

Charity registration number 1089588 (England and Wales)

Charity registration number SC446344 (Scotland)

Company registration number 04267454 (England and Wales)

METABOLIC SUPPORT UK
ANNUAL REPORT AND UNAUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2023

METABOLIC SUPPORT UK

LEGAL AND ADMINISTRATIVE INFORMATION

Trustees	Dr R E Pugh MBChB FRCP Mr P J Roper MIET CEng BSC Hons Mr J O'Hara Msc Dr R Vara Dr E H Davies Mr C Lander
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Charity number (England and Wales)	1089588
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Charity number (Scotland)	SC446344
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Company number	04267454
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Registered office	Unit 11-12 Gwenfro Technology Park Croesnewydd Road Wrexham LL13 7YP
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Independent examiner	McLintocks (NW) Limited 2 Hilliards Court Chester Business Park Chester Cheshire CH4 9PX
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METABOLIC SUPPORT UK

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METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) FOR THE YEAR ENDED 31 MARCH 2023

The trustees present their annual report and financial statements for the year ended 31 March 2023.

The financial statements have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the charity's governing document, the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and "Accounting and Reporting by Charities: 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 (FRS 102) (effective 1 January 2019)".

Objectives and activities

The charity's primary aims are to:

- The relief of children, young adults, family members and carers affected by metabolic diseases in particular by means of:
 - i. Providing for the same group, an information, advice and support service.
 - ii. Putting the same group into contact with each other for their mutual benefit, help and support.
 - iii. The provision for grants and allowances for the same group and in addition to hospitals, homes or institutions, as shall from time to time be determined, for the purposes of medical treatment, care and relief from suffering.
- The relief of adults who are affected by metabolic diseases by the provision of support and services which are not otherwise provided by any other metabolic disease group in England, as the trustees think fit.
- The education of Health care professionals, other professionals and the general public about metabolic diseases.
- To provide medical research into metabolic diseases and their diagnosis.

The trustees have paid due regard to guidance issued by the Charity Commission in deciding what activities the charity should undertake.

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) **FOR THE YEAR ENDED 31 MARCH 2023**

Achievements and performance

Metabolic Support UK is an umbrella patient advocacy organisation founded in 1981, supporting and advocating for people living with Inherited Metabolic Disorders (IMDs) and their communities.

We support over 20,000 people living with one of over 500 IMDs, across the world. IMD's are rare, lifelong genetic disorders caused by an enzyme deficiency affecting the metabolic pathway which if undiagnosed or untreated, can cause irreversible complications, or sadly even death.

Metabolic Support UK delivers a wide range of support and advocacy services to address unmet needs for all IMD communities but with a focus on those for whom there is no established patient group. Using qualitative and quantitative data generated via diverse methodologies, our small and dedicated team works to proactively identify priority needs. We develop evidence-based outputs and programmes to ensure the maximum impact for individual patients, collective patient communities and the wider IMD community.

Our vision for the future: By 2030, Metabolic Support UK wants to see advances across all care and services for the IMD community. This includes early diagnosis, informed and empowered patients, and access to the treatments and services that are available to support families living with these conditions to enjoy a better quality of life.

Organisational Development

A key focus for our community in 2022-2023 was the cost-of-living crisis; an inescapable issue that permeated throughout our communities. We focused on finding out what our community need and providing real-time, accurate information to support them. Our staff team expanded to include a new Community and Communications Coordinator strengthening the links to our community. Building external relationships to increase our networks was vital this year and we took advantage of the increased in-person events to connect at conferences in the UK and abroad. Our insight arm, MSUK Insight, had a successful first year, paving the way to meet our ambition of positioning MSUK as the leading provider of insight in patients living with an inherited metabolic disorder.

Achievements and Performance

This year saw MSUK step firmly into our role as the umbrella support group for all people living with an inherited metabolic disorder. We joined the Disabled Children's Partnership and the Disability Benefits Consortium as a way to start more closely aligning the needs of our rare disease community with wider society. We also planned and delivered work that prioritised educating and empowering our community by removing barriers to accessing treatments, increasing awareness of rare disease policy and responding to community needs such as cost of living crisis. We brought our community together in-person for the first time since 2019 with a fantastic family fun day at Chester Zoo at which many people met others with the same condition as them for the first time. We were involved in six technology appraisals, increasing access to treatments for our diverse community. Our work in Newborn Screening has shown growth over the year, including our impact on the successful approval of an IMD, Tyrosinemia, for addition to the UK Newborn Screening Panel. We have also started our aim to more meaningfully co-produce our work with the launch of our co-production group the Metabolic Advisory Council. Our individual support remained as strong as previous years, with an increase in international enquiries reflecting our growth as the leading international organisation supporting people living with an IMD.

Strategic Implementation

By 2030, we want to see advances across all care and services for the IMD community; this includes early diagnosis, informed and empowered patients, and access to the treatments and services that are available to support families with these conditions to enjoy a better quality of life.

Our commitment to our community is to make sure that their voices are heard across all levels of decision-making and policy implementation. We work collaboratively and transparently as we strive to achieve our objectives, ensuring the best outcomes for those affected by IMDs.

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

In order to achieve this, we developed our long-term strategic pillars based on our evidence and insight of the needs of those we support. These four pillars are:

1. Individual Support
2. Building Communities
3. Empowerment
4. Advocacy

Individual Support

Our individual support focuses on providing those living with IMDs with emotional and practical support which is tailored to individual need. Support may be offered via, phone, email, social media or video calls and is provided by our experienced team. The support given may vary between short one-off enquiries or longer term support where we provide scaffolding for the family, building vital support networks, and act as an advocate in a range of fields including education and employment.

Within our individual support, we explore the context surrounding each enquiry to allow us determine what additional support may be required and to ensure that the enquirer is aware of all support on offer. This may include identifying local support for the family, seeking peer support opportunities, or signposting to external organisations offering dedicated disorder-specific support where available.

Our data allows us to see peaks and trends in the themes of enquiries and allows us to develop resources to address unmet need and establish conversations so those with lived experiences can share these with others who may be approaching or considering these themes. Such conversations may be facilitated via our dedicated IMD peer support programme, **Metabolic Connect**.

Enquiries

We received a total of **395 enquiries, a 13.5% increase from last year**. The majority of these were via email (71.6%) with 26.3% of these originating from our website contact form. 18.5% of enquiries were handled by phone, 8.6% by social media, and 1.3% by video call, a newly offered service providing face-to-face support.

Enquiries received were in relation to 96 different IMDs, with Medium Chain acyl CoA Dehydrogenase Deficiency (MCADD), Hypophosphatasia (HPP), Ornithine transcarbamylase deficiency (OTC), and Maple syrup urine disease being the most popular. Our three most popular themes of enquiry were **peer support, access to treatments, and financial support**.

Key Support Achievements 2022-2023:

Managed Access Agreement Support for Hypophosphatasia
The theme of access to treatments is prominent due to the considerable amount of individual support work completed surrounding the conclusion of the Managed Access Agreement for Asfotase alfa for the treatment of paediatric-onset HPP. This included working alongside the pharmaceutical company, metabolic bone consultants, NICE, and patient support groups to ensure that we carefully addressed the HPP communities worries and concerns and developed supporting information, held focus groups, and provided emotional support during a time of massive uncertainty regarding future access to a life-changing treatment.

Cost of Living Crisis
The cost of living crisis had a huge impact on the IMD community and this was encapsulated within our Cost of Living Report which derived from conversations in which our community shared their experiences and worries. In order to support those living with IMDs to identify the financial support available to them, we created a series of new resources including, the use of benefits calculators, support completing application forms, and assistance in accessing grant-giving organisations and support with hospital travel.

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

Improving connections and signposting

Throughout 2022-2023, work commenced to reconnect with all IMD centres and ensuring that centres had the relevant resources available to signpost those under their care to MSUK for support and advice. We bridged further connections within Scotland to understand the needs of the community in terms of access to services and developed closer relations with disorder-specific patient organisations to support the development of our IMD information pages with improved signposting.

• Travel Support

We updated and improved our travel support information and worked closely with travel insurance companies and assessors to ensure that our community understood how applying for and risk assessment within travel insurance quotes works. We felt this was important to ensure travel insurance companies were considering rare disorders as part of their policies and avoid incorrect applications for travel insurance which risk becoming invalid if conditions are not clearly stated or clarified. Our updated list and advice surrounding travel insurance also provides our community with easy steps to ensure they get the best quotes and have the support in place to travel with confidence.

Building Communities

Living with a rare IMD can feel isolating for both the people living with the condition and their families or caregivers. We work to reduce isolation by helping to bring people together to share experiences and ask for advice.

Anyone affected by an IMD can join our disorder specific online communities, access one-to-one introductions, or find wider peer-to-peer support. Throughout this support we are keen to remove barriers, creating spaces that are inclusive, safe, and accessible.

We aim to expand our communities, supporting harder to reach cohorts and developing a network for each community, provide individual support and resources where needed in a timely manner, and address unmet needs. Identifying and working with Community Ambassadors is vital, ensuring the work we do benefits and supports the community members.

Online

Many of our communities rely on online spaces and in 2022/23 we focused on improving our social media engagement with all the IMD community by increasing the regularity and the relevance of our posts. Utilising analytics to gain insight into our activities across our social media channels: Instagram, Facebook, Twitter, and LinkedIn, we have been able to tailor our communications for different audiences. This year we delivered 898 separate pieces of online content, seen by over 400,000 people and increased our followers by 20% to 4,800. Our social media engagement is a key element of our community building; we interact daily with different communities by posting and responding to others' posts. We use our social media to share information but also to ask questions. In September 2022 we asked our Facebook community, 'What are your thoughts on genetic testing, whole genome sequencing and gene therapy'. This sparked an online, open, conversation between group members (patients and caregivers) who shared thoughts such as 'For my family genetic testing gave us answers and choice' and 'Gene therapy would completely change (my daughter's) life'. This valuable, informal insight helps us to better connect with people.

Engagement

Key Community Building Achievements 2022-2023:

1. In November 2022 we held our first in-person event since 2019, a 'Family Fun Day' at Chester Zoo. Attended by over 60 people, this event was an opportunity to connect with our communities and provided a unique opportunity for families to meet each other in person.
- iv. In July 2022 we marked Metabolic Awareness Week by launching a series of online educational materials that provided accessible and relevant information on Rare Disease policy for our communities.
- v. We were directly involved with over 50 online disease specific community groups and developed 4 new disease specific groups across the year.
- vi. Our CEO, Kirsty Hoyle, shared her lived experience as a parent to a child with a rare condition in the rare disease community magazine, *Rarity Life*. The article was shared with our community and highlighted our values of putting lived experience at the centre of our work.
- vii. Coffee and Chat sessions were held fortnightly with the introduction of topic-specific sessions designed to create focused sharing on subjects such as genetic testing and genetic counselling.

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

Empowerment

We want to ensure that people living with IMDs are well informed about their choices, at all stages of their life and condition. Our communities should have the means to assert their right to access care or treatment that should be available to them, as well as the ability to provide good self-management.

We aim to provide accessible resources about conditions and new developments, ensuring people are aware of the options available to them. In turn they can make informed decisions ranging from diagnostic tools, treatment options, and care pathways. Facilitating platforms and opportunities for people to share their experiences allows the community to empower each other. Enabling Community Ambassadors in these spaces elevates this, leading people to become more proactive, vocal, and confident. In turn people feel empowered to contribute to development of disorder specific toolkits and frameworks, leading on their condition and self-care.

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Key Advocacy Achievements 2022-2023

1. Our response to the Cost-of-Living Crisis was one of our key areas of work in 2022/23. We surveyed our community on their needs and produced a 'Cost of Living with an IMD report'. This report was well received and reached 453,641 people, generating 815 reads with an average read time of 4 minutes. Further increasing its impact, the findings were referenced in the Specialised Healthcare Alliance report on inequalities for rare diseases which was shared with members of the specialised commissioning team at NHS England (NHSE), those with rare disease portfolios at the Department of Health and Social Care (DHSC) and relevant stakeholders at the National Institute of Health and Care Excellence (NICE).

2. We joined the Disabled Children's Partnership, a coalition of charities who support the needs of disabled children. When we announced we had joined the partnership online one of our community responded "Fabulous news - 2 great charities working together for us 🙏"

3. Newborn Screening was a key focus for us this year:
- Joining the Newborn Screening Collaborative
- We were instrumental in the IMD Tyrosinemia being approved for additional to the UK Newborn Screening Panel
- Providing information to our community on Newborn Screening and seeking insight on their views.

4. External Research & Insight
As a trusted umbrella group and signposter, we share information on a number of opportunities for the IMD community for the benefit of patients and all stakeholders. This year we provided information on over 30 external research and insight opportunities from organisations such as Carer's Trust, Health Research Wales, The Patient's Association and Beacon and cooking events with VitaFlo.

5. Events, Forums and Partnerships

Our community, and their voices, are at the centre of our work. Throughout the year we continuously sought opportunities to;

- engage with national and international bodies to raise the profile of IMDs.
- utilise our data and evidence to support lobbying for welfare of the wider IMD community
- share our learnings with other patient organisations and stakeholders aiming for a coordinated effort.

In 2022-2023 we focused on increasing our presence at/on external events, forums, groups and committees;

- **Attending relevant professional events allows us to raise the flag for our community and make vital connections with sector colleagues, events included:**
Cambridge Integrated Care Rare Disease Day
SSIEM, Germany, the leading international gathering of IMD medical specialists
Roadshow, Manchester

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

- **We sit on forums and groups that allow us direct opportunities to influence policy, access to treatments and on-going care:**
 - Rare Disease Framework Forum (gov.uk)
 - Inherited White Matter Disorder Group
 - Metabolic Clinical Referencing Group (NHS England)
 - Mustang Steering Committee
 - Menkes Clinical Trial Steering Committee
 - Pyruvate Kinase Deficiency Advocacy and Advisory Council
 - IMD Newborn Screening Advisory Board (Public Health England)
 - Patient Engagement Group (Genetic Alliance)
- **Our partnerships with academics, healthcare professionals and other patient advocacy organisations provide a unique opportunity to advocate across diverse spaces:**
 - PNPO Research Project
 - X-Linked Hypophosphatasia with Kyowa Kirin
 - Rare Bone Alliance Members
 - Lysosomal Storage Disease Collaborative
 - Genetic Alliance
 - Rare QOL

6. MSUK Insight Services

In 2021/22 we launched our ambitions to deepen and expand our insight services, providing best practice patient insight for all stakeholders. This year we delivered a number of insight projects that allowed us to test and refine our offer and service model, something we will focus on with greater import over the next two to three years. Examples of insight projects in 2022/23 include:

AADC Project (report with AADC Trust) - working in partnership with AADC Research Trust, we co-developed an AADC insight report and took part in the NICE appraisal of a gene therapy for people living with AADC. The AADC insight report was finalised in August 2022 and the first patient was treated with the new gene therapy in September 2023.

FGF32 10 (with XLH UK) - working in partnership with XLH UK, we co-designed a FGF23 TIO insight survey to determine the unmet needs of the FGF23 TIO community; we co-wrote a scoping submission and interview guide; subsequently facilitating interviews.

CSID Focus Group - on behalf of one of our partners we organised a focus group with parents/caregivers of people with CSID to gain a deeper understanding of the experiences and challenges people living with CSID experience, focussing on symptoms, the impact of their condition and treatment options. An insight report was generated in August 2022.

Insight project with XLH UK looking into the lived experience of people with XLH Working in partnership with Oxalosis and Hyperoxaluria Foundation, we co-designed an insight survey and interview discussion guide. We conducted interviews and published a PH1 insight report in May 2022.

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

7. Consultations and Submissions
Involvement in consultations and submissions allows us to ensure our community's voice is heard throughout the entire process that affects them, their treatment, and their wellbeing. See below for an overview of our impact in consultations and submissions in 2022-2023.

8. We work on UK treatment appraisals and have contributed to a number of treatment appraisals (by NICE, SMC or AWMSG) in the UK (NICE shared that our 'insight model is a an example of good practice') and this year contributed to the submissions below:

Pegzilarginase, an enzyme therapy for the treatment of Arginase-1 (ARG1) deficiency which is currently under appraisal. MSUK gained the patient perspective through conversations with the community and submitted consultation documents in addition to attended a scoping workshop in February 2023 where we represented the patient voice and provided detail of the impact of ARG1.

Mercaptamine bitartrate (Procysbi), used in the treatment of Nephropathic Cystinosis was successfully recommended for use in Wales via a AWMSG appraisal in May 2022. MSUK collaborated with Cystinosis Foundation UK to gather patient insight through a survey, case studies and put forward a joint submission.

Lumasiran (Oxlumo), an RNAi gene therapy for the treatment of Primary Hyperoxaluria type 1, was recommended for use via NICE appraisal in March 2023. MSUK collaborated with the Oxalosis and Hyperoxaluria Foundation (OHF) to gain patient perspectives and understand the impact of treatment and produced a patient experience insight report

Eladocagene exuparvovec (Upstaza), a gene therapy for the treatment of L-Amino acid decarboxylase (AADC) deficiency, was successfully recommended for use via a NICE appraisal in April 2023. MSUK collaborated with the AADC Trust to develop a patient survey and represent the patient voice throughout the appraisal.

Asfotase alfa (Strensiq), used for the treatment of paediatric onset hypophosphatasia (HPP) was successfully recommended for use via a NICE appraisal in February 2023. MSUK have been involved since 2014, building the HPP community, successfully fighting for a Managed Access Agreement and supporting the formation of Soft Bones UK charity (led by our patient expert in the NICE process). More recently we carried out multiple evidence gathering engagements with the community including a novel joint Q&A session for patients and caregivers in collaboration with NICE. We also produced an insight report in collaboration with our HPP community to highlight their experience of Strensiq.

Burosumab (Crysvita), used to treat X-linked hypophosphataemia in adults was recommended for use by the SMC in March 2023. (within the ultra-orphan pathway while further evidence on its effectiveness is generated). MSUK collaborated with XLH UK gathering patient impact and on a joint submission.

We also help further clinical trials for IMDs through:

- Providing information to communities to support enrolment and supporting patients on trials Reviewing and developing patient information Educating our community on the clinical trial process through our upcoming 'Get Involved Hub'
- Providing the Patient and Public Voice (PPV) on trials, recent examples include:
- MUSTANG Investigating the role of Miglustat in the management of a patient with Tangier's Disease: a single case experiment (MUSTANG). MSUK sit as an independent member of the trial steering committee overseeing and monitor the trial, safeguarding the interests of the participant.
- HORACE Halting Ornithine transcarbamylase deficiency with Recombinant AAV in children MSUK holds a PPV position on a clinical trial for a new gene therapy AAVLK03hOTC led by UCLH. We review reviewed all patient facing documents ensuring they are friendly for a variety of ages.

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

In order to support the longer-term development of new IMD treatments we contribute to a number of projects that aim to improve access and accelerate development. An example:

IWMD Registry: MSUK represent the PPV on the core working group (alongside Alex TLC) and implementing the Inherited White Matter Disorders (IWMD) Diagnostic and Management Service and accompanying Registry. The IWMD Registry collates clinical data and also patient and patient representative reported data which will improve understanding of IWMDs and can be used as a verified source of information to assist in the development and approval process of future therapies.

Fundraising 2022-2023:

1. **A family legacy continues...**
We were delighted that Beki Greene chose to run for MSUK in the Great Manchester Run. Beki is Jen Greene's sister, whose family founded our charity over forty years ago to raise vital awareness and support at a time when there was no other help. Thank you, Beki!
- viii. **London Marathon 2022**
We had 13 participants for the October 2022 London Marathon. This high-profile event provides a unique opportunity for our supporters to raise vital funds. We are grateful for those that joined Team MSUK and chose to raise funds on our behalf.
- ix. **Individual Achievements**
Throughout the year over 100 people donated or held individual fundraising events on our behalf. From linedancing, selling christmas cards, running marathons and holding an MSUK-themed garden party, our community came out in force to help us. Thank you!
- x. Metabolic Support UK's community of fundraisers and donors continued to fundraise via a number of different activities across 2022-23 including remote fundraising. We continue to be grateful for the legacies received from our supporters.

The organisations that provided funding towards Metabolic Support's activities in 2022/23 include:

- Alexion
- Amicus
- Arcturus
- Cenote
- Chiesi
- I-ECure
- Immedica
- Kyowa Kirin
- PTC Bio
- Sanofi
- Ultragenyx

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

Financial review

At the year end, Metabolic Support UK's accounts showed a deficit of £14,628 (2022: £27,012) made up of unrestricted funds.

Due to the uncertainty of the impact that the cost of living crisis will have on the charity's income generation in 2022/23 and beyond, the priorities for the next financial year will be to preserve as much of the reserves as possible to ensure the future sustainability of the charity, by:

- Stabilising expenditure and focussing on digital service delivery and outputs
- Retaining and supporting the smaller existing staff team to deliver the strategy with the support of freelancers
- Further diversifying income streams to include trusts and foundations

The Board of Trustees of Metabolic Support UK continue monitor the financial health of the charity.

The unrestricted reserves held by the charity is currently £609,281 - higher than the policy of six months running costs (approximately £250,000) due to the historical sale of a property and legacies received. The Board committed to the planned investment of the funds into the development of the charity in the short to medium term, to create future suitability and increase the positive impact on the lives of those who are affected by Inherited Metabolic Disorders now and in the future.

At year ending March 2023, Metabolic Support UK's funds are held in the Co-operative Bank.

The charity's assets are considered to be adequate to fulfil our obligations in relation to future financial commitments. As the majority of our assets are liquid, no significant delays or shortfalls are anticipated in realising these assets into cash.

The trustees has assessed the major risks to which the charity is exposed, and are satisfied that systems are in place to mitigate exposure to the major risks.

Structure, governance and management

The charity is a company limited by guarantee.

That charity is governed by its Memorandum and Articles of Association and the said Memorandum and Articles of Association were amended in January 2014 and the relevant amendments agreed with the Charity Commission for England and Wales and posted with Companies House.

The trustees, who are also the directors for the purpose of company law, and who served during the year and up to the date of signature of the financial statements were:

Dr R E Pugh MBChB FRCP

Mr P J Roper MIET CEng BSC Hons

Mr J O'Hara Msc

Mr A Johnson

(Resigned 19 July 2022)

Dr R Vara

Dr E H Davies

Mr C Lander

Recruitment and appointment of new trustees

New trustees are recruited and appointed by the existing trustees as vacancies arise on the Board.

Induction and training of trustees

New trustees are provided with information about the charity and its work and their role and responsibilities as trustees.

METABOLIC SUPPORT UK

TRUSTEES' REPORT (INCLUDING DIRECTOR'S REPORT) (CONTINUED) *FOR THE YEAR ENDED 31 MARCH 2023*

The trustees' report was approved by the Board of Trustees.

Dr E H Davies
Trustee

23 January 2024

METABOLIC SUPPORT UK

INDEPENDENT EXAMINER'S REPORT

TO THE TRUSTEES OF METABOLIC SUPPORT UK

I report to the trustees on my examination of the financial statements of Metabolic Support UK (the charity) for the year ended 31 March 2023.

Responsibilities and basis of report

As the trustees of the charity (and also its directors for the purposes of company law) you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities and Trustee Investment (Scotland) Act 2005 (the 2005 Act), the Charities Accounts (Scotland) Regulations 2006 (as amended) and the Companies Act 2006 (the 2006 Act). You are satisfied that the financial statements of the charity are not required by charity or company law to be audited and have chosen instead to have an independent examination.

Having satisfied myself that the financial statements of the charity are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of the charity's financial statements carried out under section 44 (1) (c) of the 2005 Act and section 145 of the Charities Act 2011 (the 2011 Act). In carrying out my examination I have followed the requirements of Regulation 11 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and all the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

Since the charity is required by company law to prepare its accounts on an accruals basis and is registered as a charity in Scotland your examiner must be a member of a body listed in Regulation 11(2) of the Charities Accounts (Scotland) Regulations 2006 (as amended). I confirm that I am qualified to undertake the examination because I am a member of ICAEW, which is one of the listed bodies.

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

- 1 accounting records were not kept in respect of the charity as required by section 386 of the 2006 Act and Regulation 4 of the 2006 Accounts Regulations; or
- 2 the financial statements do not accord with those records; or
- 3 the financial statements do not comply with the accounting requirements of Regulation 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended) and do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a true and fair view which is not a matter considered as part of an independent examination; or
- 4 the financial statements have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the financial statements to be reached.

Stephanie Baker BA(Hons) ACA
McLintocks (NW) Limited
2 Hilliards Court
Chester Business Park
Chester
Cheshire
CH4 9PX

Dated: 23 January 2024

METABOLIC SUPPORT UK

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 MARCH 2023

		Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £
	Notes						
Income from:							
Donations and legacies	2	248,310	-	248,310	227,088	-	227,088
Charitable activities	3	24,114	-	24,114	27,031	-	27,031
Investments	4	-	-	-	156	-	156
Total income		272,424	-	272,424	254,275	-	254,275
Expenditure on:							
Charitable activities	5	287,052	-	287,052	227,263	-	227,263
Net (outgoing)/incoming resources before transfers		(14,628)	-	(14,628)	27,012	-	27,012
Gross transfers between funds		12,504	(12,504)	-	-	-	-
Net (expenditure)/income for the year/ Net movement in funds		(2,124)	(12,504)	(14,628)	27,012	-	27,012
Fund balances at 1 April 2022		611,405	12,504	623,909	584,393	12,504	596,897
Fund balances at 31 March 2023		609,281	-	609,281	611,405	12,504	623,909

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities.

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

METABOLIC SUPPORT UK

BALANCE SHEET

AS AT 31 MARCH 2023

	Notes	2023 £	£	2022 £	£
Current assets					
Cash at bank and in hand		621,093		629,761	
Creditors: amounts falling due within one year	11	<u>(11,812)</u>		<u>(5,852)</u>	
Net current assets			<u>609,281</u>		<u>623,909</u>
Income funds					
Restricted funds	12		-		12,504
Unrestricted funds			<u>609,281</u>		<u>611,405</u>
			<u>609,281</u>		<u>623,909</u>

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 March 2023.

The director acknowledges her responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The members have not required the company to obtain an audit of its financial statements for the year in question in accordance with section 476.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the Trustees on 23 January 2024

Dr E H Davies
Trustee

Company registration number 04267454

METABOLIC SUPPORT UK

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2023

1 Accounting policies

Charity information

Metabolic Support UK is a private company limited by guarantee incorporated in England and Wales. The registered office is Unit 11-12 Gwenfro, Technology Park, Croesnewydd Road, Wrexham, LL13 7YP.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and "Accounting and Reporting by Charities: 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 (FRS 102)" (as amended for accounting periods commencing from 1 January 2016). The charity is a Public Benefit Entity as defined by FRS 102.

The charity has taken advantage of the provisions in the SORP for charities applying FRS 102 Update Bulletin 1 not to prepare a Statement of Cash Flows.

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 £.

The financial statements have been prepared under the historical cost convention. The principal accounting policies adopted are set out below.

1.2 Going concern

At the time of approving the financial statements, the trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

1.3 Charitable funds

Unrestricted funds are available for use at the discretion of the trustees in furtherance of their charitable objectives.

Restricted funds are subject to specific conditions by donors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the financial statements.

1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

METABOLIC SUPPORT UK

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

1 Accounting policies

(Continued)

1.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement, and the amount of the obligation can be measured reliably.

Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges are allocated on the portion of the asset's use.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Plant and machinery	33% straight line
Fixtures, fittings & equipment	15% straight line

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in the statement of financial activities.

1.7 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

Basic financial assets

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

Basic financial liabilities

Basic financial liabilities, including creditors and bank loans are initially recognised at transaction price unless the arrangement constitutes a financing transaction, where the debt instrument is measured at the present value of the future payments discounted at a market rate of interest. Financial liabilities classified as payable within one year are not amortised.

Debt instruments are subsequently carried at amortised cost, using the effective interest rate method.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of operations from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

Derecognition of financial liabilities

Financial liabilities are derecognised when the charity's contractual obligations expire or are discharged or cancelled.

METABOLIC SUPPORT UK

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

1 Accounting policies (Continued)

1.8 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

2 Donations and legacies

	Unrestricted funds	Unrestricted funds
	2023	2022
	£	£
Donations and gifts	248,310	227,088

3 Charitable activities

	Fundraising income	Fundraising income
	2023	2022
	£	£
Sales within charitable activities	24,114	27,031

4 Investments

	Total Unrestricted funds	
	2023	2022
	£	£
Interest receivable	-	156

METABOLIC SUPPORT UK

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

5 Charitable activities

	Direct charitable activities	Direct charitable activities
	2023 £	2022 £
Staff costs	216,090	152,468
Rent, rates and cleaning	-	409
Insurance	1,505	1,549
Repairs & maintenance	-	395
Printing, postages and stationery	265	120
Telephone and IT costs	14,182	16,074
Meetings travel & accommodation	2,934	421
Sundries	6,077	1,324
Recruitment fees	9,070	14,645
Bank charges	99	31
Projects	12,976	6,871
Marketing	6,022	49
Professional fees	9,075	24,907
	<u>278,295</u>	<u>219,263</u>
Share of support costs (see note 6)	5,252	4,823
Share of governance costs (see note 6)	3,505	3,177
	<u>287,052</u>	<u>227,263</u>

6 Support costs

	Support costs £	Governance costs £	2023 £	2022 £
Human resource fees	5,252	-	5,252	4,823
Independent examination	-	2,100	2,100	2,097
Accountancy	-	1,405	1,405	1,080
	<u>5,252</u>	<u>3,505</u>	<u>8,757</u>	<u>8,000</u>
Analysed between Charitable activities	<u>5,252</u>	<u>3,505</u>	<u>8,757</u>	<u>8,000</u>

7 Trustees

None of the trustees (or any persons connected with them) received any remuneration or benefits from the charity during the year.

METABOLIC SUPPORT UK

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

8 Employees

The average monthly number of employees during the year was:

	2023 Number	2022 Number
Charitable	4	3
Fundraising	1	-
Administration	1	1
	<hr/>	<hr/>
Total	6	4
	<hr/>	<hr/>

Employment costs

	2023 £	2022 £
Wages and salaries	216,090	152,468
	<hr/>	<hr/>

Total remuneration for the key management personnel of the charity was £107,842 (2022: £90,462).

The number of employees whose annual remuneration was more than £60,000 is as follows:

	2023 Number	2022 Number
£70,000 to £79,999	1	-
	<hr/>	<hr/>

9 Taxation

The charity is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or section 252 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objects.

10 Tangible fixed assets

	Plant and machinery	Fixtures, fittings & equipment	Total
	£	£	£
At 1 April 2022	28,472	9,722	38,194
Disposals	(28,472)	(9,722)	(38,194)
At 1 April 2022	28,472	9,722	38,194
Eliminated in respect of disposals	(28,472)	(9,722)	(38,194)
Carrying amount			
At 31 March 2023	-	-	-
	<hr/>	<hr/>	<hr/>
At 31 March 2022	-	-	-
	<hr/>	<hr/>	<hr/>

METABOLIC SUPPORT UK

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2023

11 Creditors: amounts falling due within one year

	2023 £	2022 £
Other taxation and social security	5,659	3,555
Trade creditors	3,152	197
Other creditors	901	-
Accruals and deferred income	2,100	2,100
	<u>11,812</u>	<u>5,852</u>

12 Restricted funds

During the year £12,504 was transferred from restricted funds to unrestricted funds being a residual unused balance of prior charitable activities.

13 Analysis of net assets between funds

	Unrestricted 2023 £	Restricted 2023 £	Total Unrestricted 2023 £	Unrestricted 2022 £	Restricted 2022 £	Total 2022 £
Fund balances at 31 March 2023 are represented by:						
Current assets/(liabilities)	609,281	-	609,281	623,909	-	623,909
	<u>609,281</u>	<u>-</u>	<u>609,281</u>	<u>623,909</u>	<u>-</u>	<u>623,909</u>

14 Related party transactions

There were no disclosable related party transactions during the year (2022 - none).