



# KNOWLEDGE FOR CHANGE

Annual Report and Accounts

2023



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## Foreword from our Treasurer



As treasurer for Knowledge for Change, I am pleased to present our Trustees Annual Report and Accounts for the 2023 financial year, together with a summary of our activities and our financial statements for the period 1st January to 31st December 2023. This year was the first since 2019 that was not severely hindered by the Covid-19 pandemic and its associated travel restrictions, and our student placement programme in particular has rebounded strongly, aided by the addition of Zanzibar as an attractive placement destination. Interest in our professional volunteer programme has also strengthened throughout the year, however our pipeline of volunteers remains weaker than it was before the pandemic due to the temporary reduction in ‘word-of-mouth’ awareness raising during and since the pandemic.

Our most notable achievements this year have related to our growing and interlinked project work on type-2 diabetes and our ongoing development of effective rehabilitation services for amputees in Fort Portal (Uganda). We successfully completed the 2<sup>nd</sup> stage of our renovation of the “Ninsiima Centre for the Rehabilitation of People with Disabilities” in June, including constructing and fully equipping a new paediatric rehabilitation unit and a shared covered client waiting area. Due to its positive reputation, this facility now attracts clients from across Uganda and also from the neighbouring DRC. It also provides services for diabetic clients identified through our Diabetes (‘NEEDS’) project to prevent occurrence and deterioration of diabetic foot ulcers, and to support any clients that do eventually require amputation as a result of ulceration.

We have successfully established Knowledge for Change as an independent NGO in both Tanzania and Zanzibar, and are excited to have recruited our first 3 Tanzanian clinical staff who are based at Mnazi Mmoja Hospital in Zanzibar. We have also successfully placed 6 Professional Volunteers at Mnazi Mmoja Hospital over the course of the year to support scoping, capacity building and evaluation activities. This partnership is developing positively, and we are now discussing opportunities for joint funding applications, as well as growing our student placement offer. Our other key projects, such as our Cervical Screening and Treatment Programme and our Wound Management Project, have also continued throughout the year, providing high-quality, innovative and essential services to patients.

The funding environment within the International Development and Global Health research sectors remain extremely challenging due to the reductions in EU project funding since Brexit and the UK government’s decision to severely cut its foreign aid expenditure as a result of the Covid pandemic. However, we have had some successes in applying for small funding streams in partnership with the University of Salford, particularly in relation to our rehabilitation related work, and also received a

grant from the Burdett Trust for Nursing to support a new project focusing on type-2 Diabetes. We have continued to partner with the British Commonwealth Scholarship Commission via their Professional Fellowship Scheme, and hosted 9 further fellows between February and May, with an exciting new focus for K4C on climate change and environmental impacts.

Despite the challenges in applying for project funding, our financial situation has strengthened over the course of the year with an excess of receipts over payments of £23,893. Our student placement programme continues to generate valuable income to help to sustain our charity's activities. The continued growth of this programme has led to an increase in our staff numbers and related costs across the UK, Uganda and Tanzania, however our UK staff costs have continued to be offset by global health research and international development projects running in partnership with the University of Salford.

Overall, our Board of Trustees are delighted with the successes we have achieved this year and are excited to strengthen our current activities and develop new projects over the course of 2024. Two key exciting areas of work in the pipeline are a new project which will focus on reducing instances of maternal and neonatal sepsis across our partnership sites in both Uganda and Tanzania (due to begin in January 2024) and expansion of our charity's existing and future activities to new partnership sites in Moshi (Tanzania).

A handwritten signature in black ink, appearing to read 'J. Ackers', written over a horizontal line.

Dr James Ackers-Johnson  
Treasurer  
6<sup>th</sup> November 2024

# Trustees Annual Report

## *Background*

Knowledge for Change was registered with the Charity Commission in England and Wales on 17th April 2012, charity number 1146911. Our working names are 'Knowledge for Change', 'Knowledge 4 Change' and 'K4C'. Our official address is 11 Newmarket Street, Skipton, North Yorkshire, BD23 2HX. Our current working and correspondence address is Room L530, Allerton Building, University of Salford, Manchester, M6 6PU.

The people that served as Trustees during 2023 were as follows:

- Professor Louise Ackers (Chairperson) – Chair in Global Social Justice, University of Salford.
- Natalie Tate (Secretary) – Project Manager, Liverpool School of Tropical Medicine.
- Dr James Ackers-Johnson (Treasurer) – Project Manager, University of Salford.
- Professor Anya Ahmed – Chair in Wellbeing & Communities, Manchester Metropolitan University.
- Dr John Chatwin – Post-doctoral Researcher, Midlands Partnership NHS Foundation Trust.
- Dr Chris Coey – University Fellows Development Manager, University of Salford.
- Eileen Cunningham – Social Policy Lecturer, Manchester Metropolitan University.
- Claire Horder – Midwife, University Hospitals Dorset NHS Foundation Trust.
- Dr Robert Ssekitoaleko, Biomedical Engineering Lecturer, Makerere University (Uganda)
- Dr Melanie Stephens - Associate Professor (Reader) in Adult Nursing, University of Salford
- Allan Ndawula - Project Manager, K4C Uganda

## *Recruitment, Appointment & Induction of Charity Trustees*

The Trust Deed states that there must be a minimum of 4 trustees acting on behalf of K4C. There is no maximum term of appointment and trustees can serve until they resign should they continue to fulfil the terms stated in the Trust Deed. Mechanisms for the removal of trustees do exist and are also detailed in the Trust deed. All existing trustees have long experience of the nature of the charitable activity of K4C and, aside from expenses, were not remunerated for their trusteeship.

Where new trustees are appointed, they are given a formal induction to the work of the trust and provided with the information they need to fulfil their roles, which include information about the role of trustees and charity law. New trustees are nominated by members of the board of trustees, interviewed by the board of trustees and appointed where they have the necessary skills to contribute to the charity's management and development.

Trustees are responsible for monitoring all of the trust's activities and are bound by the terms stated within K4C's Declaration of Trust and amendments.

### *Amendments to the Board of Trustees*

During this year, there have been several changes to the Board of Trustees. Natalie Tate and Professor Anya Ahmed retired from their trusteeship, having both made substantial contributions to the charity as trustees over the last 10-years. Dr Melanie Stephens joined the board, with extensive previous experience of working in both nursing and healthcare research. Allan Ndawula has also rejoined the Board since deciding to take a temporary break in 2021, and brings with him a wealth of valuable knowledge, experience and networks in Uganda.

### *Objectives, Strategy & Public Benefit*

The official charitable objectives of K4C are as follows:

- 1) To support the relief of sickness and preservation of the health of patients in the UK and in Sub-Saharan Africa, in particular through charitable activities in healthcare centres throughout Sub-Saharan Africa, assisting in the provision of facilities, support services, equipment not normally provided by the statutory authorities and any other charitable purposes/activities.
- 2) To advance the education of the health workers of Sub-Saharan Africa and the UK by promoting education, knowledge exchange and personal experience.

Knowledge for Change works in close partnership with the University of Salford (UK), Mountains of the Moon University (Uganda) and Kabarole Health District (Uganda). Additional support has been received from the Burdett Trust for Nursing, the Tropical Health Educational Trust (THET), the Commonwealth Scholarship Commission, STAND (previously 'Legs for Africa'), Liverpool John Moore's University and the Ugandan and Tanzanian Ministries of Health.

The trustees are aware of the Charity Commission's Guidance on Public Benefit. They have reviewed the objectives of the charity, its activities in 2023 and its future plans in the light of this guidance and find that all of these comply.

The activities described below have primarily benefited the people who live in the catchment areas of the universities, hospitals and community-based organisations in which K4C operates. More generally, all professional volunteers, students and British Commonwealth funded fellows that have completed placements through K4C will have gained new skills and experience which will benefit the public in the UK, Uganda and Tanzania more widely depending on where they go on to work. All benefits are related to the objectives of the charity, as stated above. The trustees are not aware of any harm arising from the activities of the charity, nor of any private benefit, directly or indirectly.



## K4C Activities & Impacts (Jan-Dec 2023)

Over the last 12 months, K4C has successfully sustained the majority of its existing project work as well as generating new projects and activities, working in close partnership with the University of Salford and other partners and stakeholders. Some key updates on our existing projects have been provided below:

### Diabetes Project

#### Background:



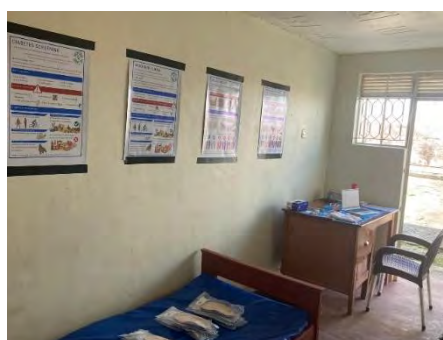
Diabetes Health Education Session being delivered at Fort Portal Regional Referral Hospital

Around 436 million adults across the world live with diabetes, and prevalence continues to rise. Figures are rapidly rising in low- and middle-income countries, where approximately 80% of adults with diabetes are located. In many low-income countries, including those in Sub-Saharan Africa, diabetes is often poorly managed. As many as 89% of diabetes patients in Uganda are undiagnosed or are not on medication for diabetes management.

Many patients go on to develop complications such as diabetic foot ulcers, leading to higher rates of lower limb amputations, and increased mortality. However, with proper care and management diabetic foot is preventable.

#### Activities/ Impact:

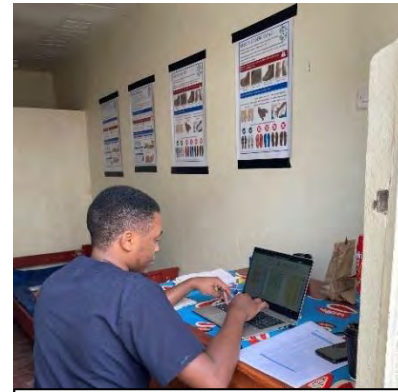
K4C's diabetes project was created to develop a nurse-led self-management educational programme and diabetic foot clinic for adults with type 2 diabetes in Uganda and Tanzania, aiming to reduce the development of diabetic foot complications (leading to amputations) in these settings. This research will also contribute to Rincy Sajith's PhD by published works with the University of Salford. The work began in March 2023, funded by a £58,896 grant from the Burdett Trust for Nursing's Type 2 Diabetes Prevention programme. The project is due to end in September 2024.



Diabetic Foot Clinic constructed by K4C at Fort Portal Regional Referral Hospital

This funding, combined with a donation of £1500 raised by K4C students on placement, enabled K4C to construct a diabetic foot clinic with a childcare area at Fort Portal Regional Referral Hospital (FPRRH). A Diaped Flux-200 Doppler and monofilaments were purchased, and nurses trained in their use, to diagnose patients with potential diabetic foot pre-ulceration.

A Voxel Care 3D Foot Scanning System was purchased (co-funded by the University of Salford) for use in the new foot clinic. Orthopaedic technicians were trained in the use of the scanner and its software to create bespoke insoles for patients identified as medium or high risk of diabetic foot ulcers in outpatient clinic. Insoles help to offload areas of pressure on the foot, protecting it from calluses and ulcer development.



K4C Orthopaedic Technician (Jackson Muringi) inputting data to manufacture Orthotic Insoles in the UK, then transport them out to Uganda



K4C Nurse (Derrick Bahandagira) assessing a patients' foot blood circulation using doppler and monofilament devices

Training on diabetes mellitus, diabetes management, diabetic foot, and foot scanning was provided as part of a 5-day workshop in FPRRH, involving colleagues from the UK, Zanzibar, and Kasangati Health Centre in Kampala, as well as expert users who discussed their lived experiences of diabetes. This led to development of the NEEDS (Nutrition, Education, Exercise, Drugs, Self-care) intervention programme. Three sessions were designed for the NEEDS programme, advising patients on what diabetes is, the importance of diet and exercise, types of diabetes medication and how to take them, and proper eye, dental and foot care for diabetic patients.



A diabetic patient using the Voxel Care 3D Foot Scanner to assess the shape of their foot and any pressure points which could lead to Diabetic Foot Ulceration



Sample 3D scans which are used to manufacture bespoke orthopaedic shoe insoles for patients which prevent Diabetic Foot Ulceration



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### 2024 Plans:

60 patients are being recruited as 3 groups to join the NEEDS programme sessions, taking place in January/February, March, and May. Patients involved will receive bespoke insoles following foot scanning. Following these sessions, K4C will run a workshop for colleagues in the UK, Kasangati, Zanzibar, and Moshi to feedback on the NEEDS programme and reflect on how an intervention programme may be developed for Kasangati, Moshi, or Zanzibar in future.

### Wound Management & Honey Gauze Project

#### Background:

This project built on K4C's successful 'Maternal Sepsis Intervention (MSI)' which formed one aspect of our wider project focusing on Antimicrobial Resistance which was initially funded by the Commonwealth Pharmacy Association through the Tropical Health Education Trust in 2019. The MSI demonstrated that implementation of improved wound care practices could reduce instances of maternal sepsis, and also reduce hospital costs, resources, staff time and instances of other hospital acquired infections by improving recovery times and greatly reducing women's length of stay in the hospital.

In 2021, three Ugandan midwives were awarded Commonwealth Professional Fellowships to study at the University of Salford, focusing primarily on the Tissue Viability program run by Dr Melanie Stephens. During their fellowship, they learnt about the benefits that honey infused gauze can have for wound care. On their return to Uganda, the team led by K4C midwife Rachel Namiiro used this experience to establish a small base for manufacturing honey gauze within K4C's laboratory premises in Fort Portal. The honey gauze is made in a sterile environment by combining 2 properties (20% Vaseline and 80% locally made pure honey (which is registered with the Uganda National Bureau of Standards (UNBS))). After mixing them, the paste is smeared onto sterile gauze and vacuum packed. A dry piece of sealed honey gauze can last up to 5 months.



Steps Showing Honey Gauze Making by Rachel Namiiro (K4C Midwife): [https://youtu.be/6ywwq5L8D1mo?si=nKoT3llyyQ\\_Nhcy64](https://youtu.be/6ywwq5L8D1mo?si=nKoT3llyyQ_Nhcy64)

The team first utilised the honey gauze for dressing the wounds of maternity and gynaecology patients at Fort Portal Regional Referral Hospital (FPRRH). Due to the success of the project and the positive outcomes observed for patients, the project

was upscaled throughout 2022 and 2023 to also include wounds (including burns) the Surgical, Paediatric and Nutrition wards. Between February 2022 and February 2024, K4C supplied over 2000 sealed packs of Honey Gauze to the Hospital (850+ pieces to Surgical Ward; 750+ pieces to gynaecology; 400+ to paediatrics and 40+ to nutrition).

Feedback from patients and staff remains highly positive, with staff reporting significant improvements in wound healing and reduced costs to the hospital:

“Yes, it works. Its working - there was a wound I dressed yesterday that was very septic – and it has improved. Without the honey it would take long to improve” (Nurse, FPRRH).

“We used to use hydrogen peroxide but that burns the tissues around and causes long stays – even people used to use Savlon, and they didn’t know how to dilute it properly. Now we have stopped using hydrogen peroxide” (Nurse, FPRRH).

Each pack of gauze costs just 1000 Ugandan Shillings (roughly £0.20) to produce, making it a relatively cheap and possibly even cost saving for the hospital given the savings achieved by reducing both the length of patient stays and the direct cost of



their extended treatment plans. K4C is currently negotiating a social enterprise agreement with FPRRH to enable us to provide the honey dressings sustainably into the future and hope to have this finalised in early 2024.

This success of this project has been recognised through receipt of 2 awards firstly as winner of the “Wounds UK Award for Excellence” in 2022, and secondly as winner of the “Cost Effective Wound Management Award” at the Journal of Wound Management Awards in 2023.

### *Nursing Now Challenge Fellowships*

K4C has been running a fellowship programme funded by the Nursing Now Challenge Fund between 2022 and 2023 which links to the above mentioned diabetes and wound management related projects and K4C’s cervical screening and treatment programme. Funded by the Burdett Trust for Nursing, this programme supported the following 4 fellows to implement projects relating to cervical screening and prevention of diabetic foot ulceration:

Name	Role	Programme Focus
Stella Bonabaana	Midwife (K4C)	Establishing a cervical screening and treatment service at Kasusu Health Centre
Harriet Biira	Midwife (Kasusu Health Centre)	
Derrick Bahandagira	Nurse (K4C)	Assessing the scale of diabetic foot problems amongst the population attending Fort Portal Regional Referral Hospital and Kasusu Health Centre
Jolly Rose	Nurse (Fort Portal Regional Referral Hospital)	

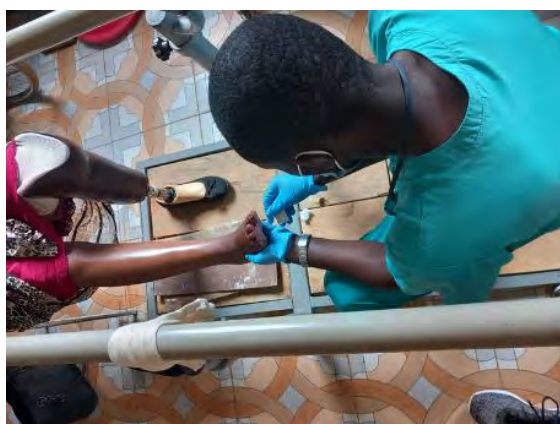
#### Establishing a Cervical Screening & Treatment Service at Kasusu Health Centre:

The project aimed at establishing cervical cancer see- and-treat clinic at Kasusu community health centre. This service successfully integrated screening with the existing HIV clinic, as HIV positive women are at higher due to their weakened immunity. The project involved providing training and mentoring to health workers and increasing awareness about cervical cancer through village health teams.

The clinic was successfully established with all the required equipment. Three health care providers were trained in cervical cancer screening. The clinic was scheduled once a week on Tuesday targeting the HIV positive clients. During the timeframe of the official project, the clinic screened 187 women, with an ongoing positive increase in the numbers of women accessing the services.

#### Assessing the scale of diabetic foot problems amongst the population attending Fort Portal Regional Referral Hospital (FPRRH) and Kasusu Health Centre

This project linked to our wider project work on Type-2 diabetes aimed at targeting diabetic patients and supporting those with diabetic foot ulcers that turn up at FPRRH, through foot examination using a monofilaments and Doppler's to test sensation. Previously, foot examinations were only done on the basis of signs and symptoms, however now using the monofilaments we were able to identify any problems in early stage. Using a sample of 279 patients over 3 separate clinic dates, 24% were found to have neuropathy by use of monofilament, where this may not have been identified previously without this equipment.



K4C Nurse (Derrick Bahandagira) assessing a patients' foot blood circulation using doppler and monofilament devices

Health education sessions were run on a weekly basis at the diabetic clinic to guide patients on the nutrition, lifestyle modification, and prevention of diabetic foot complications. Poster and leaflets were developed for distribution to patients, and a high-quality speaker was purchased to enable health education sessions to be delivered in hospital waiting rooms which are typically large, busy and noisy, thereby achieving economies of scale and ensuring everyone can hear the information clearly.

The team is also in the process of developing an educational film about diabetes prevention and self-management with support from a local film maker.

Activities were also undertaken to improve the use of formal referral systems, for example by encouraging patients to utilise the established diabetic foot clinic in the community health centre (Kasusu) rather than travel straight to the main hospital (FPRRH). Similarly, some patients attending the diabetic clinic at FPRRH were directed to Kasusu Health Centre for their follow up appointments rather than returning back to FPRRH in order to reduce congestion and delays. As part of this, work has been undertaken to strengthen the diabetic foot clinic service at Kasusu, including renovation of the clinic room to make it more fit for purpose.



Through collaboration with the podiatry clinic at the University of Salford, two Continuous Medical Education sessions (CMEs) focusing on diabetic foot ulcers and how to prevent them were designed and delivered during the project, providing training to over 130 healthcare staff.

Photos of the renovation of the Diabetic Wound Clinic Room at Kasusu Health Centre before (left) and after (right)

## Cervical Cancer Screening & Treatment Programme



K4C Midwife (Angela Mugumba) providing Health Education to women to raise awareness of Cervical Cancer and how they can access our preventative Screening & Treatment Services at Kataraka Health Centre

Cervical Cancer is one of the most pressing women's health issues. It is the 4<sup>th</sup> most common cancer found in women globally, despite being largely preventable through HPV vaccination, regular screening and the treatment of precancerous lesions. 88% of the related global health burden is borne by Low- and Middle-Income Countries (LMICs). Uganda has one of the highest incidence rates of cervical cancer in the world (56.2 per 100,000), and cervical cancer remains the leading cause of cancer related deaths for women in both Uganda and Tanzania. Uganda has had a national roll out of HPV vaccinations for several years, however there is nationally low uptake and coverage. Other problems affecting Uganda's screening programmes are a lack of trained staff, sociocultural factors (including a lack



of public awareness), and lack of quality-assured screening programmes. Most existing screening programmes lack functional referral systems and do not reach target populations.

Knowledge for Change developed its first Centre of Excellence for cervical screening and treatment at Kagote Health Centre III in Fort Portal (Uganda) in 2017 and went on to expand this to 3 other health facilities in Fort Portal (Bukuuku and Kasusu Health Centres and Fort Portal Regional Referral Hospital) and also to Kasangati Health Centre in Kampala (Uganda).



MobileODT's "Enhanced Visual Assessment (EVA)"

K4C utilises innovative technology to deliver cervical screening and treatment services; MobileODT 'Enhanced Visual Assessment (EVA)' devices are used to ensure high quality screening and access to telemedicine support from UK based cervical screening specialist doctors. We utilise Liger 'cold-coagulation' devices for the treatment of any pre-cancerous lesions identified. Any women identified with cancerous lesions are referred to Fort Portal Regional Referral Hospital for a biopsy and further diagnosis, treatment and management.



Liger "Cold Coagulation" device

Our 'one stop' Point of Care screen and treat services are fully integrated into government health centres, enabling women to access the services free of charge and at local health centres that they know and trust. This has hugely expanded uptake and access for cervical screening across the areas that we work. An extensive awareness raising campaign in the community was enabled by GIS mapping, developed by K4C's longstanding project manager Allan Ndawula as his Master's degree research project. Combined with regular local radio broadcasts, this has dramatically increased uptake of the service. Since 2017, we have successfully screened over 4000 women from across the Kabarole and Wakiso Districts.



K4C Midwife (Rachel Namiro) training nursing/midwifery staff how to use the EVA device

During 2023, K4C further expanded its cervical screening programme to include Kataraka Health Centre in Fort Portal (Uganda). Kataraka was previously a level 3 health centre but is currently in the process of being renovated into a level 4 health centre. As such, it should provide relatively comprehensive outpatient and maternity services which lends itself well to K4C's model for health education and sensitisation. All of the nursing and



midwifery staff at Kataraka have now been trained in cervical screening and treatment, and the required equipment has been purchased to enable the service to be fully implemented in early 2024. An unfortunate delay has been experienced in receiving the new EVA devices we have ordered, as MobileODT has delayed the release of its AI enabled device while it undertakes further piloting and obtains the necessary licencing. K4C did not wish to accept delivery of the devices until these processes were completed in order to protect the longevity of the warranty period and to ensure we achieve value for money from the supplier.



The UK and Uganda team jointly published a paper in 2023 discussing the results and impact of the cervical screening service which can be here: Auma et al (2023) “Task-shifting for point-of-care cervical cancer prevention in low- and middle-income countries: a case study from Uganda” *Frontier Public Health* (<https://pubmed.ncbi.nlm.nih.gov/37575099/>)

This paper reported that at 5-K4C supported sites “a total of 3,690 women have accessed cervicalscreening. Of these an average of 6% had positive results and treatment”. The breakdown of this can be seen in Table 1:

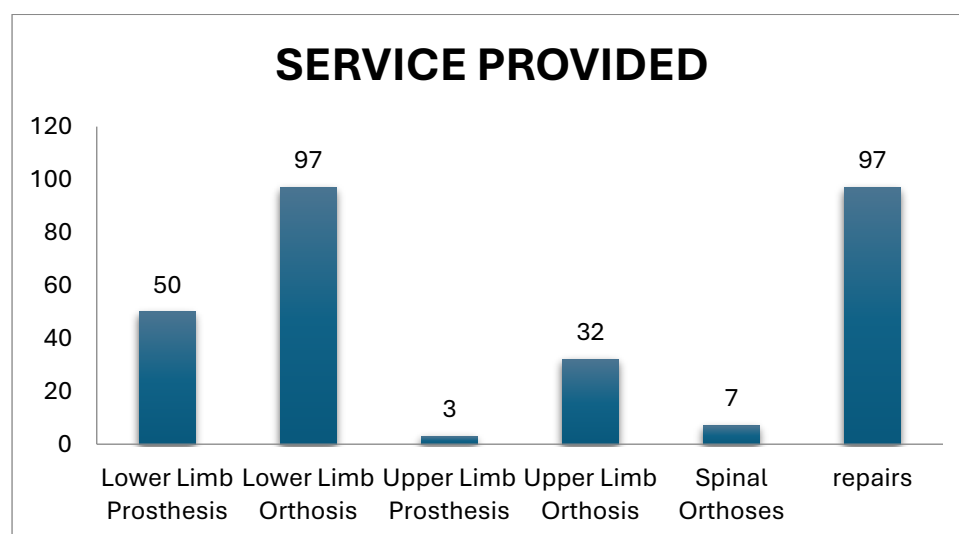
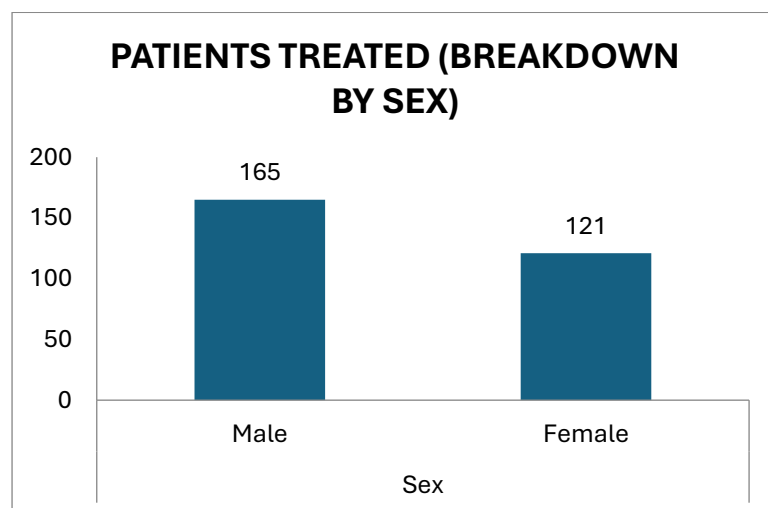
April 2019 - January 2024	Kagote (n / %)		Bukuuku (n / %)		Kasusu (n / %)		Kira (n / %)			Kasangati (n / %)		Total (n / %)	
<b>Total n</b>	1778		1294		316		294			173		3855	
<b>HIV + ve</b>	954.5	53.7	904	69.9	136.9	43.3	267.6		91.0	160	92.5	2423	62.85
<b>Ca + ve</b>	101.9	5.7	181.7	16.7	2.9	0.9	9.1		3.1	6.9	4.0	302.5	7.85

## Rehabilitation Projects

Limb amputations are far more common in Low- and Middle-Income Countries (LMICs). The most common cause is trauma as a result of road traffic accidents or conflict. Other common causes include congenital defects, infections and tumours. Diabetes is also a fast emerging as a major cause of limb loss in some LMICs, including Uganda. Losing a limb can have severe repercussions on livelihoods in Uganda as more people are reliant on physical activity to earn a living, for example through manual labour, farming and transportation, and there is no social security system to provide support.

Despite the United Nations’ commitment to Universal Health Coverage ([https://www.who.int/newsroom/fact-sheets/detail/universal-health-coverage-\(uhc\)](https://www.who.int/newsroom/fact-sheets/detail/universal-health-coverage-(uhc))), little progress has been made to support people with physical disabilities in LMICs such as Uganda, which have become almost entirely reliant on Overseas Development Assistance (ODA) for these aspects of health care.

Over the last 12 months, K4C has continued to grow its rehabilitation related projects and activities at both Fort Portal Regional Referral Hospital (Uganda) and Mnazi Mmoja Hospital (Zanzibar, Tanzania). In Fort Portal, we recruited a 2<sup>nd</sup> Orthopaedic Technician (Jackson Murungi) to bolster the staffing resource within the “Ninsiima Centre for the Rehabilitation of People with Disabilities” which K4C established in 2022. Working in partnership with the hospital and STAND (previously “Legs for Africa”, a UK based charity involved in recycling of prosthetic components), we have continued to provide essential prosthetic and orthotic devices, componentry and rehabilitation services for patients. Over the course of 2023, a total of 286 clients accessed the services, as illustrated by the graphs below:



### Construction of Paediatric Rehabilitation Unit, Play Area and Client Waiting Area at the Orthopaedic Workshop at Fort Portal Regional Referral Hospital

The success of the Ninsiima Centre for the Rehabilitation of People with Disabilities since K4C renovated it in 2022 has led to an increase in demand from patients, some of whom now travel from across Uganda and also from across the border in the DRC in order to access reliable and high-quality services. The increased awareness of the adult services has subsequently stimulated demand for paediatric services, which up until this year were delivered in the same building as adults.

However, in March 2023, K4C decided to invest in building a new specialised paediatric rehabilitation facility which would provide more space and better cater for children's needs. We recruited a physiotherapist (Simon Peter Kitandwe) to guide the design and development of the facility, alongside 3 K4C physiotherapy students and FPRRH management. It was agreed to build the paediatric facility on an unused piece of land located alongside the current adult rehabilitation facility so staff could easily work between both units. It was agreed to include a sheltered waiting area for both adult and paediatric patients to use in order to free-up additional treatment space within the existing facilities.

The building work costed £3,200 and was completed by Peter Kansiime in May-July 2023; the images below illustrate the area before and immediately after construction:



Once the building work was completed, K4C utilised additional fundraising from 3 students that had recently completed their placements with us to fund the necessary rehabilitation equipment, as well as benches and chairs for the waiting area.

As part of the building work, we also renovated 2 existing rooms attached to the new facility to use for 3D foot scanning of diabetic patients. This new service has so far catered for over 60 patients who have all received offloading insoles were provided as a prevention measure from foot ulcers prevention. More information about this specific project is included later in this report.

### *General Health System Strengthening Activities*

#### Supporting Laboratory Services in Kagote Health Centre



In 2022, K4C was asked to support the refurbishment of the laboratory work surfaces at Kagote Health Centre. The Laboratory Technician (Peter Asimwe) was concerned that the existing services created opportunities for contamination of samples and Infection Risk. K4C commissioned Peter Kansilime to undertake the renovation work, which was completed in 2023.

#### Renovating the Delivery Suite at Kasangati Health Centre IV



K4C midwifery students on placement at Kasangati Health Centre had highlighted the poor state of repair of the maternity unit which was negatively impacting upon women's privacy, dignity, respect and infection risk. They undertook fundraising once they returned to the UK and K4C used this to renovate the unit to include redecorating

the walls, installing privacy curtains in both the labour suite and postnatal ward and completing other redecoration work to improve the general appearance of the facility. This work was well received by both staff and patients alike.



#### Renovating the Maternity Unit at Kasusu Health Centre III

Kasusu Health Centre III is a relatively small facility located on the outskirts of Fort Portal, Uganda. For many years, it had been underperforming with relatively few services being delivered to patients due to the lack of good quality infrastructure and equipment, as well as limited staffing. In order to improve the functionality of the facility, K4C purchased all essential medical equipment and fully refurbished the facility as follows:

- Tiling the floor of the maternity unit.
- Refurbishing the staff quarters to provide a comfortable and secure place to rest and to stay overnight.



- Essential plumbing work and drainage, including fitting of new sinks and running water.
- Upgrading the placenta pit
- Provision of essential medical equipment including:
  - 3 delivery sets
  - Autoclave
  - Resuscitation bed
  - Ward privacy screens
  - Doppler
  - Baby Ambu bags
  - Thermometers and BP machines



Renovation work at Kasusu Health Centre including tiling the floor and providing essential medical equipment





## The British Commonwealth Professional Fellowship Scheme

### Background:

The Professional Fellowship scheme (facilitated by the [Commonwealth Scholarship Commission](#)) funds mid-career professionals from LMICs to come to the UK to develop their skills and knowledge in a topic relevant to their professional field. These professionals participate in a 3-month programme, and upon their return home, use their newly acquired knowledge to effect positive change in their areas of interest. K4C and its partners have hosted over 100 fellows since 2011, from a variety of professions including nurses, engineers, policymakers and activists.

### Activities:

Under the CSC's Fellowship Theme "Clean Energy, Clean Oceans and Clean Air", and in collaboration with the University of Salford/Energy House 2.0, K4C hosted 9 fellows in 2022:

- Elvis Orishaba (Policy Maker)
- Fridah Namakula (Briquette Manufacturer)
- Isaya Mwesige (Charity Worker)
- Peter Kansiime (Builder)
- Flavia Achola (Nurse)
- Lilian Nampijja (Civil Engineer)
- Ronald Owachgiu (Solar Engineer)
- Victor Muchunguzi (Cold Chain Manager)
- Johniey Bosco (Policy Maker)

K4C has not worked actively on climate change related projects previously, however there is a growing understanding globally of the impacts that climate change can have on human health, and so this does connect with our wider healthcare related activities and interventions.

The primary objectives of the fellowship were to assist the fellows in identifying an environmental issue relevant to their professional field and equipping them with the knowledge to effectively tackle their chosen issue.



Five of the fellows (Fridah, Isaya, Peter, Flavia & Ronald) all identified areas relating to the use of 'Three-Stone Fires (TSF)' for cooking that they could improve within their professional fields. The TSF is still the primary cooking method used in Uganda, primarily due to its low-cost and easy set-up, which involves placing a pot on three large stones arranged in a triangle, with the fire built underneath. It is estimated that over 90% of

Ugandans rely on wood as a primary fuel source, with Uganda losing about 90,000 hectares of forest annually due to the demand for wood fuel and agricultural

expansion. Charcoal production is also highly inefficient. The burning of both fuels produces high levels of carbon dioxide (CO<sub>2</sub>) and particulate matter (PM) into the air and produce smoke filled with pollutants like carbon monoxide (CO), nitrogen oxides (NO<sub>x</sub>), and volatile organic compounds (VOCs). These pollutants are exacerbated by the uncovered nature of the fire, and it commonly being located inside within rooms that have little to no ventilation.



Fridah (pictured left) aimed to learn about alternative fuel sources to firewood and charcoal. She then experimented with different waste sources and was able to manufacture her own briquettes using agricultural waste. The briquettes had a longer burn time and produced fewer smoke emissions compared to traditional sources.

Peter (pictured right) identified the LORENA, a pot rest stove, as an alternative cooking method. Due to its enclosed firewood chamber, it is said to use less fuel and emit less smoke. To evaluate this, Peter built a LORENA (while replicating Uganda's methods as much as possible) in Salford. Peter expanded on the initial design by adding a chimney that would reduce the smoke inhaled by the LORENA's user.



Isaya conducted an environmental evaluation of the stove compared to a three-stone fire using skills he had gained at the University of Salford's 'Energy House 2.0' building.

Flavia embarked on identifying ways to reduce the impact of indoor cooking on respiratory health, and how this could be effectively communicated through health education.

After collaborating with Peter in identifying the LORENA stove, she developed educational materials that communicated the importance of good ventilation in the home and the economic and health benefits of the LORENA.

Ronald aimed to create an economic model that could support the initial upfront costs associated with a change from the TSF. He learned about solar energy harvesting and how to design a solar system that can power cooking appliances like slow cookers and refrigerators, and how to encourage the switch through micro-credit.

Lilian, Victor, Bosco and Elvis identified wider environmental themes more effectively tackled by governmental and policy intervention. Lilian aimed to establish methods for recycling concrete, whose manufacture is responsible for around 8% of global emissions, when a building is demolished in urban areas in Uganda. Alongside Salford University's engineering department she developed a business plan for the incorporation of different replacement mix ratios of both aggregate and cement

(with demolished concrete and incinerator bottom ash) from the research in actual construction.

Elvis identified the prevalence of driving in Uganda and the lack of non-motorised travel options as problems contributing to local air pollution. He developed his knowledge of the infrastructural and sociological factors that contribute to this and the importance of having pedestrian-friendly and socially inclusive streets. As a District Physical Planner for Bunyangabu, he began to develop policies that would facilitate sustainable transport methods in the Bunyangabu District.

Bosco similarly identified the positive social outcomes that public transport can have, and identified the opportunities that local authorities hold in promoting environmental travel options. He created a concept note to his council on how non-motorised means of transport can be integrated into city plans and budgets. He also learned that the digitalisation of the transport system facilities and quickens service delivery.

Victor, a vaccine cold chain specialist, identified the issue of power cuts and their effect on vaccine storage as a fundamental issue in his field. He gained experience in overcoming this issue with solar fridges and how to appropriately adapt this to the Ugandan context.

The UK Knowledge for Change Team also assisted the fellows in developing personal skills and knowledge that can be used on their return home to communicate their ideas, such as Word and PowerPoint, as well as how to condense and present ideas in a way that can influence behaviour.

Professionally, the fellows were able to engage with a variety of academics and professionals. One of the largest catalysts was meeting the other professional fellows from different host organisations. The topic of three-stone fires was a common issue across Commonwealth countries. Engaging with the other fellows allowed them to identify common pinch points and learn from where they have already struggled and succeeded in the development of new stoves, policies, and community engagement.

#### Results/Impact so far:

K4C maintains a close relationship and provides on-going support for all fellows once they have returned to Uganda, and many continue to support our projects longer-term. Bosco was awarded a grant from the Royal Society Tropical Health and Medicine (RSTHM) to continue his professional development in examining “The impact and solutions of poor sanitation on public health and the environment, a case study of Fort Portal City, Uganda” : [NIHR Grant Awardees 2023 | RSTMH](#)

Peter continued to consolidate his skills in building the LORENA and is now, along with other builders in his team, building the LORENA for people in Fort Portal. In collaboration with Energy House 2.0, Peter has also conducted an Air Quality

Monitoring study, to evaluate the change the LORENA makes to air quality of the immediate area. The results have been measured and are currently being processed.

Flavia has she been seconded within the hospital to assist in the delivering of a diabetic K4C foot prevention project. She is utilising the skills she gained in data collection and presenting to help run the ministry of health branch of the project.

Ronald has returned to education to further his electrical engineering skills to allow him to fit and evaluate solar panels on government and private buildings.

#### Future Plans:

Along with its partners, K4C is planning to host 8 Ugandan, Tanzanian and Mozambican fellows in 2024 from a wide-range of disciplines including nursing, midwifery prosthetics and orthotics, supply chain management, medicine and researchers. The 3-month fellowship scheme will focus on building the fellows skills and knowledge on diabetic foot management in LMIC's along with prosthetic supply chain capacity in East Africa.

### *Respectful Care Programme*

#### Summary/Background:



Team of K4C Staff and Professional Volunteers based at Fort Portal Regional Referral Hospital (Uganda)

Since 2018, Respectful Care has been a centre pillar of K4C's health systems interventions. Initially our work focused on Respectful Maternity Care, but over the years our ethos has come to include all patient care. Traditionally, a lot of global health work has focused on emergency medicine and treating patients who have developed complications. Our work has shown that a more cost-effective and resource-efficient focus on prevention and early identification of risk factors has a far-reaching positive effect on patient outcomes. Fear of mistreatment or disrespect from health workers is one of the major reasons why people do not seek healthcare when they need it (White Ribbon Alliance). These delays in seeking treatment have very real outcomes and are linked to many preventable deaths.

#### Activities:

K4C promotes respectful patient care throughout all of its programme work. Our staff and professional volunteers provide bedside mentorship and role-modelling of: communication, compassion, privacy, dignity, confidentiality and patient-centred care. Our focus on user-engagement keeps the voices of the patients heard and central to our programme planning and evaluation.

### Results/Impact so far:

We continue to see very tangible outcomes of increased patient attendance in the facilities where we work, and our evaluation work and interviews with patients highlight how important receiving respectful care has been in their decisions to seek care. Kagote Health Centre in Fort Portal continues to have a thriving birth rate following partnership with K4C, having had many years without any births at all. In 2023, following the establishment of the Ninsiima Centre for Rehabilitation of People with Disabilities at Fort Portal Regional Referral Hospital, patient numbers increased more than 12 times that of the previous year.

K4C is proud that its work benefits the health systems in Uganda and Tanzania, but also that it brings benefits back to the UK NHS workforce. Students and volunteers report that working with us helps them understand the different ways respect is understood and demonstrated in different cultures, a cultural competence that they take back into caring for their diverse patient cohort in the UK. We also deliver lectures to the University of Salford nursing students on the lessons that we have learnt about how respectful care saves lives in every setting.

### Future Plans:

Based on our work so far, we have been responding to the needs in the health facilities in which we work and considering how we can extend respectful care to both unborn and newborn babies, who do not have a voice to tell us what they need. We are developing some new work around neonatal sepsis focused on linking respectful maternity care to respectful neonatal care, to improve outcomes and survival rates for some of the most vulnerable patients we work with.

## **Virtual Volunteering Programme**

### Background:

In our last report, we described K4C's commitment to reducing unnecessary air travel, as well as making engagement in our work possible for those who are unable to travel overseas. We firmly believe in the value of our in-person volunteering and student placements, but have integrated virtual working into the day to day running of our programmes to enhance and enrich them while keeping our carbon footprint as low as possible.

The Virtual Learning hub that was created in Fort Portal through a grant from the Tropical Health and Education Trust in 2022 has proved an invaluable resource for our team. Providing a physical space equipped with technology and reliable Wi-Fi, on site at the Regional Referral Hospital, allows the team to engage in virtual working with colleagues from the University of Salford and our other sites in Kampala, and Zanzibar and Moshi in Tanzania, strengthening team relationships and enabling South-South learning and knowledge transfer between our linked projects in these different geographical areas.



### Case Study: Dan Parker, Virtual Volunteer



Dan is a lecturer in Digital Health at the University of Salford. He's never been to Uganda, but he's played a vital role in supporting the establishment of a diabetic foot clinic in Fort Portal. The team on the ground use a 3d foot scanner to assess patients at risk of developing foot ulcers, a common cause of foot amputation. The digital image goes to Dan in Salford, who 3D prints bespoke shoe insoles for each patient. This work was also supported by NHS clinical scientist trainees Elizabeth Massie and Jess Concannon, who were instrumental in the foot clinic set-up in the summer of 2023. Jess had herself been a K4C virtual volunteer supporting the ongoing prosthetics work in the previous year, further demonstrating the potential benefits of virtual engagement both for our projects in Uganda but also the NHS.

K4C Trustee and Doctoral Researcher, Claire Horder, has been working to capture and evaluate the effectiveness of virtual working. An article was published in SCOPE magazine about this work: <https://www.ipem.ac.uk/media/413heltr/scope-autumn-2023-full-lrc.pdf>

Claire's research is showing that virtual working and virtual volunteering is bringing a valuable new dimension to K4C's programmes and widening the ability to participate in health systems strengthening activities both for our staff and for our international volunteers and students. We have now been awarded another grant from the Tropical Health and Education Trust to formally trial a pilot for virtual mentorship between the UK, Uganda and Zanzibar to support our ongoing work on diabetes. This exciting work will begin in January 2024.

### *Professional Volunteering Programme*

#### Overview:



Knowledge for Change continued its Professional Volunteering Programme throughout 2023. Over the course of the year, a total of 16 volunteers from the UK NHS were placed across Uganda and Tanzania on long-term (6+ month) placements. These included 3 midwives, 6 nurses, 3 doctors, a physiotherapist, a nutritionist and 2 bio-scientists. 10 of these placements were fully-funded by Knowledge for Change to include the volunteer's flights, accommodation, airport transfers, insurance, clinical registration, work permit and a living allowance of £300 per month to cover their subsistence costs. The remaining 6 were part-funded to include the volunteer's

accommodation, airport transfers, insurance, clinical registration and work permit costs.

### Roles

The role of K4C's professional volunteers is to work alongside local staff on a co-present basis to share valuable knowledge, skills and experience. The primary aim of the programme is to build the capacity of local staff and thereby strengthen local health systems. The placements are of mutual benefit as the volunteers also gain valuable knowledge, skills and experience to utilise in their practice once back in the UK. Professional volunteers also play an important role in supervising our students whilst on placement to provide clinical supervision, guide their learning and work with the local K4C team to provide pastoral support where needed.

In terms of project work, the professional volunteers based in Uganda have played critical roles in supporting the expansion of the ongoing development of our cervical screening programme to include Kasusu and Kataraka Health Centres, supporting the design and implementation of our Diabetes Projects, supporting establishment of the Ninsiima Centre for the Rehabilitation of People with Disabilities and supporting the Commonwealth Scholarship Professional Fellowship Programme.

K4C is excited to have placed its first professional volunteers in Zanzibar from January 2023. Over the course of the year we placed 3 nurses, 2 midwives and a physiotherapist at Mnazi Mmoja Hospital. As our partnerships and relationships in Zanzibar are still relatively new, we have not yet begun formal implementation of any projects (aside from our student placement programme). However, our first volunteers have played a critically important role in building links, networks and relationships with local staff and stakeholders, guiding our understanding of the unfamiliar contexts and cultures and reviewing hospital data to identify trends and priority areas for K4C to focus on in future.

More information about our Professional Volunteering Programme can be found on our website: [www.knowledge4change.org/professionalvolunteering](http://www.knowledge4change.org/professionalvolunteering)

## *Student Placement Programme*

### Background:



K4C's "Ethical Student Placement Programme" has been running since 2015, during which time it has arranged over 600 placements for students from nursing, midwifery, medical, Allied Health, social work and education backgrounds (amongst others). It was initially established with funding from Health Education England (now NHS England) and aimed to develop, pilot and evaluate an ethical, cost effective, sustainable and low-risk placement

program which yielded highly impactful learning outcomes for students and mutual return benefits for the UK NHS.

#### Activities in 2023:

Our student placement programme has continued to grow throughout 2023, mainly due to the addition of new partnership facilities in Zanzibar which were successfully piloted throughout 2022. Over the course of 2023, K4C hosted 147 students, an increase of 20% compared to the previous year. The majority of students were from nursing and midwifery backgrounds, however there was also strong representation from social work, physiotherapy, paramedic science and prosthetics and orthotics. Our main University partners were Kingston University, Liverpool John Moore's University, University of Salford, Hertfordshire University and the Universities of Agder and OsloMet in Norway. A positive new relationship has also been arranged with the Universities of Teesside and West England in the UK.

The programme continues to demonstrate very positive learning outcomes for students and positive feedback from partner health facilities. The financial return for K4C has also been positive, with over £100,000 generated for use towards our charitable activities in Uganda and Tanzania: over £30,000 was directly invested into our partner health facilities; over £25,000 was invested in our Professional Volunteering Programme which itself yields strongly positive impacts for our partners; over £35,000 was used to cover the salaries of our clinical staff; and the remaining funding covered students' direct costs for travel and accommodation along with other general administrative costs.

#### Future Plans:

Moving into 2024, we are excited to announce a further expansion of our student placement programme to include new partnership sites at Mawenzi Hospital and Pasua Health Centre in Moshi (Tanzania). We are also continuing to proactively plan further expansion of the programme to other countries, in partnership with several like-minded charities and NGOs.

## Financial Overview

This Annual Report covers the 12-month period from 1<sup>st</sup> January 2023 to 31<sup>st</sup> December 2023. Total receipts on Knowledge for Change (UK) funds for this period were £433,825. These receipts included all income from public donations, various sources of project funding, bank interest payments and income provided by various partner organisations and funding bodies.

Total payments of Knowledge for Change (UK) funds for the 12-month period from 1<sup>st</sup> January 2023 to 31<sup>st</sup> December 2023 totalled £409,932. This included payments made for all projects including those in the UK, Uganda and Tanzania; those run in partnership with the University of Salford and those funded by other external sources.

The total balance brought forward at the beginning of the financial year was £154,376. Over the course of the 12-month period, there was an excess of receipts over payments of £23,893. This gave Knowledge for Change (UK) a combined total fund available on 1<sup>st</sup> January 2024 of £178,270.

Throughout the year, Knowledge for Change (UK) granted a total of £80,108 to 'Knowledge for Change (Uganda)' and £11,000 to 'Knowledge for Change (Tanzania)'. As detailed in our previous (2022) Trustees Annual Report, both of these organisations are now fully established as independent NGOs in their respective countries. They were setup to streamline governance, promote local ownership and ensure full compliance with local laws and financial regulations in Uganda and Tanzania, and have their own governance and management systems in place. As such, they now serve as independent suppliers and downstream partners to Knowledge for Change (UK) and are granted direct funding to support their operations. Memorandums of Understanding (MOUs) are in place to govern the tripartite relationship between the organisations, and both K4C (Uganda) and K4C (Tanzania) are subject to regular stringent financial audit and due diligence checks by K4C (UK). Several trustees for K4C (UK) are also board members for K4C (Uganda) and K4C (Tanzania) to support effective and streamlined management.

The accounts below differentiate between payments made directly by Knowledge for Change (UK) and any funding granted to Knowledge for Change (Uganda) and Knowledge for Change (Tanzania). Notes 5a and 5b specifically provide more detail by differentiating between expenditure by each of the 3 separate organisations.

Overall, the K4C trustees are highly confident in the financial standing of the charity, and are proud of the level of sustainability we have achieved despite unforeseen macro factors relating to Brexit, the UK government's decision to cut its overseas development budget during the Covid-19 pandemic, and the Covid related travel restrictions which reduced our financial reserve and our income from student placements. We do not anticipate any reversal of the UK government's funding decision within the next 3-5 years, and will therefore maintain our innovative but cautious approach to generating and managing our funding over the coming year.

## Financial Statement for the Year Ended 31st December 2023

	Total Funds (31/12/23) £	Total Funds (31/12/22) £
RECEIPTS AND PAYMENTS ACCOUNT		
Receipts		
Public Donations (note 2a)	291,603	128,987
Income from Organisations (note 2b)	141,207	124,615
Refunds	178	311
Miscellaneous Funding	-	-
Sub-total (note 3)	432,988	253,913
Bank Interest/Charge Reversals	837	343
	433,825	254,256
Payments (Note 4)		
Professional Volunteering Project	24,243	17,124
Ethical Elective Placement Project	210,794	125,062
Biomedical Engineering & Blood Transfusion Projects	-	-
Hand Hygiene, Infection Control & Antimicrobial Resistance	-	-
Wound Management Project	2,254	1,415
Cervical Screening Project	1,978	-
Rehabilitation Projects	3,169	2,804
Diabetes (NEEDS) Project	11,856	-
Neonatal Sepsis Project	1,673	-
Respectful Care (Maternity Services) Project	-	-
Cultural Competency Project	2,000	-
General Health System Strengthening Activities	1,917	-
General Education System Strengthening Activities	-	-
British Commonwealth Fellowships	10,018	9,855
Climate Change & Environment	-	-
General Infrastructural Developments	-	-
Knowledge for Change (Uganda) Grant Funding (Note 5)	80,108	128,492
Knowledge for Change (Tanzania) Grant Funding (Note 5)	11,000	9,640
Website Development	204	216
Bank Charges	85	40
Publishing / Project Dissemination	-	-
Administrative Staffing & Expenditure (UK)	23,206	-
Research Staffing (UK)	25,378	-
Administrative Staffing & Expenditure (Uganda)	49	-
	409,932	294,648
Excess of Receipts over Payments	23,893	(40,392)



## STATEMENT OF ASSETS & LIABILITIES

### Cash Funds

Bank Account 1 (Current) (GBP - UK)	166,203	31,862
Bank Account 2 (Savings) (GBP - UK)	11,180	120,343
GBP Currency Cards	887	2,171
Cash in Hand (UK)	-	-
	<u>178,270</u>	<u>154,376</u>
Liabilities (note 6)		
Expenses due	-	-
Invoices/Payments due	-	-
	<u>178,270</u>	<u>154,376</u>

Total Assets - Liabilities

## Notes to the Financial Statement for the Year Ended 31st December 2023

1. The financial statements of Knowledge for Change have been prepared in accordance with the Charities Act, 2011, and the Charities (Accounts & Reports) Regulations, 2008, using the Receipts & Payments basis.

### 2. Receipts Analysis

	Total Funds (31/12/23) (£)	Total Funds (31/12/22) (£)
a. Public Donations		
Direct Donations	253,840	101,102
Amazon Smile	-	-
KindLink	15,771	9,621
Wonderful	21,991	18,264
HMRC Gift Aid	-	-
	<u>291,602</u>	<u>128,987</u>
b. Funding from Organisations		
University of Salford	36,193	32,600
<b>Liverpool John Moore's University</b>	55,979	66,215
Commonwealth Scholarship Commission	18,462	22,800
Tropical Health Education Trust (THET)	-	1,000
Legs for Africa (L4A)	1,125	2,000
Burdett Trust for Nursing	29,448	-
	<u>141,207</u>	<u>124,615</u>

3. A summary of the public donations and income from organisations intended for specific projects is provided below:

Specified Project	Income (£) to 31/12/23:	Income (£) to 31/12/22:
Student Placement Project	336,122	191,955
Cervical Screening Project	7,045	1,259
Diabetes Projects (incl. Nursing Now Fellowships)	35,241	1,000
Antimicrobial Stewardship Project	-	500
Wound Management Project	2,668	2,500
Virtual Volunteering Project (Prosthetics)	-	-
Virtual Volunteering Project (Wound Management)	-	-
Biomedical Engineering / UBTS Projects	-	-
Biomedical Science Research (incl. Covid-19)		900
Respectful Care Project	3,081	-
Children's Education Project	-	-
Commonwealth Scholarship Commission Fellowships	18,462	22,800
Professional Volunteering Project	3,430	-

Rehabilitation	15,680	32,582
Climate Change	5,000	-
Miscellaneous/Non-Project Specific*	6,260	417
Total	432,988	253,913

\*Miscellaneous/Non-Project Specific income refers to income that is unrestricted and not tied to a specific project. A further breakdown is provided below:

Source of Income:	Amount (31/12/23):	Amount (31/12/22):
Kindlink (general public donations)	-	8
Wonderful (general public donations)	-	-
Direct donations (general public donations)	6,202	409
HMRC (Gift Aid claimed on public donations)	-	-
Refunds (miscellaneous)	57	-
Total	6,260	417

4. An alternative breakdown of payments in terms of defined payment categories, as opposed to project expenditure, is provided below:

Line Item:	Expenditure (£) to 31/12/23:	Expenditure (£) to 31/12/22:
<i>Professional Volunteering</i>		
Stipend Payments	16,633	14,402
Accommodation Costs	5,582	1,245
International Travel Costs	584	1,477
Local Travel Costs	-	-
Clinical Registration Costs	-	-
<i>Sub-Total:</i>	<i>22,799</i>	<i>17,124</i>
<i>Student Placements</i>		
International Travel Costs	158,188	99,109
Local Travel Costs	484	36
Accommodation Costs	41,649	10,659
Subsistence Costs	-	-
<i>Sub-Total:</i>	<i>200,321</i>	<i>109,804</i>
<i>Training Workshops/Conferences</i>		
Training Programmes in Uganda	11,612	-
Training Programmes in Tanzania	-	-
Training Programmes in the UK	10,018	9,855
<i>Sub-Total:</i>	<i>21,630</i>	<i>9,855</i>
<i>International Travel</i>		
Project Management	8,853	7,424
Project Stakeholders	-	-
<i>Sub-Total:</i>	<i>8,853</i>	<i>7,424</i>
<i>UK Staffing</i>		

Admin/Management Staff Salaries	23,206	-
Research Staff Salaries	31,201	-
Local UK Travel	-	432
<i>Sub-Total:</i>	<i>54,407</i>	<i>432</i>
<i>Uganda Staffing</i>		
Admin/Management Staff Salaries	-	-
Clinical Staff Salaries	300	-
Local Uganda Travel	1,540	-
<i>Sub-Total:</i>	<i>1,840</i>	
<i>Tanzania Staffing</i>		
Admin/Management Staff Salaries	-	-
Clinical Staff Salaries	785	-
Local Tanzania Travel	-	-
<i>Sub-Total:</i>	<i>785</i>	
<i>Direct Investments/Infrastructural Developments</i>		
Student Hosting Contributions	1,917	7,405
Provision of Medical Equipment	5,982	4,214
<i>Sub-Total:</i>	<i>7,899</i>	<i>11,619</i>
<i>Other</i>		
Office Supplies & Stationery (Uganda)	-	-
Banking Costs	85	40
Website Costs	204	216
K4C (Uganda) Grant Funding (note 5)	80,108	128,492
K4C (Tanzania) Grant Funding (note 5)	11,000	9,640
<i>Sub-Total:</i>	<i>91,397</i>	<i>138,388</i>
<b>Total Expenditure:</b>	<b>409,931</b>	<b>294,648</b>

5. Over the course of the 2023 financial year, K4C UK has granted a total of £80,108 to K4C Uganda and £11,000 to K4C Tanzania. The two tables below provide a breakdown of all Knowledge for Change expenditure, including the funding granted to Knowledge for Change (Uganda) and Knowledge for Change (Tanzania). Table 5a contains a breakdown of expenditure by project, whereas table 5b contains a breakdown of expenditure by defined payment categories.

*Table 5a (all K4C UK, K4C Uganda and K4C Tanzania expenditure categorised by project):*

All Payments Combined for 01/01/2023 – 31/12/2023 (Categorised by Project)	K4C UK	K4C Uganda	K4C Tanzania	Total Funds
Professional Volunteering Project	24,243	7,250	-	31,493
Ethical Elective Placement Project	210,794	9,700	2,000	222,494
Biomedical Engineering & Blood Transfusion Projects	-	-	-	-

Hand Hygiene, Infection Control & Antimicrobial Resistance	-	3,972	-	3,972
Wound Management Project	2,254	8,617	-	10,871
Cervical Screening Project	1,978	12,190	-	14,168
Rehabilitation Projects	3,169	20,467	3,000	26,636
Diabetes (NEEDS) Project	11,856	7,300	3,000	22,156
Neonatal Sepsis Project	1,673	-	-	1,673
Respectful Care (Maternity Services) Project	-	8,690	3,000	11,690
Cultural Competency Project	2,000	-	-	2,000
General Health System Strengthening Activities	1,917	950	-	2,867
General Education System Strengthening Activities	-	-	-	-
British Commonwealth Fellowships	10,018	-	-	10,018
Climate Change & Environment	-	1,500	-	1,500
General Infrastructural Developments	-	-	-	-
Website Development	204	-	-	204
Bank Charges	85	508	-	593
Publishing / Project Dissemination	-	-	-	-
Administrative Staffing & Expenditure (UK)	23,206	-	-	23,206
Research Staffing (UK)	25,378	-	-	25,378
Administrative Staffing & Expenditure (Uganda)	49	-	-	49
Total Payments:	318,823	81,144	11,000	410,967
Reserve/Unspent Funding (incl. at bank and in-hand)	N/A	13,439	-	13,439
Total Payments + Reserve Funding	318,823	94,583	11,000	424,406

Table 5b (all K4C UK, K4C Uganda and K4C Tanzania expenditure categorised by defined payment categories):

All Payments Combined for 01/01/2023 – 31/12/2023 (Categorised by Defined Payment Categories)	K4C UK	K4C Uganda	K4C Tanzania	Total Funds
<i>Professional Volunteering</i>				
Stipend Payments	16,633	-	-	16,633
Accommodation Costs	5,582	3,450	-	9,032
International Travel Costs	584	-	-	584
Local Travel Costs	-	2,000	-	2,000
Clinical Registration Costs	-	600	-	600
<i>Sub-Total:</i>	<i>22,799</i>	<i>6,050</i>	<i>-</i>	<i>28,849</i>
<i>Student Placements</i>				
International Travel Costs	158,188	-	-	158,188
Local Travel Costs	484	2,600	-	3,084
Accommodation Costs	41,649	1,900	2,000	45,549
Subsistence Costs	-	-	-	-
<i>Sub-Total:</i>	<i>200,321</i>	<i>4,500</i>	<i>2,000</i>	<i>206,821</i>
<i>Training Workshops/Conferences</i>				
Training Programmes in Uganda	11,612	5,950	-	17,562
Training Programmes in Tanzania	-	-	-	-
Training Programmes in the UK	10,018	-	-	10,018



<i>Sub-Total:</i>	21,630	5,950	-	27,580
<i>International Travel</i>				
Project Management	8,853	-	-	8,853
Project Stakeholders	-	-	-	-
<i>Sub-Total:</i>	8,853	-	-	8,853
<i>UK Staffing</i>				
Admin/Management Staff Salaries	23,206	-	-	23,206
Research Staff Salaries	31,201	-	-	31,201
Local UK Travel	-	-	-	-
<i>Sub-Total:</i>	54,407	-	-	54,407
<i>Uganda Staffing</i>				
Admin/Management Staff Salaries	-	4,534	-	4,534
Clinical Staff Salaries	300	37,135	-	37,435
Research Staff Salaries	-	4,667	-	4,667
Local Uganda Travel	1,540	400	-	1,940
<i>Sub-Total:</i>	1,840	46,736	-	48,576
<i>Tanzania Staffing</i>				
Admin/Management Staff Salaries	-	-	-	-
Clinical Staff Salaries	785	-	9,000	9,785
Local Tanzania Travel	-	-	-	-
<i>Sub-Total:</i>	785	-	9,000	9,785
<i>Direct Investments/Infrastructural Developments</i>				
Student Hosting Contributions	1,917	3,900	-	5,817
Provision of Medical Equipment	5,982	8,300	-	14,282
Infrastructural Developments	-	5,200	-	5,200
<i>Sub-Total:</i>	7,899	17,400	-	25,299
<i>Other</i>				
Office Supplies & Stationery (Uganda)	-	-	-	-
Banking Costs	85	508	-	593
Website Costs	204	-	-	204
<i>Sub-Total:</i>	289	508	-	797
<b>Total Expenditure:</b>	<b>318,823</b>	<b>81,144</b>	<b>11,000</b>	<b>410,967</b>

6. Knowledge for Change does not possess any fixed assets, short or long-term liabilities; only current assets in the form of cash within the bank accounts and currency cards noted above.

## Independent Examiner's Report to the Trustees of Knowledge for Change

I report on the accounts for Knowledge for Change for the year ended 31 December 2023, which are set out on pages 26-33 of the Charity's 2023 Trustee's Annual Report and cover a 12-month period.

### Respective responsibilities of trustees and examiner

The Charity's Trustees are responsible for the preparation of the accounts. The Charity's Trustees consider that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the 2011 Act) and that an independent examination is needed.

It is my responsibility to:

- Examine the accounts under section 145 of the 2011 Act;
- Follow the procedures laid down in the general Directions given by the Charity Commission under section 145(5)(b) of the 2011; and
- State whether particular matters have come to my attention.

### Basis of independent examiner's statement

My examination was carried out in accordance with the general directions given by HMRC and the Charity Commission. An examination includes a review of the accounting records kept by the Charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently no opinion is given as to whether the accounts present a 'true and fair view'. The report is limited to those matters set out in the statement below.

### Independent examiner's statement

In connection with my examination, no matters have come to my attention:

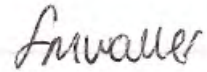
(1) which gives me reasonable cause to believe that in any material respect the requirements:

- To keep accounting records in accordance with section 130 of the 2011 Act;
  - To prepare accounts which accord with the accounting records and to comply with the accounting requirements of the 2011 Act have not been met;
- or

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

11 Newmarket Street  
Skipton, North Yorkshire  
BD23 2HX

Date: 06/12/2024



Francesca Waller  
Independent Examiner  
Nestegg Financial  
Services

Knowledge for Change is a  
registered charity in England and  
Wales (no. 1146911). Its registered  
address is 11 Newmarket Street,  
Skipton, North Yorkshire, BD23 2HX.



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