reliable news items, and self-management articles to support people through improved understanding of 'sick day rules'. In 2019 our website received 190,174 unique page views. In 2020 that rose to 372,045 unique page views. This is an increase in website traffic of over 95%.

➔ At the start of the pandemic, when it became apparent that we would have to cancel our community events for the foreseeable future, we ran a social media campaign to promote our series of diabetes information leaflets to ensure that people were sign-posted to reliable, Information Standard accredited, adult health and social care information. In 2019 there were 10,653 downloads of these leaflets. In 2020 this leapt to 37,416 which is a three-fold increase.

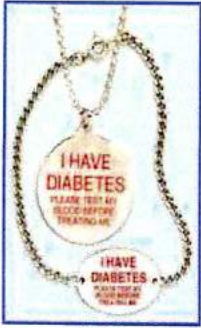
➔ Whilst in 2019 we had started to explore podcast content as a means of engaging and supporting diabetes healthcare professionals and people living with diabetes, we increased our efforts through this channel in 2020 as an alternative to written information and video content. This resulted in double the number of visitors to our podcasts about Life with Diabetes seeing 549 downloads, a small but solid start to delivering information in this format.

➔ In 2020 we increased our efforts to raise awareness of our activities and services to more people through social media campaigns with most engagement being seen through our Facebook page. In 2019 our sponsored content reached an average of 7,597 people a day, roughly 2,773,000 people in total. In 2020 our sponsored content reach more than doubled to an average of 20,399 people a day, around 7,445,635 people in total and well over 10% of the total UK population. This platform enables us to engage in conversation with a diverse audience, often answering general diabetes related self-management queries; addressing confusions about diabetes, and increasingly responding to questions and comments about diabetes research and recent advances.

➔ Our patient information resources are available free of charge. As standard, they can be requested in hard copy or downloaded from our website as pdf or audio files; requested in enlarged print format or alternative. There was a significant reduction in requests for physical information in the period. This is possibly because people were otherwise caught up in the pandemic. Additionally, because we had minimal staff onsite we were encouraging people to go to our website to download information in pdf and audio format; to listen to our podcast series for additional help and to interact with our social media channels. The impact of this contributes to the increased traffic to our website during the period which saw a 3-fold increase in the volume of resources downloaded.

➔ We distributed 117,177 copies of our newsletter, Diabetes Wellness News, to subscribers, healthcare professionals and regular givers. This is a 1% decrease in the circulation numbers of 2019. The newsletter is distributed to annual subscribers, and on a complimentary basis to healthcare providers who share the information with their patient communities. On a quarterly basis the circulation is boosted as we focus on the research element of our work and send a copy to our regular givers. It is difficult to accurately predict the true readership of the newsletter but through anecdotal evidence, it is clear that it is much wider than those who have specifically requested to receive it. The number of healthcare professionals on our database increased by 6% during the year and this was largely due to sign up of HCPs at Diabetes Professional Care held at the end of 2019.





Our Diabetes Awareness Necklace is distributed free of charge to people with diabetes and healthcare professionals for onward distribution. These necklaces provide emergency identification for those with diabetes should they be unable to alert the emergency services to their condition. They carry the wording 'I have diabetes, please test my blood before treating me'. They are distributed along with medical check-up cards that are used to record tests and results to inform self-management strategies. We responded to 1457 specific requests for free necklaces during the year, a reduction of 49% in the period. This was directly impacted by the pandemic, a shift in focus for everyone at that time and our ability to respond to fulfilment with staff on furlough and working remotely from home.

My husband has recently been diagnosed with Type 2 diabetes and suffers from cardiovascular disease, which means he could potentially collapse anywhere, anytime. We both think that your awareness necklace could prove invaluable. We want to say what a fantastic service you provide – the information on your website is very important to us. Thank you! K&P Edington



Quality in Care Diabetes – award winning Diabetes Wellness educational events

Diabetes structured education aims to provide people with diabetes with the knowledge and confidence to self-manage a long-term condition effectively. The offer of structured education across the country has improved over more recent years. However, the rates of attendance are still very low and vary widely. Self-management is central to diabetes care. Yet, it is reported that high numbers of people with diabetes experience emotional or psychological problems, such as depression, anxiety and diabetes distress, all of which can impact the ability and motivation to self-manage effectively. This leads to poorer health outcomes, reduced quality of life and increased healthcare costs. Being able to access appropriate support is integral to good self-management.

We have been running an annual programme of Diabetes Wellness events since 2001. We work with diabetes, and related healthcare professionals to facilitate workshops that provide relevant, up-to-date, evidence-based information covering all aspects of diabetes and related health. Delegates choose the sessions and talks that they attend meaning that they create their own agenda for the day, improving engagement and supporting better outcomes. These events bring together a wealth of information, expertise and peer support under one roof.

The event programme is devised and delivered by experts and offers rotating workshops that focus on the day-to-day management of diabetes and the prevention and management of associated complications. An exhibition hall provides a central hub where delegates can access a range of support from primary, secondary and community organisations.

“ Learning about diabetes at these events is contributing significantly towards my improved health and wellbeing”

We know that managing diabetes is challenging and effective coping strategies are crucial to support optimal health. These coping strategies are important not just to people living with diabetes but their family, friends and carers. Peer support plays an important part in emotional wellbeing and this in turn can have an obvious impact on the ability to self-manage effectively. For this reason, we feel it is important to include family, friends and carers in workshops and discussions which facilitates discussion around managing diabetes, perceptions and expectations, in an environment where everyone has experienced or is experiencing something similar. These events are relaxed and welcoming in approach. They are inclusive and provide for diverse needs.

They also provide an amazing opportunity to spend time with a whole host of health care professionals asking the questions that really matter to the individual, in a relaxed and informal environment.

Diabetes Wellness Days in 2020

There were 3 Wellness Days scheduled to take place in 2020, all of which had to be cancelled due to the coronavirus pandemic. Venue terms and conditions were negotiated to minimize any cost to the charity due to cancellation. All venues were very considerate in their approach and allowed for rescheduling of dates with deferment of deposits and cancellation charges where applicable.

The cancellation of these events reduced related workload and so the DRWF event co-ordinator role was furloughed between 1st May and 30th September, supported through the Government's Coronavirus Job Retention Scheme.

We produced an interactive digital toolkit incorporating top tips and self-management articles with links to podcast and video content for beneficiaries who had registered to attend the Wellness events. This at least went some way to ensuring that we had provided access to the supportive content that participants would have benefitted from had they been able to attend an event in person.



Diabetes Professional Care & United Through Diabetes

We have supported Diabetes Professional Care (DPC) in the provision of an educational event for diabetes and related health care professionals for the past 5 years. Usually this CPD accredited event accommodates 5000+ attendees, over a 2-day period at Olympia in London. DPC was unable to proceed with the usual format of event due to the pandemic. Working with an online media agency, they were able to pivot quickly offering online educational workshops to HCP's throughout the pandemic months which culminated in a large online activity in the lead-up to World Diabetes Day. This gave DRWF an opportunity to retain visibility within the HCP community, contributing to the programme of talks and workshops, as well as providing a platform for engaging interested parties in discussion about the charity's activities.

"Just like to say a huge THANK YOU for a fabulously informative and useful day. Well organised, with talks from those who have the knowledge."

In partnership with DPC, we co-hosted an additional patient educational event entitled **United through Diabetes** on World Diabetes Day. This helped us to deliver a purposeful event at scale on a digital platform that we otherwise could not have offered to the diabetes community. There were over 4000 pre-registrations for UTD from diabetes healthcare professionals, public health officials and people living with diabetes from around the world. On November 14th, 1340 people logged-on to the virtual platform and participated in 21 workshops, talks, panel discussions and community forum sessions, supported by 35 diabetes and related health experts throughout the day. People participated from 41 countries with 91% of attendees from the UK.

"It was an awesome event, full of up-to-date relevant information necessary for both the healthcare practitioners and the patients with diabetes. I want to say very many thanks to you all for giving me the opportunity of gaining more skills and knowledge about diabetes."

Digital Consultation Research

We were asked to support Dr Charles Fox and Dr Anne Kilvert, Northampton Diabetes Service, who were conducting a national survey to understand how people with diabetes were having their ongoing healthcare consultations during the pandemic – ie. In person, telephone or video consultation. This was to ascertain the approach and outcome for both healthcare professional

and patient. To that end, we utilised the carrier sheet with the December distribution of Diabetes Wellness News to secure participants. We had a 3.4% response rate, securing opinions from 312 of 9328 DWN subscribers. This was supplemented by social media calls pointing to an online version of the survey to increase representation. The outcome of this study will be published in Practical Diabetes in 2021.

Diabetes Wellness Family Camp

There are around 29,000 children and young people in the UK living with Type1 Diabetes. For these young people, quality of life can be adversely affected by isolation and their inability to participate in many of the everyday activities enjoyed by their friends and peers. This often results in a growing lack of self-esteem and confidence, which can become a barrier to future growth and development.

Having provided our first, very successful, Diabetes Wellness Family Camp in partnership with Over The Wall in 2019, we had planned a great residential programme for 2020. However, the pandemic meant that this event had to be cancelled.

The OTW team worked with digital consultants to devise a unique online platform to enable a virtual **Camp in the Cloud** (CiTC) event to take place. Those families that had been offered a place at the planned residential camps for 2020 were invited to participate in the CiTC experience. This meant that 20 T1D families (70+ participants) had an opportunity to join with others for some creative fun, games and friendship online.



‘Thank you to everyone of you for the amazing effort that you have put into camp. I had no idea how it was going to work or how you were going to bring those amazing qualities out of the children. The excitement in our house this week has been unbelievable with so much laughter.’

By working in partnership, we were able to present a wonderful opportunity for families with children with Type1 diabetes to connect with others experiencing similar health issues, enabling friendships to develop between families who often feel isolated, which we know can last long after the event.

We recognise that the online experience and associated benefits are somewhat different to an in-person event, but there is opportunity through this platform to reach those children who may not have been eligible to attend an in-person residential event, due to significant health challenges. This potentially widens our reach quite significantly and so we intend to explore the possibility of carrying out online and residential events of this sort, going forward.

Research Funding Programme

We provide research grants to researchers whose work we consider offers the best hope and most expedient path to improved understanding of all types of diabetes; new and improved treatments and management strategies, and ultimately a cure.

Awards are offered as a 3-year Clinical and Non-Clinical Fellowship and 1-year Pump Priming project awards. Institutional and discretionary awards are available when funds allow. Contract funding of key personnel within the DRWF Human Islet Isolation Facility at the Churchill Hospital, Oxford is subject to proposal and review on a multi-year rolling contract basis.

We are a member of the Association of Medical Research Charities (AMRC). Membership is the hallmark of quality research funding. As members, we support the use of a rigorous peer review procedure in the allocation of our research funding. Our Research Advisory Board (RAB) is a multi-disciplinary panel of expert clinicians and scientists who assess applications for funding. AMRC carry out audit on research procedures every five years in order to check that they meet the expected gold standard. Universities,



government and other funding bodies recognise AMRC membership as an indicator of quality. It also qualifies our grant funding for support from the government's Charity Research Support Fund which enables universities to increase the funds we award by around 20%. We also benefit from the AMRC training and development programme which supports continued use of best practice processes and procedures.

It was clear very early on following lockdown on 23rd March, that research in progress and research funding would be adversely affected by the pandemic. AMRC liaised with its charity members from the outset to establish the impact that Covid-19 would have on charity income; ability to continue funding existing awards, and the impact on new funding calls. They reported an anticipated 41% downturn in research funding over the next year, a predicted £310 million shortfall in support of life-saving discoveries.

The DRWF 2020 Non-Clinical Fellowship award that had been called in late 2019 was deferred until November 2020; a 5-month delay to our usual review and allocation schedule. This was largely due to the unavailability of clinicians/scientists who perform peer review on applications received, where they had been redeployed or furloughed due to Covid-19. This delay had a knock-on effect to the call for applications for the 2021 Pump Priming awards being announced. This usually takes place in August for award by 31st December. However, on this occasion the call was announced in November for award in Q2 2021.

The deferment of our grants round during the year reduced associated workload and it seemed prudent at that time to furlough our Research Grants Administrator between 1st May and 30th October. This role was supported through the Government's Coronavirus Job Retention scheme.

We liaised with all current funding recipients to understand the environment within which they were working, to establish whether there was pause or delay to their work which would necessitate a 'no-cost extension' request. This was the case with a number of awards, with a total of 10 researchers being offered extensions into 2021. The financial impact of this is a reduction in funds paid to researchers in 2020 with increased expenditure reflected in the 2021 budget.



2020 Professor David Matthews Non-Clinical Fellowship

23 pre-applications were received, resulting in 13 full applications being submitted. Three candidates were invited to interview which was carried out by video call. The Research Advisory Board met on 2nd December and subsequently recommended that the 3-year Fellowship be offered to **Stephanie Hanna, Cardiff University £194,933**. Funding was approved by the Board of Trustees on 16th December.

Stephanie's work –

"Immunotherapy in type 1 diabetes aims to reduce the body's immune attack on the insulin-producing beta cells. To develop these treatments, it is important to be able to identify and monitor the white blood cells that cause the damage. We cannot study these cells safely in the pancreas and numbers in the blood are very low. However, I have observed that after injecting molecules derived from the beta cells into the skin, I can detect white blood cells multiplying in skin. I have also been able to detect cells multiplying in lymph glands that drain the skin using ultrasound guided needle sampling. These are likely to be cells from the pancreas attracted to the skin by the injection of pancreas derived protein. I will study these cells using state-of-the-art single cell analysis technology and use this information to develop highly targeted treatments for the immune response in type 1 diabetes."

Pump Priming 2021 (call announced November 2020 to be awarded in early 2021)

A total of 27 applications were received for consideration. These will be reviewed by the Research Advisory Board in Q1 2021.



Islet Cell Research & Transplant

DRWF has made a considerable contribution to the funding of islet cell research and transplant in the UK and around the world. The DRWF Human Islet Isolation Facility at Churchill Hospital, Oxford plays a pivotal role in providing islets for research and transplant as part of a national treatment programme, the clinical element of which is funded by the NHS.

Three personnel are funded within the facility (around 30% of facility staff):

- Lab Manager – due for review Jan 2021
- Deputy Lab Manager (post doc researcher) – Funding proposal received Feb 2020
- Islet Transplant Administrator – Funding proposal received Feb 2020

New funding proposals were received in February for the Deputy Lab Manager and Islet Transplant Administrator positions, as current awards terminated on 30th April, 2020. Having reviewed the proposals, the Board considered that it would be prudent to offer continued funding for 1 year only, giving us the opportunity to establish how Covid-19 would impact our income over the course of the year. This resulted in new awards being offered for 1 year from 1st May 2020 – 30th April 2021.

Subsequently, due to Covid-19, the Islet Transplant Administrator position was furloughed and later became vacant. The Deputy Lab Manager position also became vacant with no-cost extensions being agreed by the Board for both positions.

Impact report from the Director of the DRWF Islet Isolation Facility Churchill Hospital, Oxford by Professor Paul Johnson

The last 12 months has been a challenging time for everyone involved in healthcare worldwide. Many routine treatments in our hospitals have been suspended as our clinical services have been protected to ensure sufficient capacity for the large number of COVID admissions. In addition, the considerable risk of starting patients on powerful immunosuppression in a COVID environment has meant that many transplant services have been severely restricted. In Oxford, most of our transplant services were suspended for a large part of the pandemic. The UK Islet Transplant Programme remained open for a small number of priority patients only who were requiring 'top-up' grafts. These patients were chosen as they had an urgent clinical need and had already been established on immunosuppression. The Oxford DRWF Human Islet Isolation Facility therefore remained open throughout the pandemic to provide islets for these patients and the staff remained 'on call' throughout. Pancreas donation was initially significantly reduced due to ICU restrictions and difficulties proving that donors were definitely COVID-free. However, once these issues had been addressed, organ donation activity for clinical use was re-established. However, research pancreases remained very limited.

We continue to process pancreases from a broad donor pool. Impressively, our isolation outcomes continue to match the leading isolation centres world-wide for this range of donors. In 2018, twenty-four out of 53 pancreases processed resulted in an islet yield of >200,000 IEQ whereas in 2019 this was twenty-two out of 43. Pre-COVID we also continued to isolate and distribute research islets to scientists across the UK, with 19 islet preparations distributed to a wide range of research groups throughout the UK in 2018 and 16 in 2019. Our provision of high-quality human clinical islets has impacted directly on patients with type 1 diabetes locally and throughout the UK, with lives transformed by diabetes stabilisation and reversal. The distribution of research islets has enabled a wide-range of different diabetes research projects to be undertaken resulting in many high-impact publications. The generous funding from DRWF has been essential for these achievements.

During the pandemic, the University closed many of its research facilities for various periods of time. This has limited our research activity, but the team has continued to be research active whenever this has been possible. We continue to undertake novel research into the development of physiological islet scaffolds and islet macro-capsules, design of a novel islet culture, and optimisation of islet oxygenation including proteomic characterisation during islet isolation. We were a key partner in a Horizon 20/20 European Grant and continue to be central to two themes (Surgical & Diabetes) of the Oxford Biomedical Research Centre.

The Oxford DRWF Isolation team have continued to be highly recognised in the islet transplant and islet research fields. Professor Paul Johnson has continued to Chair the NHSBT UK Islet Transplant Steering Group throughout this difficult time. This has involved close liaising with the NHS and difficult decisions about keeping islet transplant recipients safe. He has continued to give invited lectures to learned societies, albeit increasingly in a virtual format. Team members have continued to present at international scientific meetings, including the last ePITA (European Pancreas and Islet Transplant Association) conference held in Austria in January 2020. We continue to publish our work regularly in peer-reviewed journals with appropriate DRWF acknowledgement.

Looking ahead to the next 12 months, we have already started to see the return of normal islet isolation activity and have started to reactivate our islet transplant recipient list. We have just started an exciting new initiative with NHSBT called 'Increasing the Number of Organs Available for Research' (INOAR). This important project will enable donor organs from donors with diabetes to now be retrieved routinely from across the UK for research purposes. Up until now, this has been very sporadic and there has been no infrastructure for research retrievals. The Oxford DRWF Islet Isolation Facility will lead an 'Islet Platform' with responsibility for isolating and distributing islets for research from these rare pancreases. This will be a unique resource for researchers as they try to find a cure for diabetes. Again, the 'Islet Platform' has only been made possible as a result of DRWF's long-term partnership with the Oxford Facility.

All the Oxford Isolation team remain extremely grateful to DRWF for their partnership with Oxford. We look forward to maintaining and further developing this partnership and collaboration for many years to come.

How we raised our money in 2020



Our approach to fundraising – The Trustees are aware of their individual responsibility and accountability to ensure that the charity fundraises legally, responsibly and effectively.

Our focus for 2020 was on building resilience and sustainability for the future through succession planning, diversification of income streams and delivery of purposeful programs that continue to meet the ever-changing needs of people with diabetes.

The largest volume fundraising activity that the charity has is a direct mail programme. Legacy income and regular giving programmes are also sources of higher volume/value donations to the charity at this point and we seek to develop community and digital fundraising activities so that they make a more meaningful contribution to the charity's public engagement and income generation. Additionally, we make applications to appropriate trusts and foundations.

Historically, we have relied heavily on income from Direct Mail and Regular Giving programmes to sustain our voluntary income. These programmes continue and do very well for us, but in order to ensure that we are competitive and responsive to our supporter needs, current and new, we must ensure that we offer engagement choice and an experience that helps maximise recruitment opportunities and capitalises on retention and loyalty.

By February 2020, Covid-19 had gathered pace around the world and it became apparent very quickly that we needed to consider our future working arrangements and business continuity plans in respect of –

- Possible impact on current and future activities and operations of the charity
- Implication for the charity's finances and fundraising
- Effect on financial sustainability and going concern
- Consideration of the charity's reserves, their nature and adequacy
- Effect on future aims and activities

A significant challenge given the scale and unpredictability of the issue. The initial impact of Covid was felt by the DRWF team who were required to work remotely from 23rd March when the UK entered national lockdown. Fortunately, we had been able to address the necessary technology and equipment requirements to enable us to work from home by 20th March. However, the uncertainty and ever-changing

landscape made it almost impossible to set out a response plan that provided a stable working structure for any length of time, with frequent need to reassess and change direction.

Our Direct Mail programme was affected in the early months of Covid with a number of campaigns being dropped and/or delayed in the schedule. We had hoped to step up prospecting in 2020 and whilst a couple of tests were conducted, we didn't manage to carry out the level of acquisition that we'd projected for the year. The overall volume of DM campaigns distributed in 2020 was around 35% less than in 2019 with an overall reduction of income of 24% in this activity.

Whilst there were no changes to main service providers in the period, our Direct Mail programme response handlers experienced issues very early on meaning that they offered restricted services between March and July. This meant that we had to be reactive and put in place temporary processes to enable continuation of campaign responses from our offices, requiring two staff to work on-site to manage incoming mail, open batch and bank donations etc. Whilst the volume of mail that we were able to process through a manual process was limited, it meant that we were helping to minimise the backlog of mail building up, limit impact on cash-flow and enable real-time information to be updated on our CRM so as to avoid future impact on our appeals and campaigns. Fortunately, this situation was resolved by July and all campaign returns were cleared through the month.

We had expected to see an increase in regular giving cancellations during the year however, whilst it appeared that this might be the case early on in the pandemic, our attrition over the year was actually consistent with 2019 at 7%.

Legacy income, which is difficult to accurately predict, increased beyond expectation in the year. We received notification of numerous bequests, some of which were quite high value and which deposited funds very quickly. Legacy income was around 69% higher than we had anticipated during the year, around £300,000+ up on budget.

We had planned to scale up our community fundraising activities in early 2020 by hiring a regional community fundraiser in the Midlands, however this plan had to be put on hold. Our full programme of charity organised community fundraising activities was cancelled between 23rd March and 31st December, reducing projected income from this stream by around 70%.

However, there were some amazing supporters who despite the significant personal and professional challenges that Covid-19 placed on all of us, continued to raise funds in aid of DRWF knowing that it was a real struggle for all charities and really wanting to show their support and make a difference. We are indebted to these supporters.

The Head of Community Fundraising was furloughed between 1st May and 30th June to give us time to understand the reduction in workload and reduce associated costs to the charity. This role was supported through the Government's Coronavirus Job Retention Scheme. We returned this role to employment through a phased return as we were able to increase fundraising activities, largely through digital fundraising campaigns.

Whilst a number of grant applications were made during the year, none returned a positive response. Many funders were rethinking their grant parameters to focus on Covid-19 related programmes. We considered how/where we might be able to position ourselves to provide a meaningful diabetes and Covid-19 specific support programme that would provide benefit in the diabetes community and support an application for grant funding, but found this very difficult to shape. Consequently, our attempts to secure funds through Grants and Trusts were unsuccessful in the year.

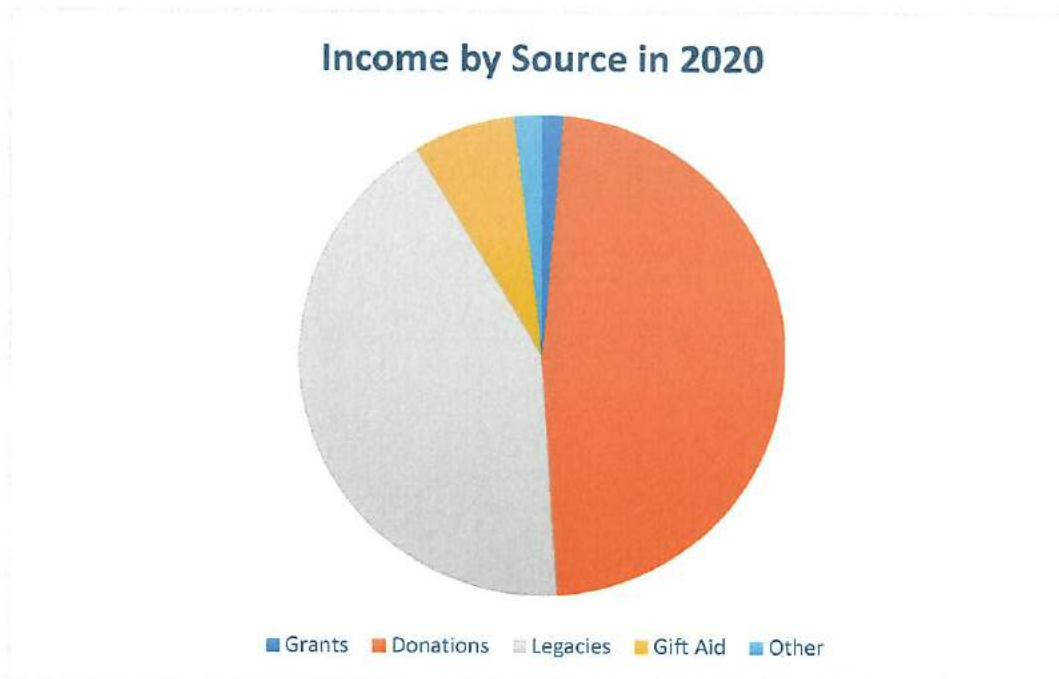
We secured grant income through the Government's Coronavirus Job Retention Scheme in support of three staff positions that were furloughed over a period of 6 months (see financial review section for detail).

Corporate Partnerships

We do not endorse products, but we will support initiatives that increase awareness to DRWF and our activities, and where there is an appropriate message, product or service for people with diabetes. To this

end, we have worked to explore meaningful partnership and corporate sponsorship opportunities, where there is a synergy in mission, vision and values. Any potential partnership is assessed for feasibility, compatibility with our own objectives, and risk to ensure there is no detrimental effect to our reputation or fundraising potential. Robust risk assessment supports our desire to only engage in suitable and best value partnerships. Detailed discussion and negotiation ensures that both parties aims are complementary and mutually beneficial. This ensures transparency and integrity in all partnerships.

We did not work with a professional fundraiser during the year. Commercial participation agreements are in place where necessary.



We can't do this without our amazing supporters!

During the pandemic months of 2020, much of our planned community fundraising activity was cancelled. We relied more than ever on committed supporters coming up with novel fundraising ideas, within the parameters of lockdown restrictions, to generate awareness and financial support for our ongoing operations.

Cameron's London-Edinburgh Cycle

London-based Cameron Muir marked 20 years of living with type 1 diabetes by cycling from London to Edinburgh with a group of friends, in aid of DRWF. Cameron was joined by a group of close friends for the fundraising challenge covering more than 400 miles. They set off from Dalston, London on 28th August and made it north of the border to reach Edinburgh on 4th September.

The group of friends came up with the idea during a lockdown stroll. Cameron and friend James wanted to do something worthwhile with their time to give something back, as the world returned to normality after the first Covid-19 lockdown.



Cameron said: "I was diagnosed with type 1 diabetes aged 10 in 2010. My family and I were away on an annual trip with a group of family friends when I became very ill and had to be rushed to hospital. It was a shock to find out that I had diabetic ketoacidosis. I had to remain in hospital for a week until the doctors could stabilise my condition. It is now my 20th year of taking insulin and I have had many ups and downs with controlling my blood sugar along the way.

"My grandmother, Dr Norma Cooper, who was one of my biggest supporters being a doctor herself, very sadly died in April. She was very interested in research for a cure for diabetes and used to give money to the research centre in Aberdeen in the hopes that she would see a cure during her lifetime. 'There'll be a cure soon,' she used to write to me, sending me many newspaper cut-outs and any information that she could get her hands on. In my grandmother's memory I decided, along with my girlfriend and four of my friends, to raise money for Diabetes Research & Wellness Foundation, cycling from my home in London to my parent's home in Edinburgh. This is 500 miles which we hope to achieve in one week.



"My difficulties as a child growing up with diabetes and as a teenager really affected my life. At school I was a keen sportsman, and at university I became the captain of the 1st XV rugby team. It was hard for me to get my sugar levels right before and after matches. Now I am so grateful for the technology that has been developed. I wear a sensor on my leg so that I can test my blood sugar with my smartphone, and it records everything for me. I would like to raise money in order to help find the cure that my grandmother was hoping for and to help more young people like me who have been diagnosed at an early age."

Cameron and his friends raised just almost £17,000 in support of our Pump Priming awards. These are 1 year clinical/non-clinical 'proof of concept' projects which aim to collect translational pilot study data the results of which often enable the researchers to leverage larger, higher value multi-year grant funding to expand their work.

In Memory of Rose Edith Mills – 12th January 1929 – 2nd May 2020



Rose died in May 2020 at the age of 91. She had suffered from diabetes for many years and regularly supported DRWF, as well as several other charities. Rose is greatly missed by many people as a loving Mum, Nanny, Great Nanny and Friend. She liked nothing better than being with her family as it grew year by year. Having lived in the same house for over seventy years, Rose was known by all her neighbours as the lady who helped out with a listening ear, who took in parcels and in her younger years, helped out elderly neighbours.

Rose's son Andrew set up a tribute page inviting family and friends to share memories and make a donation to DRWF raising over £500.

These are just two examples of the committed donors and supporters of our charity who take on countless sporting events and challenges; make regular donations or galvanise their local communities into raising funds to support our work. We can't thank them enough!

Fundraising Regulator: We are a levy-paying member of the Fundraising Regulator and subscribe to the associated fundraising codes of practice. The charity suppresses individual supporter records against the Mailing Preference Service, Telephone Preference Service and the Fundraising Preference Service, which helps to ensure that we do not approach individuals who have expressly requested that we do not contact them. During the year, we were notified of 26 FPS requests, which are suppressed from all contact, 10% less than received in 2019.

Complaints: The charity has a published complaints procedure, available on its website, and endeavours to respond to enquiries and complaints within the stated timeframe. Most contacts tend to be a request to opt-out of charity communications by existing supporters and we monitor the basis on which people request this i.e. content of appeal, volume of contact; type of contact; method of contact to inform our campaigns with the aim of reducing any perception of unreasonable intrusion, persistent approach or undue pressure to support. We didn't receive any complaints about our fundraising practices during the year.

GDPR and Data Protection: We are committed to protecting the personal information and privacy of individuals that we engage with and comply with relevant legislation and codes of practice, whilst carrying out our essential work of raising awareness of diabetes, providing information and support, and raising funds. Our privacy policy, published at drwf.org.uk sets out how we capture, process, manage and retain personal information.

When the Covid-19 pandemic required the DRWF team to move to home working, additional measures were put in place to ensure that we remained GDPR compliant. Our IT providers set up VPN/GOTOMYPC licences to safeguard access to DRWF files and data; post was managed by two staff working on site until our restrictions allowed more of the team to return to the office.

Financial Review

Principal income streams in the year were direct mail campaigns; regular giving via direct debit; legacy income and gift aid associated with voluntary donations.

During the pandemic, we adopted a short-term reactive, medium term pro-active and long-term strategic approach to manage the many challenges that we encountered across the year. Income and expenditure was monitored on a weekly basis with budgets/forecasts adjusted accordingly.

Total income was £1,672,385. This was a decrease of 5.1% on budgeted income but an increase of 10.7% on income received in 2019. Voluntary donations including gift aid receipts at £1,650,048 was up by 11.6% on 2019. Legacy income, having budgeted for very cautiously on notes of intent only, was £749,810, up by 77.3% on budgeted income, and £432,006 (73.6%) more than received in 2019.

Total expenditure in the year at £1,674,390 was 18.6% below budget and a decrease of 15.4% on expenditure in 2019. At year-end, we were showing a deficit of £2,005. This was £293,016 less than the deficit we had anticipated at £295,021, a budget that had been set before the Covid-19 pandemic. A revised forecast to take account of the Covid-19 situation forecast a deficit of £169,096 for the year.

Direct charitable expenditure was 84p in every £1 spent (85p in 2019 – a decrease of 1.2%)

Government Grants

The charity made use of the Coronavirus Job Retention Scheme offered by Government during the Covid-19 pandemic. Several employees were furloughed between May and October 2020. The accruals method was used for the government grant and accounted for under FRS 102 Section 24 "Government Grants". Income received totalled £22,721 in the year.

Investment Policy

Under the Memorandum and Articles of Association, the charity has the power to invest in any way the trustees see fit.

The trustees, in order to minimise to risk and having regard to the liquidity requirements of the charity, and to the reserves policy, have historically operated a policy of keeping available funds in a higher interest bearing deposit account seeking to achieve a rate of deposit interest which matches or exceeds inflation as measured by the retail prices index.

The trustees have regularly reviewed opportunities to increase investment return from short-term, easy access, options bearing in mind the desire to ensure that we can react quickly to appropriate requests for additional research support as they arise.

The trustees are also conscious of on-going cash-flow requirements during a challenging time where historical fundraising methods are raising less income and where new methods of fundraising are being tested at higher cost.

All things considered, the trustees believe it appropriate to continue to explore investment opportunities as they present themselves, with a view to maximising return on its deposits.

Reserves Policy

To safeguard the need for sufficient funds to cover ongoing management, administration and support costs, as well as respond to further grant requests that might arise, the Board aims to maintain unrestricted, free reserves at a level that equals 3-6 months of operating and charitable expenditures, which equates to between £539,907 and £1,079,814.

During financial year 2020, total expenditure was £1,674,390. Allowing for adjustments and forward research commitments, the charity's expenditures for financial year 2021 are likely to be in the region of £2,159,628. At 31st December 2020, the charity held free reserves (unrestricted reserves less designated funding, less fixed assets) of £2,981,340. This is the equivalent of approximately 16.6 months operating and charitable expenditures.

The trustees are committed to strengthening existing income streams whilst diversifying fundraising activities to reduce reliance on single sources. It is expected that this will take investment in testing of activities where the accuracy of predicting response rates, in terms of volume and value of gift, will be more challenging and take time to inform our wider growth strategy. The pandemic has shown us the need to have a broad range of activities and has highlighted the need for investment in technology, expertise and resource. Funds have been designated for this purpose.

Current reserves, whilst in excess of those anticipated, will enable us to establish the medium-long term impact of the pandemic on fundraising activities and navigate these more challenging times whilst exploring ways in which to diversify income generation and develop the charity's objective activities for future sustainability.

Going concern

The trustees consider that there are no material uncertainties about the charity's ability to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of the approval of these financial statements having given consideration to known commitments, forecasts and projections and possible pressures on income generation. After making these considerations, the trustees conclude that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing the financial statements.

Our focus in 2021 and beyond

Much has been learned during the difficult months of the pandemic and we have identified a number of vulnerabilities in our structure and activities. Investment is required in technology, expertise and resources and this will be addressed through designated funding which has been set aside to support our 3-year Growth Strategy (2021-24). In doing so, we will be better positioned to weather future disruption thereby building resilience and sustainability.

We continue to closely monitor -

Impact on current and future activities and operation of the charity, its finances and fundraising

Communication has been key throughout the pandemic months and the health and safety of the DRWF team has been paramount. Providing reassurance through clear communication at regular intervals was fundamental to ensuring that we continued to work cohesively, whilst understanding that the crisis was having an immediate and sustained effect on people's lives beyond the workplace. To this end, we ran two employee surveys between April and December 2020 focused on health and wellbeing to identify anxiety, stress and fatigue helping us to establish the need for additional support.

We furloughed 3 staff during the year, all of whom are now back to full contractual working arrangements. Team members are still working from home and we are currently conducting an impact assessment to understand the feeling around returning to usual working practices if, as is currently advised, covid-related restrictions are lifted entirely from 21st June, 2021.

We are fortunate to have arrived at this point without having encountered any significant illness in our team and we are very grateful for that.

Ongoing communication through multiple channels is helping us to establish how the public will/are starting to re-engage with community activities and this will be vitally important to steer our approach to digital and in-person campaigns and events, to ensure that we maximise opportunity and continue to meet the needs of our beneficiaries and stakeholders.

Growth Strategy

Through the work of our Core Fundraising Group we have identified numerous ways in which to refine and develop existing fundraising activities to enable us to strengthen and diversify income streams.

2020 has shown us the need to be agile, integrated and adaptive in our approach. Whilst the past year has been incredibly challenging, we have been resourceful where possible and gained invaluable experience that will help us reconfigure our approach to 'what good looks like' for DRWF, our supporters and beneficiaries. To this end, we have scoped out a 3-year growth strategy which clearly defines our vision, mission and values and the direction that we will take to build a robust organisation that is well-positioned for the future.

The strategy defines our key activities to maximise opportunity in –

- Diabetes Wellness Network (volunteer and community fundraising activity)
- Diabetes Wellness Programme (our core programme activities in support of people with diabetes)
- Research Funding (redefine our research strategy to maximise opportunity for collaboration with like-minded partners)

Designated funding has been allocated to support the growth strategy in 2021.

Reference and Administrative Details

Charity Number: 1070607

Company number: 03496304

Registered Office: Building 6000 Langstone Technology Park
Havant, Hampshire
PO9 1SA
Tel: 023 92 637808
Website: drwf.org.uk

Trustees & Directors: Mr W. Michael Gretschel (Chairman)
Mr John Alahouzos
Mr Jeffrey Harab
Mrs Valerie Hussey
Mr Steve Jones (elected October 2019)
Dr Shivani Misra (elected January 2020)

Chief Executive: Mrs Sarah Tutton (Bone)

Advisers

Bankers: Barclays Bank Plc
1 Churchill Place
London E14 5HP

Solicitors: Blake Morgan LLP
New Kings Court
Tollgate
Chandlers Ford
Eastleigh SO53 3LG

Secretary: Blake Morgan Company Secretary Services

Auditors: Moore Kingston Smith LLP
Devonshire House
60 Goswell Road
London EC1M 7AD

Structure, Governance & Management

Governing Document - The Diabetes Research and Wellness Foundation, also known as DRWF, is a registered charitable company (Registered Charity No. 1070607 and Company No 03496304) limited by guarantee and governed by its Memorandum and Articles of Association dated 15 January 1998 and amended by special resolutions passed on 15th June 1998, 2nd December 2001 and 24th April 2005.

Recruitment & Appointment of Trustees - The charity trustees are also the directors of the company for the purposes of company law.

As dictated by the charity's Articles of Association, directors are appointed by the Company Members. Any person desiring to be admitted to the membership of the company is required to apply in writing. No person shall be admitted until approved by resolution passed in accordance with the Articles of Association by the existing members, who hold absolute discretion as to the admission of any person.

The Trustees of the charity, being mindful that the board should offer a diversity of skills to fulfil statutory and fiduciary duties, are open to recommendations for new board members.

The business and medical/health related skills within the existing board member pool are supported by personal experience of diabetes, which assists the board in ensuring that objective activities meet beneficiary need.

Additionally, the board is supported in its decision-making processes by a Research Advisory Board, which has an independent Chairman. The RAB members review applications and make recommendation for research funding awards. An Editorial Advisory Board provides support to the provision of health and social care information. Both boards are made up of clinicians, scientists and other 'experts' in the field of diabetes and related health and strengthen the services that the charity offers its beneficiaries.

All board members are subject to conflict of interest policies and processes.

Trustee Induction and Training – Newly elected Trustees receive an Induction Pack that outlines the role and responsibilities of the Trustee, along with a history of the structure and purpose of the charity.

The pack includes a copy of the governing document and contact details of all board members. There is also an outline of the Chairman of the Board's role and responsibilities along with details of the executive officer taking responsibility for the daily management of the charity. Trustees are required to comply with the eligibility requirements set out by Charity Commission and to review and update an annual 'register of interests'.

Trustees are kept up to date with various governance publications and notices from appropriate professional advisory memberships. Additionally, trustees might be advised of appropriate governance courses that they may benefit from attending to ensure diversity and continuity of knowledge and skills within the Board.

Newly elected trustees are invited to attend a Review Meeting with the chair, after an agreed time lapse, in order to feedback their first impressions and address any concerns.

Trustees are actively encouraged to participate in the charity's outreach programme of educational events.

Organisation - The strategic direction and policy of the charity is the responsibility of the Board of Trustees. During 2020 six trustees served on the Board, from a variety of professional backgrounds relevant to the work of the charity. Ordinarily, the Board meets at least once each year in person and holds quarterly teleconference meetings with additional meetings organised as required. Due to the coronavirus pandemic, the Board met more frequently during 2020 via Zoom video meeting. There were no meetings in-person during the year.

Risk Management – The Trustees have examined the major strategic, business, reputational and operational risks that the charity faces. This involves identifying specific risks; assessing their likelihood of occurrence and potential impact; determining what steps could be taken to mitigate those risks and delegating responsibility to key staff for overseeing management of the associated controls. The risk register is reviewed annually to ensure the adequacy of internal control mechanisms. The trustees consider that the Charity has robust internal procedures, systems and processes and believe that risk assessment is embedded throughout the organisation.

The risk register was reviewed and scored in November and resulting risks discussed by the Board at a meeting held on 16th December.

There were a number of risks which ranked as **MEDIUM** (3 – 5 amber) where additional control measures or alternative methods of working may be required and these are being monitored and where necessary will be addressed through our future Growth Strategy. The **HIGH** priority risk (6 – 9 red) was in relation to pandemic response planning and considered the most likely barrier to success and requiring immediate and sustained attention.

The Board considers that the major risks facing the charity are –

- Fundraising and dependency on single income streams
- Data security including loss of data
- Loss of key staff
- Reserves policy and cash flow sensitivity
- Government policy

Covid-19 risk assessment/business continuity

When the impact of Covid-19 hit in early March, we developed a pandemic response/business continuity checklist that outlined key considerations to help us manage –

- Health and safety of employees
- Critical activities
- Dependencies – staffing
- Key suppliers/contractors (disaster recovery/business continuity plans)
- Communications strategy
- Technology requirements
- Activation plans

This has served as an effective plan to manage the risk and potential impact on employees, stakeholders, beneficiaries and our key activities. We continue to work within this risk management framework whilst we navigate the pandemic and recovery phase.

Trustees' responsibilities in relation to the financial statements – The trustees, who are also directors of Diabetes Research and Wellness Foundation for the purposes of company law, are responsible for preparing the trustees' annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice.)

Company law requires trustees to prepare financial statements for each financial year that give a true and fair view of the state of the affairs of the charitable company and of the outgoing resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;

- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

Auditors – Moore Kingston Smith LLP have indicated their willingness to continue in office and are deemed to be reappointed in accordance with section 487(2) of the Companies Act 2006.

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

On Behalf of the Trustees


.....
Michael Gretschel Chairman

15th JUNE 2021
.....
Dated

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF DIABETES RESEARCH AND WELLNESS FOUNDATION

Opinion

We have audited the financial statements of Diabetes Research and Wellness Foundation ('the company') for the year ended 31 December 2020 which comprise the Statement of Financial Activities, the Summary Income and Expenditure Account, the Balance Sheet, the Cash Flow Statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 'The Financial Reporting Standard Applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2020 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs(UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, 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 trustees' 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 charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information. 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.

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' annual report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' annual report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' annual report.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; [or]
- we have not received all the information and explanations we require for our audit. [or]
- *the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the Trustees' Annual Report and from preparing a Strategic Report.*

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement set out on page 21, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees 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 trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company 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 (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below.

Explanation as to what extent the audit was considered capable of detecting irregularities, including fraud

The objectives of our audit in respect of fraud, are; to identify and assess the risks of material misstatement of the financial statements due to fraud; to obtain sufficient appropriate audit evidence regarding the assessed risks of material misstatement due to fraud, through designing and implementing appropriate responses to those assessed risks; and to respond appropriately to instances of fraud or suspected fraud identified during the audit. However, the primary responsibility for the prevention and detection of fraud rests with both management and those charged with governance of the charitable company.

Our approach was as follows:

- We obtained an understanding of the legal and regulatory requirements applicable to the charitable company and considered that the most significant are the Companies Act 2006, the Charities Act 2011, the Charity SORP, and UK financial reporting standards as issued by the *Financial Reporting Council*.
- We obtained an understanding of how the charitable company complies with these requirements by discussions with management and those charged with governance.
- We assessed the risk of material misstatement of the financial statements, including the risk of material misstatement due to fraud and how it might occur, by holding discussions with management and those charged with governance.
- We inquired of management and those charged with governance as to any known instances of non-compliance or suspected non-compliance with laws and regulations.
- Based on this understanding, we designed specific appropriate audit procedures to identify instances of non-compliance with laws and regulations. This included making enquiries of management and those charged with governance and obtaining additional corroborative evidence as required.

As part of an audit in accordance with ISAs (UK) 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 purposes of expressing an opinion on the effectiveness of the charitable company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' 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 charitable company'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 charitable company 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.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the company'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 any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Moore Kingston Smith LLP

.....
Neil Finlayson (Senior Statutory Auditor)

for and on behalf of Moore Kingston Smith LLP, Statutory Auditor

Date: 17 June 2021.

Devonshire House
60 Goswell Road
London
EC1M 7AD

Diabetes Research and Wellness Foundation
Statement of Financial Activities (Incorporating the Summary Income and Expenditure Account)
For the year ended 31 December 2020

	Unrestricted Funds	Restricted Funds	2020 TOTAL	Unrestricted Funds	Restricted Funds	2019 TOTAL
	£	£	£	£	£	£
Income						
Donations and Legacies	1,494,220	24,525	1,518,745	1,245,142	8,025	1,253,167
Charitable Activities	131,303	-	131,303	225,081	-	225,081
Other Charitable Trading Activities	8,004	-	8,004	16,286	-	16,286
Investments	6,101	-	6,101	11,910	-	11,910
Income from Charitable Activities	1,639,628	24,525	1,664,153	1,498,419	8,025	1,506,444
Other Income	8,232	-	8,232	3,750	-	3,750
Total Income	<u>1,647,860</u>	<u>24,525</u>	<u>1,672,385</u>	<u>1,502,169</u>	<u>8,025</u>	<u>1,510,194</u>
Expenditure On:						
Raising Funds	265,996	-	265,996	290,952	-	290,952
Charitable Activities	1,392,125	16,269	1,408,394	1,677,200	10,895	1,688,095
Other	1,658,121	16,269	1,674,390	1,968,152	10,895	1,979,047
Net Income	<u>(10,261)</u>	<u>8,256</u>	<u>(2,005)</u>	<u>(465,983)</u>	<u>(2,870)</u>	<u>(468,853)</u>
Transfer between Funds	20	-	-	-	-	-
Net Movement in Funds	<u>(10,261)</u>	<u>8,256</u>	<u>(2,005)</u>	<u>(465,983)</u>	<u>(2,870)</u>	<u>(468,853)</u>
Total Funds brought forward	2,991,601	-	2,991,601	3,457,584	2,870	3,460,454
Total funds carried forward at 31 December 2020	<u>2,981,340</u>	<u>8,256</u>	<u>2,989,596</u>	<u>2,991,601</u>	<u>-</u>	<u>2,991,601</u>

There were no recognised gains or losses other than the deficit reported for the financial year. All activities in the year relate to continuing operations.

The accompanying notes form an integral part of these financial statements.

Diabetes Research and Wellness Foundation
Balance Sheet
As at 31 December 2020

	Note	2020 £	2020 £	2019 £	2019 £
Fixed Assets					
Tangible Assets	16		4,800		3,250
Current Assets					
Debtors	17	139,465		189,683	
Cash at bank and in hand		<u>3,160,905</u>		<u>3,262,259</u>	
		3,300,370		3,451,942	
Creditors : Amounts falling due within one year	18	<u>(315,574)</u>		<u>(463,591)</u>	
Net Current Assets		<u>2,984,796</u>		<u>2,988,351</u>	
Total Net Assets		<u>2,989,596</u>		<u>2,991,601</u>	
Reserves					
Restricted Fund	20		8,256		-
General Reserve	20		<u>2,981,340</u>		<u>2,991,601</u>
			<u>2,989,596</u>		<u>2,991,601</u>

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime within Part 15 of the companies Act 2006 and with the Financial Reporting Standard FRS 102 SORP (effective January 2015)

The financial statements were approved, and authorised for distribution, by the Trustees on 15th JUNE 2021 and signed on their behalf by:


 Michael Gretschel Trustee

The accompanying notes form an integral part of these financial statements

Company number: 03496304

Diabetes Research and Wellness Foundation
Statement of Cash Flows
For the year ended 31 December 2020

	Note	2020 £	2019 £
Cash used in Operating Activities	24	(104,230)	(367,679)
Cash Flows from Investing Activities			
Interest on Bank Deposit		6,101	11,910
Fixed Assets		<u>(3,225)</u>	<u>(2,564)</u>
Cash Flows from Financing Activities		0	0
Change in cash and cash equivalents in the year		<u>(101,354)</u>	<u>(358,333)</u>
Cash and cash equivalents brought forward 1st January		3,262,259	3,620,592
Cash and cash equivalents at 31st December		<u><u>3,160,905</u></u>	<u><u>3,262,259</u></u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements
For the year ended 31 December 2020

1 Accounting Policies

The financial statements have been prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102). The Charitable Company is a public benefit company for the purposes of FRS 102 and therefore the Charity also prepared its financial statements in accordance with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (The FRS 102 Charities SORP), the Companies Act 2006 and the Charities Act 2011.

The trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charity to continue as a going concern. The charity has given due consideration for the effects of the Covid-19 outbreak. The charity will continue with a full programme of direct mail campaigns to ensure continuity of its major income streams in the next financial year. The annual programme of Awareness Events and Fund Raising Events will be a combination of online and traditional events and it is anticipated the income streams will increase in the next financial year. The trustees have made this assessment for a period of at least one year from the date of approval of the financial statements. In particular the trustees have considered the charity's forecasts and projections and have taken account of pressures on donations income. After making enquiries the trustees have concluded that there is a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. The charity therefore continues to adopt the going concern basis in preparing its financial statements.

The financial statements are prepared in sterling, which is the functional currency of the company. Monetary amounts in these financial statements are rounded to the nearest pound. The financial statements have been prepared on the historical cost convention, modified to include certain financial instruments at fair value. The principal accounting policies adopted are set out below.

Critical accounting estimates and areas of judgement

In the view of the trustees in applying the accounting policies adopted, no judgements were required that have a significant effect on the amounts recognised in the financial statements nor do any estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

The principal accounting policies of the company are set out below:

Income

Income is included on an accruals basis except that donations under gift aid together with the associated income tax recoveries are credited as income when the donations are received. Membership Subscriptions are apportioned across the membership subscription period.

Legacies

Legacies are recognised following probate and once there is sufficient evidence that receipt is probable and the amount of the legacy receivable can be measured reliably. Where entitlement to a legacy exists but there is uncertainty as to its receipt or the amount receivable, details are disclosed as a contingent asset until the criteria for income recognition are met.

Public Donations and Gifts-in-Kind

Incoming resources in the form of Gifts-in-Kind are included in the Statement of Financial Activities only when assets donated to the charity are distributed. Gifts-in-Kind are donations of commodities directly usable in charitable programmes, such as food, blankets, books, agricultural and medical supplies. The Charity has an internationally recognised and accepted monitoring programme in place to ensure that commodities are appropriately valued at wholesale or less, culturally appropriate for the designated programme, and can be both properly shipped and distributed gratis to the designated beneficiaries.

Gift Aid Repayments

Income from gift aid repayment claims is only included for claims which have been submitted for tax periods ending on or before the year end and when the receipt of this income is certain.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2020

1 Accounting Policies (continued)

Expenditure

Expenditure, which is charged on an accruals basis, is allocated between:

- expenditure incurred directly in the effort to raise voluntary contributions (cost of generating funds);
- expenditure incurred directly to the fulfilment of the charity's objectives (charitable expenditure);

Charitable expenditure comprises all the expenditure incurred by the charity in meeting its charitable objectives and is further analysed between:

- grants payable in the furtherance of the charity's objectives
- costs of activities in furtherance of the charity's objectives
- support costs of the charity

Cost Apportionment

Where items of expenditure involve more than one cost category these costs have been apportioned on a reasonable basis as determined by the trustees. One particular area where the cost is material to the charity is in the production and distribution of direct mailings.

One of the purposes of the mail shot is to develop a database of names of people with a particular interest in the activities of the charity and its charitable objects. It is held that individuals who make a £10 or greater donation, in response to the mailing, have a degree of interest in diabetes. They are interested because they suffer from diabetes, know somebody who does or could themselves be at risk of developing the condition. These are precisely the people whom the charity is trying to help and consequently they receive the benefits of the educational material provided by the charity. These high interest individuals constitute 25% of the total responses; so the charity allocates 25% of the cost of the mailing to costs in furtherance of the charity's objects.

Furthermore the remaining expenditure has been allocated on the basis of whether the educational content of the individual mailing is significantly high enough so as to be material. When this holds true the remaining cost of the mailing is allocated on a pro-rata basis comparing the educational content (costs in furtherance of the charity's objects) to the fund raising content (costs of generating funds). The educational content is determined by the amount of text and space on each mailing that is dedicated to material of an educational nature.

Telemarketing expenditure is allocated in a consistent manner with mailings, as described above, hence the charity allocates 25% of the cost of the telemarketing calls to costs in furtherance of the charity's objectives, with the remaining expenditure allocated on the basis of whether the time spent during the telephone call is in accordance with the charity's objects or otherwise.

Fund raising expenditure i.e. Text that may induce a donation from the recipient, is allocated upon the basis of the volume of the text and space that is not related to text of an educational nature.

Support costs comprise all other overhead costs for the running of the charity as an organisation.

Fund Accounting

Designated funds are unrestricted funds earmarked by the Trustees for particular purposes. The aim and use of each fund is set out in the notes to the financial statements.

Unrestricted funds are donations and other incoming resources received or generated for expenditure on the general objectives of the charity.

Restricted funds are donations received from a donor who has specified a particular area of the charity's work to which the donation should be allocated.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2020

1 Accounting Policies (continued)

Grants Payable

Grants are recognised when they become due for payment. Included within the Statement of Financial Activities is the cost of grant instalments that are payable to charitable organisations / individuals in accordance with the charity's governing instruments, together with any grants payable for the year, but not paid by the year end date. The value of grants awarded which are subject to the completion of a future year's performance is disclosed as a Financial Commitment in Note 18.

Tangible Fixed Assets and Depreciation

Depreciation is calculated to write down the cost less estimated residual value of all tangible fixed assets held for charity use by equal annual instalments over their expected useful economic lives. The rates generally applicable are:

Office equipment, fixtures and fittings	5-7 years straight line
---	-------------------------

All tangible fixed assets costing more than £250 are capitalised at their cost to the charity.

Foreign Currencies

Transactions in foreign currencies are translated at the exchange rate ruling at the date of the transaction. Monetary assets and liabilities in foreign currencies are translated at the rates of exchange ruling at the balance sheet date. All exchange differences are dealt with through the statement of financial activities.

Leasing Commitments

Rentals payable under operating leases are charged against income on a straight line basis over the lease term.

Other Financial Instruments

i. Cash and cash equivalents

Cash and cash equivalents include cash at banks and in hand and short term deposits with a maturity date of three months or less.

ii. Debtors and Creditors

Debtors and creditors receivable or payable within one year of the reporting date are carried at their at transaction price. Debtors and creditors that are receivable or payable in more than one year and not subject to a market rate of interest are measured at the present value of the expected future receipts or payment discounted at a market rate of interest.

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2020

2	Donations and Legacies	2020	2019	
		£	£	
	<i>Donations</i>	760,750	927,491	
	Lottery Programme	8,185	7,872	
	Legacies Received	749,810	317,804	
		<u>1,518,745</u>	<u>1,253,167</u>	
	Included in the above are restricted donations of £24,525 (2019: £8,025)			
3	Charitable Activities	2020	2019	
		£	£	
	Grants Received	22,721	-	
	Gifts in Kind (see Note 9)	-	-	
	Gift Aid Receipts	108,582	225,081	
		<u>131,303</u>	<u>225,081</u>	
4	Other Charitable Trading Activities	2020	2019	
		£	£	
	Membership Subscriptions	6,216	10,993	
	Event Fees and Sponsorship	1,788	5,293	
		<u>8,004</u>	<u>16,286</u>	
5	Other income	2020	2019	
		£	£	
	Book Sales	-	-	
	Royalties Received	-	-	
	Registration Fees	-	42	
	Miscellaneous Income	8,232	3,708	
		<u>8,232</u>	<u>3,750</u>	
6	Fund Raising Costs	2020	2019	
		£	£	
	Caging	125,046	135,363	
	Carriers	1,535	1,678	
	Computer Charges	3,038	3,903	
	Lettershop and Data	3,179	2,900	
	Postage and Shipping	16,510	24,618	
	Printing	1,654	4,334	
	Publicity	2,331	5,028	
	Marketing Costs	7,602	11,338	
	Telemarketing	-	-	
	Mail Pack Premiums	14,995	21,239	
	Lottery Costs	7,175	3,645	
	Staff Costs (see Note 12)	68,431	62,105	
	Sweepstake Winners	14,500	14,800	
		<u>265,996</u>	<u>290,952</u>	
7	Charitable Activities	2020	2020	2020
		Direct	Grants	Total
		Expenditure	Awards	
		(Note 10)	(Note 8)	
		£	£	£
	Research into the Relief of Diabetes	-	289,471	697,076
	Relief of Persons with Diabetes	-	-	-
	Raising Public Awareness of Diabetes	711,318	-	711,318
		<u>711,318</u>	<u>289,471</u>	<u>1,408,394</u>
		£	£	£
		2019	2019	2019
		Direct	Grants	Total
		Expenditure	Awards	
		(Note 10)	(Note 8)	
		£	£	£
	Research into the Relief of Diabetes	-	453,948	890,318
	Relief of Persons with Diabetes	-	-	-
	Raising Public Awareness of Diabetes	797,777	-	797,777
		<u>797,777</u>	<u>453,948</u>	<u>1,688,095</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2020

8 Grant Awards	2020	2019
	£	£
University of Bristol - Non Clinical Fellowship 2016		44,943
University of Oxford	103,351	156,707
University of Exeter (previously Kings's College London) – Non Clinical Fellowship 2018	64,978	64,978
King's College London – 2019 Pump Priming Award		19,995
King's College London – 2019 Pump Priming Award		18,196
University of Oxford – 2019 Pump Priming Award		19,567
University of Dundee – 2019 Pump Priming Award		20,000
Barts and The London School of Medicine & Dentistry – Pump Priming Award		19,771
University of Lincoln – 2019 Pump Priming Award		19,005
Association pour la Recherche sur la Diabete	864	540
Diabetes Wellness Network Canada	(700)	0
Imsamlingsstiftelsen Diabetes Wellness Network Sverige re Lund University - Norway		40,403
Diabetes Research Institute Foundation – University of Miami	50,415	50,004
University of Bristol - 2020 Pump Priming Award	18,000	
University of Cambridge - 2020 Pump Priming Award	20,000	
University of Strathclyde - 2020 Pump Priming Award	19,926	
University of Exeter - 2020 Pump Priming Award	20,000	
University of Dundee - 2020 Pump Priming Award	19,693	
University of Exeter - 2020 Pump Priming Award	19,600	
	<hr/>	<hr/>
	336,127	474,109
Less: Unclaimed grants written back	(46,656)	(20,161)
	<hr/>	<hr/>
	<u>289,471</u>	<u>453,948</u>

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2020

9 Gifts-in-Kind

The following donations made during the year were claimed as Gifts-in-Kind and are valued in accordance with current market conditions prevailing when the gift was made.

	Number of Shipments	Gifts-in-Kind value	Shipping Costs	2020 Total	2019 Total
	-	-	-	-	-
	-	-	-	-	-

10 Direct Charitable Expenditure

	2020 £	2019 £
Staff Costs (see Note 12)	373,572	335,707
Postage	141,033	191,948
Printing	42,629	74,475
Publicity	13,247	10,000
Mail Pack Premiums	107,114	151,713
Carriers	10,962	11,989
Grant Costs	1,165	2,718
Lettershop and Data	21,596	19,227
	<u>711,318</u>	<u>797,777</u>

11 Support Costs

	2020 £	2019 £
Other Staff Costs	5,643	4,524
Professional Costs	22,012	16,941
Management Charge	141,483	93,870
Office Expenses	82,792	96,808
Establishment Expenses	44,278	45,116
Bank Charges and Interest Paid	3,298	2,516
Foreign Exchange (Loss)	5,175	3,002
Provision for Bad Debts	-	-
Depreciation	1,675	1,033
Irrecoverable VAT	70,801	71,852
Amounts paid to Auditors	17,644	14,405
Company Secretarial Fees	350	350
Board Meeting Expenses & Trustee Expenses	-	26,996
Other Overhead Costs	12,454	58,957
	<u>407,605</u>	<u>436,370</u>

Support Costs are allocated to the Charitable expenditure of the charity in proportion to the direct cost of the activity

12 Wages and Salaries

	2020 £	2019 £
Wages and Salaries	398,678	359,083
Social Security Costs	31,138	28,133
Pension Costs	12,187	10,597
	<u>442,003</u>	<u>397,813</u>

The key management personnel of the charity are the Trustees and the CEO. The total amount paid to key management personnel was £66,941 (2019: £66,964).

No employee received a salary of more than £60,000 during the year (2019: Nil).

The average number of full-time equivalent employees during the year was 11.5 (2019: 11).

Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2020

13 Payments to Trustees

No trustee or person with a family or business connection with a trustee, received remuneration in the year, directly or indirectly, from the charity.

Trustee Expenses for Travel and Meeting Costs were £nil (2019: £26,995) of which £nil (2019: £26,008) was reimbursed directly to nil (2019: 4) Trustees.

14 Surplus of Income over Expenditure

	2020	2019
	£	£
The surplus of income over expenditure is stated after charging:		
Auditors' Remuneration:		
- Audit Fee relating to the Financial Year	15,250	14,405
- In respect of non audit services	1,965	3,563
Operating Lease rentals		
- Plant & Machinery	3,126	3,127
- Other Assets	26,001	24,090
Foreign Exchange Loss	5,175	3,002
Depreciation	<u>1,675</u>	<u>1,033</u>

15 Taxation

The company, being a registered charity, is not liable for corporation tax in respect of its operations for the year.

16 Tangible Fixed Assets for Charity Use

	Office equipment, fixtures and fittings
	£
Cost	
At 1 January 2020	34,032
Additions in Year	3,234
Disposals in Year	<u>(6,278)</u>
At 31 December 2020.	<u>30,988</u>
Depreciation	
At 1 January 2020	30,782
Provided in the year	1,675
Eliminated on Disposal	<u>(6,269)</u>
At 31 December 2020.	<u>26,188</u>
Net Book Value	
31-Dec-20	<u><u>4,800</u></u>
At 31 December 2019	<u><u>3,250</u></u>

17 Debtors

	2020	2019
	£	£
Trade Debtors	-	13,156
Other Debtors	9,111	36,223
Prepayments and Accrued Income	<u>130,354</u>	<u>140,304</u>
	<u><u>139,465</u></u>	<u><u>189,683</u></u>

All Debtors except prepayments are financial instruments and are measured at settlement value

**Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2020**

18 Creditors : Amounts falling due within one year

	2020 £	2019 £
Trade Creditors	45,101	52,569
Grants Payable (see below)	205,741	309,784
Accruals and Deferred Income	50,929	89,242
Tax and Social Security	12,414	11,732
Other Creditors	1,389	1,264
	<u>315,574</u>	<u>463,591</u>

included within other creditors is a pension creditor of £nil (2019: £nil)

All Creditors except deferred income are financial instruments and are measured at settlement value

Reconciliation of Grants Payable:

Commitments at 1 January 2020	309,784	206,603
Grants Payable for the Year (see Note 8)	289,471	453,948
Grants Paid during Year	(393,514)	(350,767)
	<u>205,741</u>	<u>309,784</u>

In addition to the amounts committed and accrued noted above, the trustees have also authorised the continuation of certain grants which are subject to the recipient fulfilling certain conditions. The details of these further commitments can be found in Note 22.

19 Deferred Income

	2020 £	2019 £
Deferred Income B/FWD 1st January 2020	4,303	8,413
Released to Income in Year	(4,303)	(8,413)
Income Deferred in Year	4,040	4,303
Deferred Income C/FWD 31st December 2020	<u>4,040</u>	<u>4,303</u>

Deferred Income comprises:

- Newsletter Membership Subscriptions which are renewable annually on a rolling 12 monthly basis
- Event Registration and Exhibition Fees received in advance of the event taking place
- Restricted Grants Received that will not be utilised until future periods

20 Reserves

	Balance at 1 January 2020 £	Transfer from General Reserve In Year £	Income in Year £	Expenditure in Year £	Net Movement in Year £	Balance at 31 December 2020 £
Restricted Fund relating to Diabetes Research	-	-	1,000	(1,000)	-	-
Restricted Fund relating to The Big Give Christmas Challenge	-	-	8,256	-	8,256	8,256
Restricted Fund relating to 2020 Pump Priming Award	-	-	15,269	(15,269)	-	-
Designated Growth Fund	-	150,000	-	-	150,000	150,000
General Reserve	2,991,601	(150,000)	1,647,860	(1,658,121)	(160,261)	2,831,340
	<u>2,991,601</u>	<u>-</u>	<u>1,672,385</u>	<u>(1,674,390)</u>	<u>(2,005)</u>	<u>2,989,596</u>
	Balance at 1 January 2019 £	Transfer from General Reserve In Year £	Income in Year £	Expenditure in Year £	Net Movement in Year £	Balance at 31 December 2019 £
Restricted Fund relating to Diabetes Research	-	-	-	-	-	-
Restricted Fund relating to The Big Give Christmas Challenge	2,870	-	8,025	(10,895)	(2,870)	-
General Reserve	3,457,584	-	1,502,169	(1,968,152)	(465,983)	2,991,601
	<u>3,460,454</u>	<u>-</u>	<u>1,510,194</u>	<u>(1,979,047)</u>	<u>(468,853)</u>	<u>2,991,601</u>

In 2020 a donation of £1,000 was made specifically for research purposes.

During 2020 the charity participated in the Big Give Christmas Challenge 2020 to raise funds for the 2021 programme of Educational Events. The funds received in the year was £8,256 (2019 £8,025).

A team of fundraisers raised £15,269 (2019 £nil) towards University of Exeter's 2020 Pump Priming Award.

The trustees designated £150,000 to support the growth and diversification of activities.

	Unrestricted £	Restricted £	Total £
Net Assets by Fund			
Tangible Assets	4,800	-	4,800
Current Assets	3,292,114	8,256	3,300,370
Current Liabilities	(315,574)	-	(315,574)
	<u>2,981,340</u>	<u>8,256</u>	<u>2,989,596</u>

**Diabetes Research and Wellness Foundation
Notes to the Financial Statements (Continued)
For the year ended 31 December 2020**

21 Payments to Connected Charities

Connected Charity	Nature of Relationship	2020		2019		Nature of Transactions
		£ Total transactions in the year	£ Balance at the year end	£ Total transactions in the year	£ Balance at the year end	
Diabetes Research and Wellness Foundation Inc.	1	141,483	-	93,870	-	Management charges in relation to the sharing of articles and staff.
Association pour la recherche sur la diabete	2	864	-	540	-	This grant was made to assist with the funding of the Association's awareness and educational programmes.
Diabetes Wellness Network Canada	3	(700)	-	-	-	This grant was made to assist in the funding of the Network's set up costs, this is the refund of an overpayment.
Insamlingsstiftelsen Diabetes Wellness Network Sverige re Lund University - Norway	4			40,403	-	This grant was made as part of a 2 year collaborative co-funded grant in respect of the funding of a project at Lund University in Norway.

Nature of Relationships

- 1 Diabetes Research and Wellness Foundation Inc. is completely separate and independent with no legal connections, but Mr. John Alahouzos sit on the Board of Trustees of the associated charity in the United States.
- 2 Association pour la recherche sur la diabete is completely separate and independent with no legal connections, but Mr W.M. Gretschel, Mr J. Alahouzos and Mr J. Harab sit on the Board of Trustees of the associated charity in France.
- 3 Diabetes Wellness Network Canada is completely separate and independent with no legal connections, but Mr W M Gretschel and Mr J Alahouzos also sit on the Board of Trustees of the associated charity in Canada.
- 4 Insamlingsstiftelsen Diabetes Wellness Network Sverige is completely separate and independent with no legal connections, but Mr W M Gretschel and Mr J Alahouzos also sit on the Board of Trustees of the associated charity in Sweden.

Further details regarding the relationship can be found in the Trustees Report.

22 Financial Commitments

The charity has financial commitments of £488,272 (2019: £421,660) for grants authorised but not accrued as expenditure for the year ended 31 December 2020, as they are subject to the recipient fulfilling certain conditions. The amounts payable are as follow:

	2020 £	2019 £
Payable in 2021		
Payable in 2022	329,241	332,801
Payable in 2023	94,054	88,859
Payable in 2024	64,977	-
	-	-
	<u>488,272</u>	<u>421,660</u>

23 Operating Leases

At 31st December 2020, the charity has commitments under operating leases as follows:

	2020 £		2019 £	
	Within one Year	Two to Five Years	Within one Year	Two to Five Years
Land and Buildings	22,167		28,001	22,167
Other Assets	2,484	974	3,069	3,302
Total	<u>24,651</u>	<u>974</u>	<u>31,070</u>	<u>25,469</u>

During 2018 year the charity moved its business office and Registered Office to new premises.

The new lease commenced on the 9th October 2018 with a term of six years at a rent of £28,000.25p per annum.

The lease includes a break clause allowing the tenant to terminate after three years.

The lease provides for two discounted periods of 10 months each during which the rent payable is reduced by 50%.

24 Reconciliation of Net Movement in Funds to Net Cash Flow from Operating Activities

	2020 £	2019 £
Net Movement in Funds - Surplus/(Deficit)	(2,005)	(468,853)
Add back Depreciation Charge	1,675	1,033
Deduct Interest Income shown in Investing Activities	(6,101)	(11,910)
Decrease (Increase) in Debtors	50,218	(43,743)
Increase (Decrease) in Creditors	(148,017)	155,794
Net Cash used in Operating Activities	<u>(104,230)</u>	<u>(367,679)</u>

25 Members' Liability

The Foundation is a company limited by guarantee. On the event of winding up, the member's (5) (2018 - 5) liability is limited to £1.

Diabetes Research and Wellness Foundation

Management Information

based on the

Financial Statements

For the year ended

31 December 2020

Diabetes Research and Wellness Foundation
Detailed Income and Expenditure Account
For the year ended 31 December 2020

	2020 £	2019 £
Income		
Gifts in Kind	-	-
Grants Received	22,721	-
Donations	760,750	927,491
Lottery Programme	8,185	7,872
Membership Subscriptions	6,216	10,993
Legacies/In Mem/Trusts Received	749,810	317,804
Gift Aid	108,582	225,081
Other Income	16,121	20,953
	<u>1,672,385</u>	<u>1,510,194</u>
Expenses		
Gifts in Kind	-	-
Grants - UK	238,892	363,001
Grants - DRWF Inc	50,415	50,004
Grants - Canada	(700)	-
Grants - Europe	864	40,943
Grants Costs	1,165	2,718
Printing - Educational Support	30,813	43,516
Mail Pack Premiums	122,109	172,951
Printing - Mail Packs	13,470	35,293
Carriers - Mail Packs	12,497	13,667
Artworks	-	-
Lettershop	20,345	16,192
Caging Costs	125,046	135,363
Computer Charges	3,038	3,903
Postage & Shipping	157,543	216,566
List Rental	4,430	5,935
Lottery Costs	7,175	3,645
Marketing Costs	280	-
Publicity	15,578	15,028
Telemarketing	-	-
Event & Retreat Costs	17,753	66,174
Prizes	14,500	14,800
GIK Shipping Costs	-	-
Management Fee	141,483	93,870
Salaries & Other Staff Costs	447,646	402,337
Office Costs	172,388	207,256
VAT Irrecoverable	70,801	71,852
Depreciation Charge for Year	1,675	1,033
Disposal of Assets	9	(3)
Provision for Bad Debts	-	-
Foreign Exchange Difference	5,175	3,002
	<u>1,674,390</u>	<u>1,979,046</u>
Net Surplus / (Deficit)	<u><u>(2,005)</u></u>	<u><u>(468,852)</u></u>

**Diabetes Research and Wellness Foundation
Detailed Income and Expenditure Account
For the year ended 31 December 2020**

Addition check
-
-
927,491
7,872
10,993
317,804
225,081
20,953
<u>1,510,194</u>
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16,192
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71,852
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3,002
<u>1,979,047</u>
<u>(468,853)</u>

Diabetes Research and Wellness Foundation
Detailed Income and Expenditure Account
For the year ended 31 December 2020

	2020	2019
	£	£
Income		
Donations	760,750	927,491
Lottery Programme	8,185	7,872
Gifts in Kind	-	-
Gift Aid Repayment claims	108,582	225,081
Bank Interest	6,101	11,910
Legacies/InMem/Trusts Received	749,810	317,804
Membership	6,216	10,993
Books	-	-
Grants Received	22,721	-
Other	10,020	9,043
	<u>1,672,385</u>	<u>1,510,194</u>
Expenses		
Gifts in Kind	-	-
GIK Shipping Costs	-	-
Grants Payable	289,471	453,948
Grant Costs	1,165	2,718
Computer Charges	3,038	3,903
Postage and Shipping	157,543	216,567
Printing	44,283	78,809
Salaries	442,003	397,813
Other Staff Costs	5,643	4,524
Caging	125,046	135,363
Carriers	12,497	13,667
Lettershop	20,345	16,192
List Rental	4,430	5,935
Marketing Costs	280	-
Publicity	15,578	15,028
Mail Pack Premiums	122,109	172,951
Lottery Costs	7,175	3,645
Telemarketing	-	-
Audit and Accountancy	19,609	16,255
Bank Charges and Interest Paid	3,298	2,516
Foreign Exchange Losses / (Gains)	5,175	3,002
Office Expenses	82,792	96,808
Rent, Rates and Utilities	44,278	45,116
Artwork	-	-
Legal Fees	20,397	15,441
Depreciation	1,675	1,033
Travel and Entertainment	2,014	4,124
Annual Events Programme	17,753	66,174
Sweepstake Winners	14,500	14,800
Management Fee	141,483	93,870
Irrecoverable VAT	70,801	71,852
Cost of Books Sold	-	-
Board Meeting Expenses	-	26,996
Miscellaneous	-	-
Profit/Loss on Disposal of Fixed assets	9	(3)
Provision for Bad Debts	-	-
	<u>1,674,390</u>	<u>1,979,047</u>
Net Surplus / (Deficit)	<u><u>(2,005)</u></u>	<u><u>(468,853)</u></u>