

PUBLIC HEALTH COLLABORATION

England & Wales · Charity number 1171887

Details

Status Registered

Legal form CIO

Registered 2017-03-03

Register [View on the Charity Commission register](#)

Contact

Address Reed Smith
1 Blossom Yard
London
E1 6RS

Phone 0300 102 1684

Email info@PHCuk.org

Website <https://PHCuk.org>

Activities

Objects: TO ADVANCE (FOR THE PUBLIC BENEFIT) THE HEALTH OF THE PUBLIC BY CONTRIBUTING TO THE IMPROVEMENT OF THE LEVEL OF KNOWLEDGE, UNDERSTANDING AND BEST PRACTICE CONCERNING HEALTHY DIET AND EXERCISE AMONG: MEMBERS OF THE PUBLIC AND HEALTHCARE PROFESSIONALS.

Activities: To advance physical, mental and social well-being among members of the public and healthcare professionals by contributing to the improvement of their level of knowledge, understanding and best practices concerning lifestyle and metabolic health.

Classification

- **How:** Provides Advocacy/advice/information
- **What:** Education/training, The Advancement Of Health Or Saving Of Lives

Geography

- Scotland
- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£354,274	£438,443	-	-
2024-03-31	£314,203	£358,012	-	-
2023-03-31	£313,281	£295,381	-	-
2022-03-31	£87,758	£123,620	-	-
2021-04-05	£120,128	£33,044	-	-

Trustees

Name	Role	Appointed
Dr David Yarrington Jehring	Chair	2022-04-22
Catherine Rogers		2026-02-27
Giles Matthew Corby		2022-04-22
Graham Stuart Phillips FRPharmS		2022-04-22
Olivia Khwaja		2022-04-22
Susan Caroline Fairlie		2023-03-15

PUBLIC HEALTH COLLABORATION

England & Wales - Charity number 1171887

Accounts



***Public Health
Collaboration***

ANNUAL REPORT

2024/2025

Charity Registration Number 1171887 / SC052248

www.phcuk.org

Annual Report and Financial Statements for the year ended 31 March 2025

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Report of the Trustees

The trustees present their report with the financial statements of the charity for the year ended 31 March 2025. The trustees have adopted the provisions of 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

To advance physical, mental and social well-being among members of the public and healthcare professionals by contributing to the improvement of their level of knowledge, understanding and best practices concerning lifestyle and metabolic health.

Vision, Mission and Ambitions

Our vision is a society where everyone enjoys good metabolic health.

Our mission is to empower, inspire and educate people that most chronic diseases can be prevented and reversed by maintaining good metabolic health through sustainable lifestyle changes.

The values by which we work are:

- ▶ Ambitious - We have a strong desire and determination to create the change we want to see.
- ▶ Attentive - We listen to everyone with care and attention.
- ▶ Compassionate - We appreciate everyone's perspective and will do our best to support them.
- ▶ Inquisitive - We like to ask questions and are always eager to learn.
- ▶ Proactive - We like to take action and create the change we want to see.
- ▶ Sincere - We genuinely want humanity to become healthier and happier.

Our ambitions are to:

- ▶ Reverse the type 2 diabetes and prediabetes epidemic.
- ▶ Have food addiction recognised as an official diagnosis.
- ▶ Undo the childhood obesity crisis.

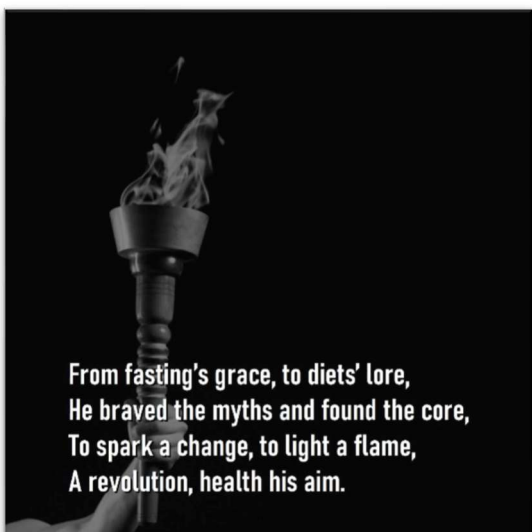
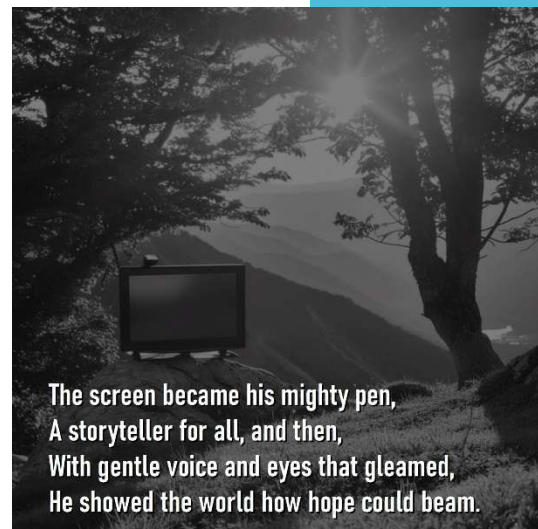
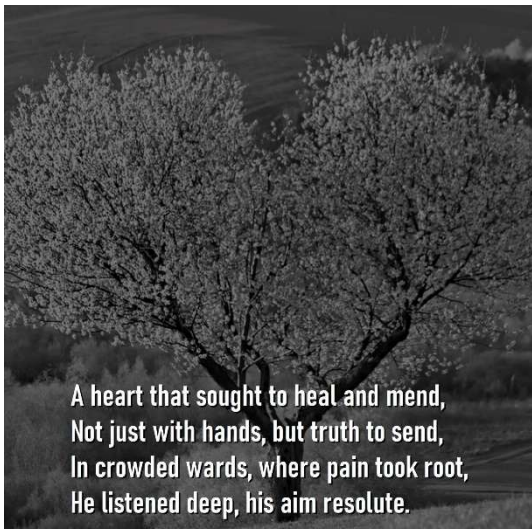
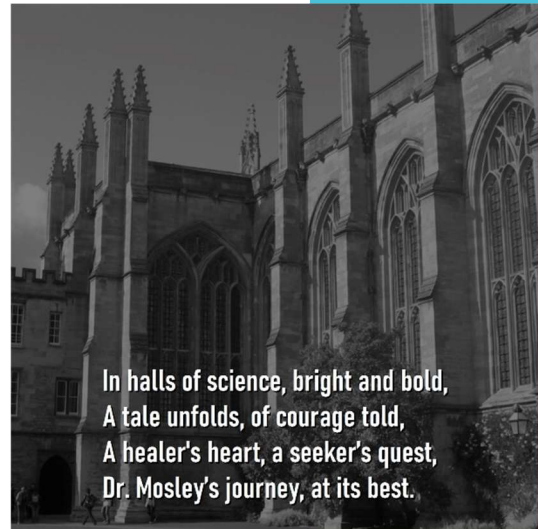
We will achieve these ambitions by delivering high-quality projects, collaborating with universities to conduct robust research and advocating for the changes we want to see. Through this process our hope is that we will build a society where everyone enjoys good metabolic health.

Public Benefit

The trustees have referred to the guidance contained in the Charity Commissions general guidance on public benefit whilst reviewing the Public Health Collaboration's mission, vision and objectives, and in planning the future activities of the charity.

Remembering Michael Mosley

This year we were deeply saddened by the loss of Dr Michael Mosley, whose work has inspired millions around the world to rethink nutrition and lifestyle. His curiosity, passion and accessible communication of science had a profound influence on public health at large and the PHC as an organisation. We are eternally grateful for his contribution and put together this poem to remember him by.



In fields of green and skies of blue,
Your spirit soars, both tried and true,
A legacy of love and light,
Forever in our hearts, you'll write.



**Dr Michael Mosley
1957 - 2024**

Achievement and Performance

Raising Awareness

Raising awareness about the power of sustainable lifestyle changes has remained central to our work this year, with a wide variety of initiatives reaching both the public and healthcare professionals.

Conference 2024 – Nourishing Minds, Transforming Lives

In May, we brought together world leaders in metabolic health at Fairfield Halls, London. With over 500 delegates attending in person and 200 joining online, the conference explored how leaving behind ultra-processed foods can help communities thrive. The event showcased cutting-edge science, moving personal stories, and practical strategies for positive change.



Supporting Research

We were delighted to make a study led by Dr Erin Bellamy open access through PHC funding. This ensures that important findings on nutrition and health are freely available to everyone, helping to accelerate change across healthcare and society. The aforementioned study was titled “[Understanding the experiences of ketogenic metabolic therapy for people living with varying levels of depressive symptoms: a thematic analysis](#)” and was published in *Frontiers in Nutrition*.

Everyone at PHC Has a Story

Stories continue to be at the heart of what we do. Our “[Everyone at PHC Has a Story](#)” campaign, shared across our website and social media, highlighted the journeys of individuals who have transformed their health through real food and lifestyle change. These powerful narratives continue to inspire others to begin their own journey.

Everyone at the Public Health Collaboration has a Story...



June 2022

How I lost 12kg in 6 weeks on a low-carb diet...



June 2023

DELLANIE NASH
AMBASSADOR

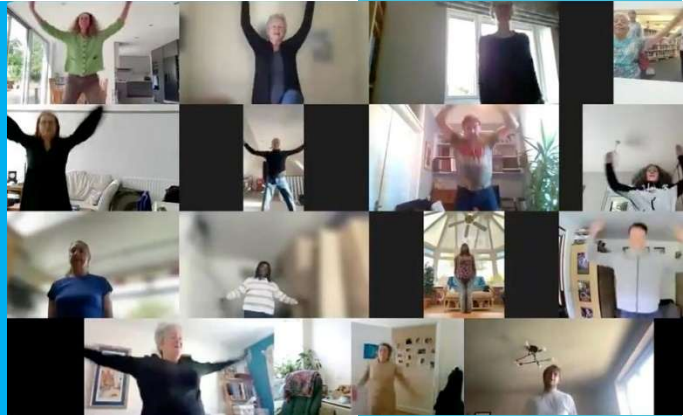


In the Media

Our message reached new audiences this year through appearances such as Dr Jen Unwin's contribution to [BBC Radio 4's Food Programme](#), sharing insights on food addiction and recovery.

Fundraising & Community Engagement

This October we started a new fundraiser event called [The Star Jump Challenge](#). The aim of the challenge was to raise awareness that every day, 25 people in the UK have an amputation due to diabetes complications and to raise funds for the PHC to help people put their type 2 diabetes into remission. From 1st October to 25th October, we had hundreds of people performing 25 star jumps on a daily basis, which raised £5,008 to support our work.



Collaborative Partnerships

We were honoured to co-host the British Society for Ecological Medicine's 40-year anniversary conference, [Unravelling Brain Health](#). Together, we explored the connections between nutrition, environment and mental wellbeing with experts from around the world.

Unravelling Brain Health Scientific Conference
Friday October 18th 2024
Central London and online

Dr Chris Palmer Prof Ed Bullmore Iain Campbell PhD Dr Jenny Goodman

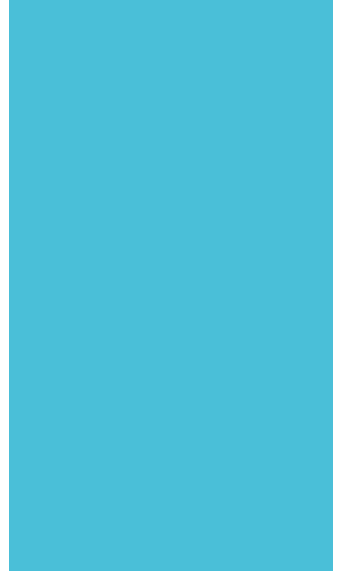
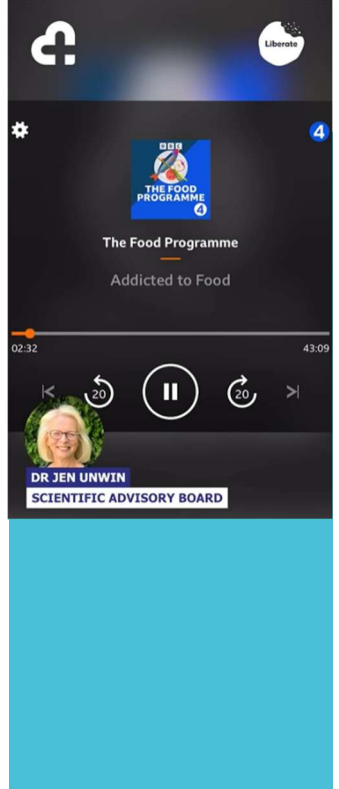
Patrick Holford Dr Damien Downing Ally Houston, Dr Naomi Riddell, Erin Bellamy (Panellists)

BSEM Public Health Collaboration

Join us! www.bsem.org.uk

Professional Conferences

We had a strong presence at Diabetes Professional Care 2024, with multiple PHC speakers delivering engaging talks to clinicians across the UK.



DIABETES PROFESSIONAL CARE

Dr David Unwin Helen Gowers

Ellen Calteau Dr. Ian Lake Dr. Kesar Sadhra

Dr Campbell Murdoch Dr Trudi Deakin PhD

Olympia London, 16 October, 2024

PHC Scotland 2024

Building on the success of our first Scottish event, we hosted a second conference that inspired healthcare professionals and the public alike titled [Revolutionising Health with Real Food](#). The event emphasised the importance of real food in transforming health and preventing chronic disease.



Policy Engagement

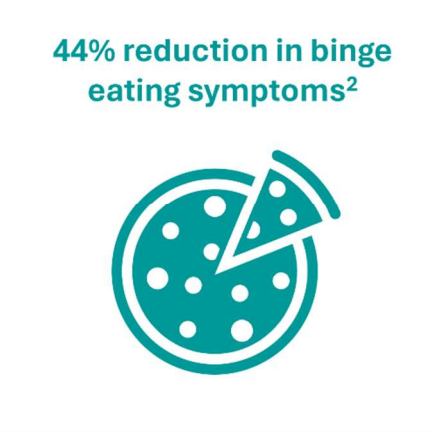
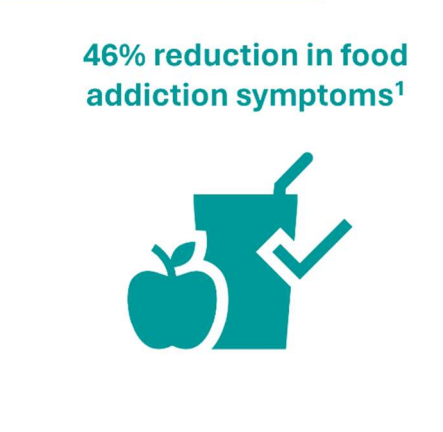
We responded to the [BBC Panorama](#) documentary on weight-loss medication with a carefully considered statement from our Scientific Advisory Committee. This highlighted the importance of sustainable lifestyle approaches.

In addition, PHC joined with the British Dietetic Association and X-PERT Health to urge NICE to [update their type 2 diabetes management guidelines](#) in line with the growing body of evidence for dietary interventions. The guideline is set to be published late in 2025.

Our Projects

Liberate

Our new service [Liberate](#), dedicated to supporting those struggling with ultra-processed food addiction, has shown promising results in its pilot programme. With over 100 participants, 46% reported a reduction in food addiction symptoms, while 44% saw a decrease in binge-eating behaviours. These early findings provide strong encouragement as we expand this vital project.



N=86; ^ΔCompletion defined by attending 4/6 session; ¹ As measured by Yale Food Addiction Scale; ² As measured by Binge Eating Scale; ³ As measured by Warwick and Edinburgh Mental Wellbeing Scale - increase of 6 points from baseline to end of programme.

The Lifestyle Club

Our type 2 diabetes remission service, [The Lifestyle Club](#) has now had over 1,300 participants complete the course with our wonderfully dedicated team of coaches. Results at 6-months are that participants lose 5.9kg in weight, reduce their waist circumference by 9.9cm as well as their HbA1c by 9.8mmol/mol. Then on average medication is reduced by 25% and personal empowerment is increased by 13.5%.



Our study with the University of Surrey has now been completed by 55 participants alongside their 3 and 6 month outcomes. The next step is for the lead researcher, [Professor Martin Whyte](#) to write up the study and submit it to a peer-reviewed journal. With the aim of having it published late 2025.

Finally, we extend our heartfelt thanks to our colleague [Helen Gowers RD](#) for her dedication and commitment over the past few years as she transitions from her role as Director of The Lifestyle Club to Vice-chair of the Scientific Advisory Committee. Her accomplishments in helping hundreds of people with type 2 diabetes and pre-diabetes achieve sustainable lifestyle changes and progress towards remission stand as a testament to her commitment to public health.



Real Food Rebellion

Our school's programme, Real Food Rebellion, has continued to grow. This year, David Sogan's incredible [60 kilometre row](#) brought attention and supported the project to the tune of £3,195. In addition our [Big Give Christmas campaign](#) raised £8,216 to fund its expansion. With every milestone, we get closer to helping the next generation make healthier choices.



Real Food Runners

Our informal running club, [Real Food Runners](#) continues to be an incredible initiative with over 160 members having joined the parkrun group with over 11,000 parkruns completed. It's been great to see so many people engage with more exercise and take the run at their own pace.



Elevate

This year we've decided to extend our projects with an app called [Elevate](#). In order to maximise our impact on improving the health of the public, Elevate will be a low-cost accessible approach to helping people become healthier. The app is currently in beta-testing but we're aiming to launch it in early 2026.

Financial Review

Financial Position

Total incoming resources for the year to 31 March 2025 amounted to £354,274 (year ended 31 March 2024 £314,203). Unrestricted funds incoming resources amounted to £351,622 (year ended 31 March 2024 £268,565). Restricted funds incoming resources amounted to £2,652 (year ended 31 March 2024 £45,638).

Total resources expended for the year to 31 March 2025 amounted to £438,443 (year ended 31 March 2024 £358,012). Unrestricted funds expenditure amounted to £412,161 (year ended 31 March 2023 £327,218). Restricted funds expenditure amounted to £26,282 (year ended 31 March 2024 £30,794).

The Charity had £(15,167) (year ended 31 March 2024 £54,158) in its general fund at the year ended 31 March 2025, and £nil (year ended 31 March 2024 £14,844) in its restricted fund at the year end 31 March 2025.

As at 31 March 2025, cash at bank and in hand held by the charity was £48,170 (31 March 2024 £101,591), with a total net current assets figure of £(15,167) (31 March 2024 £69,002).

The purposes of the different types of funds are explained in the accounting policies as shown in the financial statements.

Notes 15 and 16 to the financial statements provide further explanation.

Reserves Policy

Reserves Policy

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- ▶ General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

Fundraising Statement

The Public Health Collaboration does conduct fundraising activities. Fundraising is primarily from donations through the website, and, to a lesser extent, delivers fundraising through sponsored events and direct marketing appeals. The charity takes its responsibilities under the Data Protection Act and GDPR very seriously and ensures all activities are conducted in line with best practice guidance issued by the Institute of Fundraising and the Fundraising Regulator.

Risk Management

The Trustees have assessed the major risks to which the Charity is exposed, in particular those relating to the operations and finances of the Charity and are satisfied that systems are in place to mitigate the risks.

Risks considered relate to the current economic climate, external pressures and future fundraising opportunities.

The Trustees have identified that the current risks facing the Public Health Collaboration are:

- ▶ Large food companies resisting attempts to change current dietary guidelines including reversing the sugar tax.
- ▶ Pharmaceutical companies resisting attempts to change current health guidelines on treating Type 2 Diabetes and other metabolic diseases.
- ▶ Rising fuel and energy prices, inflationary pressures and economic recession and their impact on the Charity.
- ▶ Securing long term funding for the future.

Future Plans

Our 2025 conference, *Prevention or Prescription* will take place on 31st May and 1st June in London with world-renowned speakers such as Professor Thomas Seyfried, Dr Isabella Cooper, Dr Eric Westman and Dr Jen Unwin. We look forward to gathering the best minds in metabolic health to explore the critical choices facing our society. And in 2026 we'll be celebrating our 10th anniversary and plan to make it our biggest and brightest event ever. This will take place in London on 16th and 17th May 2026.



SAVE THE DATE
PHC ANNUAL CONFERENCE
31st May & 1st June 2025
The Light, Euston, LONDON

www.PHCuk.org/conference

Lastly, we wanted to explain why we have a financial deficit this year. Unfortunately, toward the end of 2024 it was clear NHS commissioning was significantly decreasing due to budget adjustments and the increased interest in weight-loss injections. To combat this, we have started a self-funding option for people to pay for themselves directly as well as reaching out to employers to explore corporate wellbeing initiatives.

In addition, our aim is to make our app, Elevate, a major source of income for the charity. Plus, we plan to create a pre-recorded version of Liberate to make it more accessible for people whilst being a source of passive-income.

Structure, Governance and Management

Governing document

The charity is controlled by its governing document, a deed of trust and constitutes an unincorporated charity.

Public Health Collaboration is a Charitable Incorporated Organisation, number 1171887 and SC052248.

The charity has a Board of Trustees, who are responsible for the overall governance of the charity and a Scientific Advisory Committee, who ensure that the charity is giving accurate and evidence-based advice, based on the latest scientific research.

The charity recruits new trustees to the board by advertising nationally, interviewing potential candidates and then appointing. Successful candidates

are formally welcomed at the next trustees meeting, following their appointment. Each newly appointed trustee chooses how long they wish to stand for, 2 - 4 years, and can stand for another term.

Strategic decisions are made by the Board of Trustees, with the day-to-day management of the charity delegated to the Director, Sam Feltham.

The charity recruits new members to the Scientific Advisory Committee by identifying gaps in the knowledgebase and asking the current Committee members to recommend relevant professionals. The potential candidates are approached, interviewed and then appointed.

Reference and Administrative Details

Patrons

Steve Bennett
Giancarlo and Katie Caldesi
Ben Calderhead
Tom Redwood
Hannah Sutter

Trustees

Dr J McCormack (resigned 31/5/2024)
Dr D Jehring
O Khwaja
G Phillips
G M Corby
Professor S Fairlie
B Rubin (resigned 31/7/2024)

Scientific Advisory Committee

Dr David Unwin (Chair)
Helen Gowers (Vice Chair)
Dr Joanne McCormack
Dr Ian Lake
Dr Jen Unwin
Dr Trudi Deakin
Dr Campbell Murdoch

	Dr Katharine Morrison (to December 2024)
	Dr Bob Gill (to December 2024)
	Dr Ali Ibrahim
	Dr Abbi Lulseged (to December 2024)
	Dr Kesar Sadhra
	Dr David Jehring (PHC Board representative)
	Ellen Calteau RD (PHC project manager for Liberate)
	Dr Amber Steele (from April 2025)
	Moira Newiss (from April 2025)
	Ally Houston (from April 2025)
Director	Sam Feltham
Registered Charity number	1171887 and SC052248
Principal address	C/O Reed Smith, 1 Blossom Yard, London, E1 6RS
Bankers	HSBC Bank PLC, 23/24 Paddington House, Festival Place, Basingstoke, Hants, RG21 1LJ Wise Bank, The Tea Building, Shoreditch High Street, London, E1 6JJ
Solicitors	Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS
Independent Examiners	Griffin Chartered Accountants, Courtenay House, Pynes Hill, Exeter, EX2 5AZ
Accountant	Merlin Accountancy Services Ltd, 2nd Floor, 33 Longbrook Street, Exeter, Devon, EX4 6AW

Trustees' Responsibility Statement

The trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the

charity and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period. In preparing those financial statements, the trustees are required to

- ▶ select suitable accounting policies and then apply them consistently;
- ▶ observe the methods and principles in the Charity SORP;
- ▶ make judgements and estimates that are reasonable and prudent;
- ▶ prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

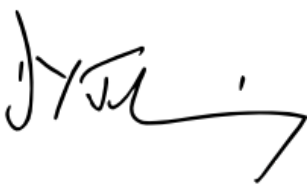
The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the charity and financial information included on the charity's website.

As the charities trustees, we certify that:

- ▶ So far as we are aware, there is no relevant information of which the charities Independent Examiners are unaware, and
- ▶ We have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant information and to establish that the charity's Independent Examiners are aware of that information.

Approved by order of the board of trustees on 5th December 2025 and signed on its behalf by:



.....
Dr D Jehring - Chair



Financial Statements

**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
PUBLIC HEALTH COLLABORATION
FOR THE YEAR ENDED 31 MARCH 2025**

I report to the charity trustees on my examination of the accounts of Public Health Collaboration for the year ended 31 March 2025.

Responsibilities and basis of report

As the Trustees of the Charity you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2022 ('the 2022 Act').

I report in respect of my examination of the Charity's accounts carried out under section 145 of the 2022 Act and in carrying out my examination I have followed the applicable Directions given by the Charity Commission under section 145(5)(b) of the 2022 Act.

Independent examiner's statement

Since the Charity's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2022 Act. I confirm that I am qualified to undertake the examination because I am a member of the Institute of Chartered Accountants in England and Wales, which is one of the listed bodies.

Your attention is drawn to the fact that the Charity has prepared the accounts in accordance with 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) in preference to the Accounting and Reporting by Charities: Statement of Recommended Practice issued on 1 April 2005 which is referred to in the extant regulations but has been withdrawn.

I understand that this has been done in order for the accounts to provide a true and fair view in accordance with the Generally Accepted Accounting Practice effective for reporting periods beginning on or after 1 January 2015.

I have completed my examination. I confirm that no matters, other than those fully detailed below, have come to my attention in connection with the examination giving me reasonable cause to believe that in any material respect:

1. accounting records were not kept in respect of the Charity as required by section 130 of the 2022 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 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.

I confirm that there are no other matters to which your attention should be drawn to enable a proper understanding of the accounts to be reached.

Disclosure section

The matter that has come to my attention is that the charity has made an in year deficit of £84,169, resulting in negative funds at the year-end of £15,167. As such, the charity's ability to operate as a going concern is uncertain as the charity relies heavily on donations and funding which has been reduced. It is understood that the charity has now started self-funding options and exploring other income streams to generate funds.

**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
PUBLIC HEALTH COLLABORATION
FOR THE YEAR ENDED 31 MARCH 2025**

This report is made solely to the Charity's Trustees, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008. My work has been undertaken so that I might state to the Charity's Trustees those matters I am required to state to them in an Independent examiner's report and for no other purpose. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than the Charity and the Charity's Trustees as a body, for my work or for this report.

Laura Waycott
Griffin
Courtenay House,
Pynes Hill,
Exeter,
EX2 5AZ



Signed:

Date: 9/12/25

PUBLIC HEALTH COLLABORATION

**STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31 MARCH 2025**

	Notes	Unrestricted fund £	Restricted fund £	2025 Total funds £	2024 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	2	121,004	2,652	123,656	110,475
Charitable activities					
General incl. Ambassadors	4	3,395	-	3,395	-
The Lifestyle Club		66,709	-	66,709	113,350
Liberate		10,179	-	10,179	(410)
Conference		99,886	-	99,886	66,912
Other trading activities	3	<u>50,449</u>	<u>-</u>	<u>50,449</u>	<u>23,876</u>
Total		<u>351,622</u>	<u>2,652</u>	<u>354,274</u>	<u>314,203</u>
EXPENDITURE ON					
Raising funds	5	16,895	-	16,895	19,758
Charitable activities					
General incl. Ambassadors	6	135,028	-	135,028	113,441
The Lifestyle Club		108,022	26,282	134,304	154,415
Liberate		26,933	-	26,933	25,031
Conference		121,119	-	121,119	42,029
Real Food Rebellion		878	-	878	119
Real Food Runners		-	-	-	24
Other	9	<u>3,286</u>	<u>-</u>	<u>3,286</u>	<u>3,195</u>
Total		<u>412,161</u>	<u>26,282</u>	<u>438,443</u>	<u>358,012</u>
NET INCOME/(EXPENDITURE)					
Transfers between funds	15	(60,539)	(23,630)	(84,169)	(43,809)
		<u>(8,786)</u>	<u>8,786</u>	<u>-</u>	<u>-</u>
Net movement in funds		(69,325)	(14,844)	(84,169)	(43,809)
RECONCILIATION OF FUNDS					
Total funds brought forward		54,158	14,844	69,002	112,811
		<u> </u>	<u> </u>	<u> </u>	<u> </u>
TOTAL FUNDS CARRIED FORWARD		<u><u>(15,167)</u></u>	<u><u>-</u></u>	<u><u>(15,167)</u></u>	<u><u>69,002</u></u>

PUBLIC HEALTH COLLABORATION

**BALANCE SHEET
AS AT 31 MARCH 2025**

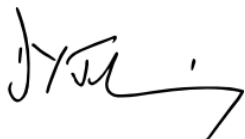
Registered Charity Number: 1171887 and SC052248

	Notes	Unrestricted fund £	Restricted fund £	2025 Total funds £	2024 Total funds £
CURRENT ASSETS					
Debtors	12	15,770	-	15,770	66,192
Cash at bank	13	<u>48,170</u>	<u>-</u>	<u>48,170</u>	<u>101,591</u>
		63,940	-	63,940	167,783
CREDITORS					
Amounts falling due within one year	14	<u>(79,107)</u>	<u>-</u>	<u>(79,107)</u>	<u>(98,781)</u>
NET CURRENT ASSETS/(LIABILITIES)					
		<u>(15,167)</u>	<u>-</u>	<u>(15,167)</u>	<u>69,002</u>
TOTAL ASSETS LESS CURRENT LIABILITIES					
		<u>(15,167)</u>	<u>-</u>	<u>(15,167)</u>	<u>69,002</u>
NET ASSETS					
		<u>(15,167)</u>	<u>-</u>	<u>(15,167)</u>	<u>69,002</u>
FUNDS					
	15				
Unrestricted funds:					
General fund				(15,167)	54,158
Restricted funds:					
TLC - Restricted Fund				<u>-</u>	<u>14,844</u>
TOTAL FUNDS					
				<u>(15,167)</u>	<u>69,002</u>

The financial statements were approved by the Board of Trustees and authorised for issue on

05/12/2025

..... and were signed on its behalf by:



.....
D Jehring - Trustee

PUBLIC HEALTH COLLABORATION
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2025

1. ACCOUNTING POLICIES

Basis of preparing the financial statements

The financial statements have been prepared in accordance with 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 2015) - (Charities SORP FRS 102) and the Charities Act 2011.

In drafting these financial statements, the charity has also takes advantage of the exemptions for smaller charities contained in Charity Commission publication CC17.

Public Health Collaboration meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

The financial statements are presented in pound sterling (£) which is the charity's functional and presentation currency.

Preparation of the financial statements on a going concern basis

Public Health Collaboration reported a net deficit in the reporting period of £84,169, with total funds held at the end of the period of £(15,167).

Public Health Collaboration is reliant on donations and memberships to continue providing their core services. The economic outlook and cuts in public spending, created the above deficit and continues to be a major risk for the charity. To combat this we are developing our current projects which will help secure our future. We have started a self-funding option of our TLC Project for people to pay for themselves directly as well as reaching out to employers to explore corporate wellbeing initiatives. In addition, our aim is to make our app, Elevate, a major source of income for the charity. Plus, we plan to create a pre-recorded version of Liberate to make it more accessible for people whilst being a source of passive-income for the charity.

Despite the deficit in the year the forecasts for 2025-2026 are predicting a surplus of £32,195. Since the year end the charity has been awarded a grant of £125,682 from the Nutritional Wellbeing Fund, to help deliver the Real Food Rebellion project for the academic years 25/26 to 27/28. As a result the trustees are of the view that the charity is a going concern.

Income

Donations and memberships are recognised in the financial statements on the date they are received.

Income from other trading activities, fundraising and charitable activities is included in the period in which it relates.

Grants, whether they are of a general nature or for a specific purposed, are recognised as a charitable activity and recorded at the date received.

Expenditure

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with use of resources.

- Costs of generating funds are those costs incurred in attracting donations, and those incurred in trading activities that raise funds.
- Charitable activities include charitable distributions and the costs involved in the provision of services that the Public Health Collaboration provides.
- Governance costs include those incurred in the governance of the charity and its assets and are primarily associated with constitutional and statutory requirements.

PUBLIC HEALTH COLLABORATION

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 MARCH 2025

Resources expended include attributable VAT which cannot be recovered.

Debtors

Trade and other debtors are recognised at the settlement account due. Prepayments are valued at the amount prepaid.

Creditors and Provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

Financial instruments

Public Health Collaboration only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

- Financial assets, includes trade receivables, cash and balances and investments are recognised at transaction value.
- Financial liabilities, includes trade payables and recognised at transaction value. Trade payables are obligations to pay for goods and services required from suppliers in the course of business activities.

Taxation

Under section 505 ICTA 1988 the charity is exempt from certain taxes. Full account is taken of tax credits attaching to gifts and qualifying donations. Public Health Collaboration has charitable status and is exempt from Income Tax on income it receives.

Fund accounting

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

Cash at bank and in hand

Cash at bank represents the current accounts in use by the charity for day to day activities. The charity doesn't have any short or long term investment accounts, and doesn't hold any cash in hand.

Pension costs and other post-retirement benefits

The charity operates a defined contribution pension scheme. Contributions payable to the charity's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2025**

2. DONATIONS AND LEGACIES

	Unrestricted funds £	Restricted funds £	2025 Total funds £	2024 Total funds £
Donations	<u>121,004</u>	<u>2,652</u>	<u>123,656</u>	<u>110,475</u>
	<u>121,004</u>	<u>2,652</u>	<u>123,656</u>	<u>110,475</u>

3. OTHER TRADING ACTIVITIES

	Unrestricted funds £	Restricted funds £	2025 Total funds £	2024 Total funds £
Fundraising events	22,031	-	22,031	131
Memberships	23,205	-	23,205	19,320
Books	2,205	-	2,205	2,069
Advertising revenue	2,528	-	2,528	2,255
Merchandise	<u>480</u>	<u>-</u>	<u>480</u>	<u>101</u>
	<u>50,449</u>	<u>-</u>	<u>50,449</u>	<u>23,876</u>

4. INCOME FROM CHARITABLE ACTIVITIES

	2025 £	2024 £
Activity	£	£
General incl. Ambassadors	3,395	-
The Lifestyle Club	66,709	113,350
Liberate	10,179	(410)
Conference	99,886	66,912
	<u>180,169</u>	<u>179,852</u>

5. RAISING FUNDS

Raising donations and legacies

	Unrestricted funds £	Restricted funds £	2025 Total funds £	2024 Total funds £
Sundries	5,295	-	5,295	6,318
Merchandise	2,426	-	2,426	2,721
Other events	<u>9,174</u>	<u>-</u>	<u>9,174</u>	<u>10,719</u>
	<u>16,895</u>	<u>-</u>	<u>16,895</u>	<u>19,758</u>

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2025**

6. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 7) £	Support costs (see note 8) £	Totals £
General incl. Ambassadors	122,333	12,695	135,028
The Lifestyle Club	108,318	25,986	134,304
Liberate	26,700	233	26,933
Conference	119,452	1,667	121,119
Real Food Rebellion	878	-	878
	<u>377,681</u>	<u>40,581</u>	<u>418,262</u>

7. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2025 £	2024 £
Staff costs	182,076	140,960
Insurance	3,806	2,410
Telephone	130	20
Printing, postage and stationery	13,253	11,018
Advertising	12,722	19,155
Sundries	395	242
Computer costs	10,148	23,657
Travel & accommodation	3,306	2,932
Training	7,739	4,382
Professional fees	35,938	47,215
Hire of venue	<u>108,168</u>	<u>42,029</u>
	<u>377,681</u>	<u>294,020</u>

8. SUPPORT COSTS – Governance Costs

	2025 £	2024 £
General incl. Ambassadors	12,695	9,681
The Lifestyle Club	25,986	31,189
Liberate	233	169
Conference	<u>1,667</u>	<u>-</u>
	<u>40,581</u>	<u>41,039</u>

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2025**

9. OTHER

	Unrestricted funds £	Restricted funds £	2025 Total funds £	2024 Total funds £
Bank charges	3,286	-	3,286	3,195
Support costs	<u>16,335</u>	<u>24,246</u>	<u>40,581</u>	<u>41,039</u>
	<u>19,621</u>	<u>24,246</u>	<u>43,867</u>	<u>44,234</u>

10. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 March 2025 nor for the year ended 31 March 2024, except as described in note 18.

Trustees' expenses

Expenses were paid to 2 trustees to cover travel expenses for trustee meetings.

	2025 £	2024 £
Trustees' expenses	<u>179</u>	<u>1,963</u>

11. STAFF COSTS

	2025 £	2024 £
Wages and salaries	168,161	130,662
Social security costs	10,399	7,429
Other pension costs	<u>3,516</u>	<u>2,869</u>
	<u>182,076</u>	<u>140,960</u>

The average monthly number of employees during the year was as follows:

	2025	2024
	<u>6.9</u>	<u>4.5</u>

No employees received emoluments in excess of £60,000.

12. MOVEMENT IN TOTAL FUNDS FOR THE YEAR

	2025 £	2024 £
This is stated after charging:		
Independent Examiners Fee	1,080	1,140

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2025**

13. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025	2024
	£	£
Trade debtors	-	6,000
Prepayments	<u>15,770</u>	<u>60,192</u>
	<u>15,770</u>	<u>66,192</u>

14. CASH AT BANK

	2025	2024
	Total funds £	Total funds £
HSBC - main account	45,780	98,995
Paypal	606	500
Stripe	1,670	2,039
Wise - \$	-	2
Wise GBP	<u>114</u>	<u>55</u>
Total	<u>48,170</u>	<u>101,591</u>

15. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025	2024
	£	£
Trade creditors	26,497	24,394
Social security and other taxes	9,126	-
Other creditors	680	645
Accruals and deferred income	<u>42,804</u>	<u>73,742</u>
	<u>79,107</u>	<u>98,781</u>

Deferred Income Reconciliation

Balance as at 01 April 2024	Income Deferred in Current Year	Amounts Released to SOFA (as income)	Balance as at 31 March 2025
£	£	£	£
66,936	37,418	(66,936)	37,418

The deferred income is in relation to the annual conference. Tickets are purchased ahead of the conference which happened in May 2025, and recognised as income at this point.

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2025**

16. MOVEMENT IN FUNDS

	As at 01 April 2024 £	Income £	Expenditure £	Transfers £	As at 31 March 2025 £
General Fund	54,158	351,622	412,161	(8,786)	(15,167)
Restricted Fund	14,844	2,652	26,282	8,786	-
Total Funds	69,002	354,274	438,443	-	(15,167)

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds. The restricted funds are broken down as follows:

- The Lifestyle Club - Our type 2 diabetes remission coaching service, that helps people reverse their diagnosis through dietary changes.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

17. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	General Fund	Restricted Fund	Total Funds As at 31 March 2025 £	Total Funds As at 31 March 2024 £
Current Assets	63,940	-	63,940	167,783
Current Liabilities	(79,107)	-	(79,107)	(98,781)
Net assets	(15,167)	-	(15,167)	69,002

18. RELATED PARTY DISCLOSURES

Other than the following, no trustee or connected person has received fees or emoluments, during the year.

Merlin Accountancy Services Ltd

A company owned by Giles Corby, a trustee and treasurer of the Public Health Collaboration since April 2022.

PUBLIC HEALTH COLLABORATION

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 MARCH 2025

During the year donations of £585 were received by the charity and during the year £3,953 was paid to them for bookkeeping and accounts work.

	2024	2023
	£	£
Amount due to related party at the balance sheet date	- =====	- =====

Mindset Matters

A company owned by Susan Fairlie, a trustee of the Public Health Collaboration since April 2022.

During the year payments of £1,260 were paid to the for being a Health Coach within The Lifestyle Club Project. There was no amount due at the balance sheet date.

Olivia Khwaja

Olivia Khwaja, a trustee of the Public Health Collaboration since April 2022.

During the year £4,675 was paid to them for marketing and social media services. There was no amount due at the balance sheet date.

19. EMPLOYEE BENEFIT OBLIGATIONS

The charity operates a defined contribution pension scheme. The pension cost charge for the year represents contributions payable by the charity to the scheme and amounted to £3,516 (March 2024 £2,869). The amount outstanding at the end year was £680 (March 2024 £645).

PUBLIC HEALTH COLLABORATION

England & Wales - Charity number 1171887

Accounts

REGISTERED CHARITY NUMBER: 1171887 and SC052248

**REPORT OF THE TRUSTEES AND
UNAUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024
FOR
PUBLIC HEALTH COLLABORATION**

PUBLIC HEALTH COLLABORATION
CONTENTS OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

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Notes to the Financial Statements	12 to 19

PUBLIC HEALTH COLLABORATION

REPORT OF THE TRUSTEES FOR THE YEAR ENDED 31 MARCH 2024

The trustees present their report with the financial statements of the charity for the year ended 31 March 2024. The trustees have adopted the provisions of 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

To advance physical, mental and social well-being among members of the public and healthcare professionals by contributing to the improvement of their level of knowledge, understanding and best practices concerning lifestyle and metabolic health.

Vision, Mission and Ambitions

Our vision is a society where everyone enjoys good metabolic health.

Our mission is to empower, inspire and educate people that most chronic diseases can be prevented and reversed by maintaining good metabolic health through sustainable lifestyle changes.

The values by which we work are:

- Ambitious - We have a strong desire and determination to create the change we want to see.
- Attentive - We listen to everyone with care and attention.
- Compassionate - We appreciate everyone's perspective and will do our best to support them.
- Inquisitive - We like to ask questions and are always eager to learn.
- Proactive - We like to take action and create the change we want to see.
- Sincere - We genuinely want humanity to become healthier and happier.

Our ambitions are to:

1. Reverse the type 2 diabetes and prediabetes epidemic.
2. Have food addiction recognised as an official diagnosis.
3. Undo the childhood obesity crisis.

We will achieve these ambitions by delivering high-quality projects, collaborating with universities to conduct robust research and advocating for the changes we want to see. Through this process our hope is that we will build a society where everyone enjoys good metabolic health.

Public benefit

The trustees have referred to the guidance contained in the Charity Commissions general guidance on public benefit whilst reviewing the Public Health Collaboration's mission, vision and objectives, and in planning the future activities of the charity.

ACHIEVEMENT AND PERFORMANCE

New Beginnings

Marked by important leadership changes and the introduction of new expertise to our advisory board, the past year has been one of significant transformation and growth for the Public Health Collaboration.

This year, it was with delight to welcome Dr Kesar Sadhra to our Scientific Advisory Committee (SAC). With an extensive background as a GP partner in Slough since 1989, Dr Sadhra brings a wealth of experience in advocating for lifestyle changes to improve health outcomes. His dedication over nearly two decades to promoting healthier lifestyles aligns perfectly with our vision, and we are confident his insights will greatly benefit our ambitions and stakeholders.



PUBLIC HEALTH COLLABORATION

REPORT OF THE TRUSTEES FOR THE YEAR ENDED 31 MARCH 2024



After many years of exemplary leadership, Dr Joanne McCormack decided to step down as the Chair of Trustees. We extend our heartfelt gratitude to Dr McCormack for her invaluable contributions and unwavering commitment to our cause. And as one door closes, another opens. With that in mind, we are honoured that our new Chair of Trustees is Dr David Jehring. Dr Jehring brings a robust background in organisational leadership and a profound commitment to our vision, mission and values. His appointment marks the beginning of a new exciting chapter for the

Public Health Collaboration. We look forward to his guidance as we continue to grow and expand our impact.



Raising Awareness

Raising public awareness about our ambitions has been a key focus this year, with various initiatives designed to educate and engage the public and healthcare professionals on preventable chronic diseases through sustainable lifestyle changes.

Dr David Unwin in The Guardian

A significant highlight was the feature in The Guardian titled "British Doctor Pioneers Low-Carb Diet as Cure for Obesity and Type 2 Diabetes". This article brought widespread attention to the work of Dr David Unwin, Chair of our Scientific Advisory Committee. It presented the innovative approaches we advocate for to manage and reverse type 2 diabetes.



Real Food Lifestyle Course & Support Group

We successfully launched our Real Food Lifestyle Course & Support Group, aimed at providing information and support for individuals seeking to adopt healthier lifestyle changes. Created and presented by our brilliant Volunteer Manager, Elizabeth LePla, the 8-session course that is freely available on YouTube, has been very well-received. Participant feedback indicates significantly positive changes in their lifestyle and overall health.

Inspiring Real Food Success Stories

To go alongside our Real food Lifestyle Course & Support Group was a short YouTube video of real food success stories. This helps inspire people who have gone through the course and attend the support group to see that they can do it too.

Randomised Controlled Trials (RCT) Update

Our evidence base continues to grow with 71 RCTs now comparing low-carb and low-fat diets. Notably, 62 of these trials show greater weight loss with a low-carb diet, with 39 showing significantly greater weight loss compared to low-fat diets. Additionally, in 22 trials involving participants with type 2 diabetes, 20 showed a greater reduction in HbA1c levels in the low-carb groups, with 15 demonstrating significantly greater reductions.



Diabetes Professional Care Conference 2023

We had a strong presence at the Diabetes Professional Care Conference, where multiple speakers highlighted our efforts, including an engaging "sugar game" activity that drew significant interest from attendees. Presentation topics included continuous glucose monitors with Dr David Unwin, patient activation with Helen Gowers RD and sport in type 1 diabetes with Dr Ian Lake.

PUBLIC HEALTH COLLABORATION

REPORT OF THE TRUSTEES FOR THE YEAR ENDED 31 MARCH 2024

Creative Outreach and Engagement

Our creative outreach efforts included the design and sale of Christmas cards by our new Administrator, Sarah James. These cards not only spread holiday cheer but also helped raise funds for our ongoing projects.



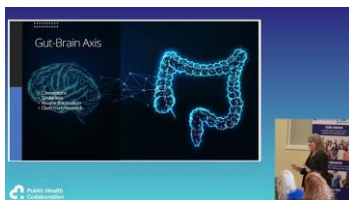
Conference 2023 - Crucible, Sheffield



With over 400 delegates attending in person and 200 watching online, our 2023 conference, held at the Crucible in Sheffield, was a resounding success. Featuring world-class speakers such as Prof Ben Bikman and Olympic athletes such as James Cracknell, we were delighted with how the conference went.

Also, at the conference we revealed our vision, mission, values and ambitions. Our vision is to help cultivate a society where everyone enjoys good metabolic

health. Our mission is to empower, inspire and educate people that most chronic diseases can be prevented and reversed by maintaining good metabolic health through sustainable lifestyle changes. Our values are to be ambitious, attentive, compassionate, inquisitive, proactive and sincere. Lastly, our ambitions are to reverse the type 2 diabetes and prediabetes epidemics, get food addiction recognised as an official diagnosis and undo the childhood obesity crisis. We plan to achieve all of this by delivering high-quality projects, collaborating with universities to conduct robust research and advocating for the changes we want to see.



PHC Scotland 2023

Our first ever event in Scotland in March 2023, titled "Unleashing the Power of Nutrition," attracted significant attention and fostered meaningful discussions about the role of nutrition in public health. Videos from the event were published in April, providing valuable resources for those who could not attend in person.

Our Projects

Our projects this year have focused on advancing our mission through innovative research, community engagement, and partnerships aimed at creating sustainable lifestyle changes.

Ambassadors Programme

Our Ambassadors programme continues to achieve remarkable results. Such as Sheila Docker's and Helen Ritchie's lifestyle group, which has seen impressive outcomes in promoting healthier living in Maidenhead.



"LIFE CHANGING"
Season 5 - Make A Change
Cedars GP Surgery, Maidenhead

Maidenhead Rotary Club | Public Health Collaborations | The Prince Philip Trust Fund



The Lifestyle Club

Our type 2 diabetes remission coaching service, The Lifestyle Club launched a crowdfunding campaign at this year's conference. Working in partnership with the University of Surrey, the study will be following participants for 6 months, tracking markers such as weight, waist circumference and HbA1c. With that in mind a special thank you must go to everyone who has donated to the study. Especially the Baszucki Group who set up a very generous £20,000 match funding pot.

In addition to this great success, The Lifestyle Club has also garnered tremendous recognition, with nominations for the HSJ Awards in 3 categories. Plus, we were honoured to receive the Silver Award for Primary Care Project of the Year - congratulations to the whole TLC Team!

PUBLIC HEALTH COLLABORATION
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2024

Liberate Launches

This year sees the launch of a new PHC project called Liberate. This service aims to address the growing concern of ultra-processed food addiction, and we've already started the ball rolling with an 8-week pilot course that is yet to finish within this financial year.



Real Food Rebellion

Another new and exciting project we've launched this year is the Real Food Rebellion. A schools-based programme aiming to serve both primary and secondary schools, Real Food Rebellion is dedicated to educating and empowering children and young people to make healthier food choices. In April 2024, two schools in Doncaster will be piloting the programme.

Real Food Runners

Real Food Runners continues to be an incredible initiative with over 100 members having joined the parkrun group. It's been great to see so many people engage with more exercise and take the run at their own pace.



FINANCIAL REVIEW

Total incoming resources for the year to 31 March 2024 amounted to £314,203 (year ended 31 March 2023 £313,279). Unrestricted funds incoming resources amounted to £268,565 (year ended 31 March 2023 £313,279). Restricted funds incoming resources amounted to £45,638 (year ended 31 March 2023 £nil).

Total resources expended for the year to 31 March 2024 amounted to £358,012 (year ended 31 March 2023 £295,379). Unrestricted funds expenditure amounted to £327,218 (year ended 31 March 2023 £295,381). Restricted funds expenditure amounted to £30,794 (year ended 31 March 2023 £nil).

The Charity had £54,158 (year ended 31 March 2023 £112,811) in its general fund at the year ended 31 March 2024, and £14,844 (year ended 31 March 2024 £nil) in its restricted fund at the year end 31 March 2024.

As at 31 March 2024, cash at bank and in hand held by the charity was £101,591 (31 March 2023 £88,008), with a healthy total net current assets figure of £69,002 (31 March 2023 £112,811).

The purposes of the different types of funds are explained in the accounting policies as shown in the financial statements.

Notes 17 and 18 to the financial statements provide further explanation.

PUBLIC HEALTH COLLABORATION
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2024

Reserves policy

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

Fundraising Statement

The Public Health Collaboration does conduct fundraising activities. Fundraising is primarily from donations through the website, and, to a lesser extent, delivers fundraising through sponsored events and direct marketing appeals. The charity takes its responsibilities under the Data Protection Act and GDPR very seriously and ensures all activities are conducted in line with best practice guidance issued by the Institute of Fundraising and the Fundraising Regulator.

Risk Management

The Trustees have assessed the major risks to which the Charity is exposed, in particular those relating to the operations and finances of the Charity and are satisfied that systems are in place to mitigate the risks.

Risks considered relate to the current economic climate, external pressures and future fundraising opportunities.

The Trustees have identified that the current risks facing the Public Health Collaboration are:

- Large food companies resisting attempts to change current dietary guidelines including reversing the sugar tax.
- Pharmaceutical companies resisting attempts to change current health guidelines on treating Type 2 Diabetes and other metabolic diseases.
- Rising fuel and energy prices, inflationary pressures and economic recession and their impact on the Charity.
- Securing long term funding for the future.

FUTURE PLANS

As we look to the future, our plans are centred on expanding our reach, enhancing our projects, and continuing to advocate for sustainable lifestyle changes through evidence-based approaches.

Conference 2024 Announcement

We are thrilled to announce that our next conference will be held on the 18th and 19th of May 2024 at Fairfield Halls, London. Tickets went on sale on 24th January 2024, and we are planning an exciting lineup of speakers and interactive workshops aimed at turning ideas into action.



Expanding Team PHC

To support our growing ambitions, this year we have employed a much needed and most welcomed Administrator, Sarah James. She has been a fantastic addition to the team and now we are on the lookout for a Social Media Manager to help promote all of our efforts.

PUBLIC HEALTH COLLABORATION
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2024

STRUCTURE, GOVERNANCE AND MANAGEMENT

The charity is controlled by its governing document, a deed of trust and constitutes an unincorporated charity.

Public Health Collaboration is a Charitable Incorporated Organisation, number 1171887 and SC052248.

The charity has a Board of Trustees, who are responsible for the overall governance of the charity and a Scientific Advisory Committee, who ensure that the charity is giving accurate and evidence-based advice, based on the latest scientific research.

The charity recruits new trustees to the board by advertising nationally, interviewing potential candidates and then appointing. Successful candidates are formally welcomed at the next trustees meeting, following their appointment. Each newly appointed trustee chooses how long they wish to stand for, 3 years, and can stand for another term.

Strategic decisions are made by the Board of Trustees, with the day-to-day management of the charity delegated to the Director, Sam Feltham.

The charity recruits new members to the Scientific Advisory Committee by identifying gaps in the knowledgebase and asking the current Committee members to recommend relevant professionals. The potential candidates are approached, interviewed and then appointed.

REFERENCE AND ADMINISTRATIVE DETAILS

Patrons

Steve Bennett
Giancarlo and Katie Caldesi
James Goolnik BDS MSc (from October 2023)
Hannah Sutter

Trustees

Dr David Jehring (Chair)
Olivia Khwaja (Co Vice Chair)
Graham Phillips FRPharmS (Co Vice Chair)
Giles M Corby FCA (Treasurer)
Dr Joanna McCormack (resigned 31/5/2024)
Ellen Calteau RD (resigned 31/1/2024)
Professor Susan Fairlie RN, BSc (Hons), MSc
Tina Oldham (appointed 19/08/2024)
Benjamin Rubin (resigned 31/7/2024)
Paul Whittle (resigned 29/2/2024)
Lesley Adams (resigned 31/7/2023)
James Capon (resigned 31/5/2023)

Scientific Advisory Committee

Dr David Unwin (Chair)
Dr Joanne McCormack
Dr Ian Lake
Dr Jen Unwin
Dr Trudi Deakin
Dr Campbell Murdoch
Dr Katharine Morrison
Dr Bob Gill
Dr Ali Ibrahim
Dr Abbi Lulsegged
Dr Kesar Sadhra
Dr David Jehring (PHC Board representative)
Ellen Calteau RD (PHC project manager for Liberate)
Helen Gowers (PHC project manager for The Lifestyle Club)

PUBLIC HEALTH COLLABORATION
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2024

Director	Sam Feltham
Registered Charity number	1171887 and SC052248
Principal address	C/O Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS
Bankers	HSBC Bank PLC, 23/24 Paddington House, Festival Place, Basingstoke, Hants, RG21 1LJ Wise Bank, The Tea Building, Shoreditch High Street, London, E1 6JJ
Solicitors	Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS
Independent Examiner	Griffin Chartered Accountants, Courtenay House, Pynes Hill, Exeter, EX2 5AZ
Accountant	Merlin Accountancy Services Ltd, 2 nd Floor, 33 Longbrook Street, Exeter, Devon, EX4 6AW

PUBLIC HEALTH COLLABORATION
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2024

TRUSTEES' RESPONSIBILITY STATEMENT

The trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period. In preparing those financial statements, the trustees are required to

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charity SORP;
- make judgements and estimates that are reasonable and prudent;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business.

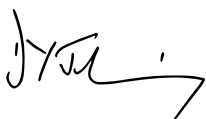
The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the charity and financial information included on the charity's website.

As the charities trustees, we certify that:

- So far as we are aware, there is no relevant information of which the charities Independent Examiners are unaware, and
- We have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant information and to establish that the charity's Independent Examiners are aware of that information.

Approved by order of the board of trustees on 13th December 2024 and signed on its behalf by:



.....
Dr D Jehring - Chair

**INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
PUBLIC HEALTH COLLABORATION
FOR THE YEAR ENDED 31 MARCH 2024**

I report to the charity trustees on my examination of the accounts of Public Health Collaboration (the Trust) for the year ended 31 March 2024.

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;
- To follow the procedures laid down in the General Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
- To state whether particular matters have come to my attention.

Basis of Independent Examiner's Report

My examination was carried out in accordance with the General Directions given by 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 the 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 and the report is limited to these matters set out in the statement below.

Independent Examiner's Statement

In the course of my examination, no matter has come to my attention:

1. which gives me reasonable cause to believe that, in any material respect, the trustees have not met the requirements to ensure that:
 - proper accounting records are kept in accordance with section 130 of the 2011 Act; and
 - accounts are prepared which agree with the accounting records and comply with the accounting requirements of the 2011 or
2. to which in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

Laura Waycott
Griffin
Courtenay House,
Pynes Hill,
Exeter,
EX2 5AZ

Signed: .



Date: ...17/12/24.....

PUBLIC HEALTH COLLABORATION

**STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31 MARCH 2024**

	Notes	Unrestricted fund £	Restricted fund £	2024 Total funds £	2023 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies	3	64,837	45,638	110,475	179,531
Charitable activities					
The Lifestyle Club	5	113,350	-	113,350	42,200
Liberate		(410)	-	(410)	19,900
Conference		66,912	-	66,912	35,601
Other trading activities	4	<u>23,876</u>	<u>-</u>	<u>23,876</u>	<u>36,047</u>
Total		<u>268,565</u>	<u>45,638</u>	<u>314,203</u>	<u>313,279</u>
EXPENDITURE ON					
Raising funds	6	19,696	62	19,758	17,971
Charitable activities					
General incl. Ambassadors	7	113,441	-	113,441	127,039
The Lifestyle Club		123,683	30,732	154,415	80,751
Liberate		25,031	-	25,031	15,313
Conference		42,029	-	42,029	52,588
Real Food Rebellion		119	-	119	-
Real Food Runners		24	-	24	-
Other	10	<u>3,195</u>	<u>-</u>	<u>3,195</u>	<u>1,717</u>
Total		<u>327,218</u>	<u>30,794</u>	<u>358,012</u>	<u>295,379</u>
NET INCOME/(EXPENDITURE)		(58,653)	14,844	(43,809)	17,900
RECONCILIATION OF FUNDS					
Total funds brought forward at 1 st April 2023		<u>112,811</u>	<u>-</u>	<u>112,811</u>	<u>94,911</u>
TOTAL FUNDS CARRIED FORWARD at 31st March 2024		<u><u>54,158</u></u>	<u><u>14,844</u></u>	<u><u>69,002</u></u>	<u><u>112,811</u></u>

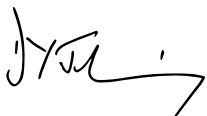
PUBLIC HEALTH COLLABORATION

**BALANCE SHEET
AS AT 31 MARCH 2024**

Registered Charity Number: 1171887 and SC052248

	Notes	Unrestricted fund £	Restricted fund £	2024 Total funds £	2023 Total funds £
CURRENT ASSETS					
Debtors	14	63,816	2,376	66,192	80,315
Cash at bank	15	<u>89,123</u>	<u>12,468</u>	<u>101,591</u>	<u>88,008</u>
		152,939	14,844	167,783	168,323
CREDITORS					
Amounts falling due within one year	16	(98,781)	-	(98,781)	(55,512)
		<u>54,158</u>	<u>14,844</u>	<u>69,002</u>	<u>112,811</u>
NET CURRENT ASSETS					
		<u>54,158</u>	<u>14,844</u>	<u>69,002</u>	<u>112,811</u>
TOTAL ASSETS LESS CURRENT LIABILITIES					
		<u>54,158</u>	<u>14,844</u>	<u>69,002</u>	<u>112,811</u>
NET ASSETS					
		<u>54,158</u>	<u>14,844</u>	<u>69,002</u>	<u>112,811</u>
FUNDS					
	17				
Unrestricted funds:					
General fund				54,158	112,811
Restricted funds:					
TLC - Restricted Fund				<u>14,844</u>	-
TOTAL FUNDS					
				<u>69,002</u>	<u>112,811</u>

The financial statements were approved by the Board of Trustees and authorised for issue on 13th December 2024 and were signed on its behalf by:



.....
D Jehring - Chair

PUBLIC HEALTH COLLABORATION

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2024

1. CHARITY STATUS

The charity is a Charitable Incorporated Organisation (CIO) and has no share capital and is registered in England and Wales, and Scotland. The CIO was registered on 17th March 2017 in England and Wales, and on 12th January 2023 in Scotland, and the CIO's registered number and registered office address can be found within the Reference and Administration details on page 6 - 7 of the financial statements.

2. ACCOUNTING POLICIES

a) Basis of preparing the financial statements

The financial statements have been prepared in accordance with 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 2015) - (Charities SORP FRS 102) and the Charities Act 2011.

In drafting these financial statements, the charity has also takes advantage of the exemptions for smaller charities contained in Charity Commission publication CC17.

Public Health Collaboration meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

The financial statements are presented in pound sterling (£) which is the charity's functional and presentation currency.

b) Preparation of the financial statements on a going concern basis

Public Health Collaboration reported a net deficit in the reporting period of £43,809, with total funds held at the end of the period of £69,002.

The trustees are of the view that, on the above basis, the charity is a going concern.

Public Health Collaboration is reliant on donations and memberships to continue providing their core services. The economic outlook and cuts in public spending, are a potential area of financial uncertainty for the charity.

c) Income

Donations and memberships are recognised in the financial statements on the date they are received.

Income from other trading activities, fundraising and charitable activities is included in the period in which it relates.

Grants, whether they are of a general nature or for a specific purpose, are recognised as a charitable activity and recorded at the date received.

PUBLIC HEALTH COLLABORATION

NOTES TO THE FINANCIAL STATEMENTS - continued FOR THE YEAR ENDED 31 MARCH 2024

2. ACCOUNTING POLICIES - continued

d) Expenditure

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with use of resources.

- Costs of generating funds are those costs incurred in attracting donations, and those incurred in trading activities that raise funds.
- Charitable activities include charitable distributions and the costs involved in the provision of services that the Public Health Collaboration provides.
- Governance costs include those incurred in the governance of the charity and its assets and are primarily associated with constitutional and statutory requirements.

Resources expended include attributable VAT which cannot be recovered.

e) Taxation

Under section 505 ICTA 1988 the charity is exempt from certain taxes. Full account is taken of tax credits attaching to gifts and qualifying donations. Public Health Collaboration has charitable status and is exempt from Income Tax on income it receives.

f) Debtors

Trade and other debtors are recognised at the settlement account due. Prepayments are valued at the amount prepaid.

g) Creditors and Provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

h) Financial instruments

Public Health Collaboration only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

- Financial assets, includes trade receivables, cash and balances and investments are recognised at transaction value.
- Financial liabilities, includes trade payables and recognised at transaction value. Trade payables are obligations to pay for goods and services required from suppliers in the course of business activities.

i) Fund accounting

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources.

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2024**

j) Pension costs and other post-retirement benefits

The charity operates a defined contribution pension scheme. Contributions payable to the charity's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

3. DONATIONS AND LEGACIES

	Unrestricted funds £	Restricted funds £	2024 Total funds £	2023 Total funds £
Donations	<u>64,837</u>	<u>45,638</u>	<u>110,475</u>	<u>179,533</u>
	<u>64,837</u>	<u>45,638</u>	<u>110,475</u>	<u>179,533</u>

4. OTHER TRADING ACTIVITIES

	Unrestricted funds £	Restricted funds £	2024 Total funds £	2023 Total funds £
Fundraising events	131	-	131	16,696
Memberships	19,320	-	19,320	15,480
Books	2,069	-	2,069	3,871
Advertising revenue	2,255	-	2,255	-
Merchandise	<u>101</u>	<u>-</u>	<u>101</u>	<u>-</u>
	<u>23,876</u>	<u>-</u>	<u>23,876</u>	<u>36,047</u>

5. INCOME FROM CHARITABLE ACTIVITIES

Activity	2024 £	2023 £
The Lifestyle Club	113,350	42,200
Liberate	(410)	19,900
Conference	<u>66,912</u>	<u>35,601</u>
	<u>179,852</u>	<u>97,701</u>

6. RAISING FUNDS

	Unrestricted funds £	Restricted funds £	2024 Total funds £	2023 Total funds £
Sundries	6,318	-	6,318	725
Merchandise	2,721	-	2,721	1,837
Other events	<u>10,657</u>	<u>62</u>	<u>10,719</u>	<u>15,409</u>
	<u>19,696</u>	<u>62</u>	<u>19,758</u>	<u>17,971</u>

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2024**

7. CHARITABLE ACTIVITIES COSTS

	Direct Costs (see note 8) £	Support costs (see note 9) £	Totals £
General incl. Ambassadors	103,760	9,681	113,441
The Lifestyle Club	123,226	31,189	154,415
Liberate	24,862	169	25,031
Conference	42,029	-	42,029
Real Food Rebellion	119	-	119
Real Food Runners	24	-	24
	<u>294,020</u>	<u>41,039</u>	<u>335,059</u>

8. DIRECT COSTS OF CHARITABLE ACTIVITIES

	2024 £	2023 £
Staff costs	140,960	117,074
Insurance	2,410	1,590
Telephone	20	327
Printing, postage and stationery	11,018	13,631
Advertising	19,155	13,558
Sundries	242	17
Computer costs	23,657	8,627
Travel & accommodation	2,932	1,914
Training	4,382	12,801
Professional fees	47,215	24,791
Hire of venue	42,029	51,550
	<u>294,020</u>	<u>245,880</u>

9. SUPPORT COSTS

	2024 £	2023 £
General incl. Ambassadors	9,681	17,666
The Lifestyle Club	31,189	13,422
Liberate	169	12,163
	<u>41,039</u>	<u>43,251</u>

10. OTHER

	Unrestricted funds £	Restricted funds £	2024 Total funds £	2023 Total funds £
Interest payable and similar charges	<u>3,195</u>	<u>-</u>	<u>3,195</u>	<u>1,717</u>

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2024**

11. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 March 2024 nor for the year ended 31 March 2023, except as described in note 19.

Trustees' expenses

	2024	2023
	£	£
Trustees' expenses	<u>1,963</u>	<u>1,187</u>

12. STAFF COSTS

	2024	2023
	£	£
Wages and salaries	130,662	92,908
Social security costs	7,429	5,059
Other pension costs	<u>2,869</u>	<u>19,107</u>
	<u>140,960</u>	<u>117,074</u>

The staff costs relate to the salaries paid to the full time Director, Project Managers and Administration.

The Key Management Personnel of Public Health Collaboration is the Director. The total employee benefits paid to them in the year were:

	2024	2023
	£	£
Wages and salaries	45,000	45,000
Social security costs	4,955	3,550
Other pension costs	1,163	1,163

The average monthly number of employees during the year was as follows:

	2024	2023
Average Employee Numbers	<u>4.5</u>	<u>3.2</u>

No employees received emoluments in excess of £60,000.

In addition to employees, the charity has a number of unpaid voluntary workers.

13. MOVEMENT IN TOTAL FUNDS FOR THE YEAR

This is stated after charging:	2024	2023
	£	£
Independent Examiners Fee	1,140	150

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2024**

14. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2024	2023
	£	£
Trade debtors	6,000	4,500
SS & Other Taxes	-	442
Prepayments	<u>60,192</u>	<u>75,373</u>
	<u>66,192</u>	<u>80,315</u>

15. CASH AT BANK

	2024	2023		
	General fund £	TLC - Restricted Fund £	Total funds £	Total funds £
HSBC - main account	86,527	12,468	98,995	83,487
Paypal	500	-	500	715
Stripe	2,039	-	2,039	3,742
Wise - \$	2	-	2	0
Wise GBP	<u>55</u>	<u>-</u>	<u>55</u>	<u>64</u>
Total	<u>89,123</u>	<u>12,468</u>	<u>101,591</u>	<u>88,008</u>

16. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2024	2023
	£	£
Trade creditors	24,394	16,147
Other creditors	645	226
Accruals and deferred income	<u>73,742</u>	<u>39,139</u>
	<u>98,781</u>	<u>55,512</u>

17. MOVEMENT IN FUNDS

	As at 01 April 2023 £	Income £	Expenditure £	As at 31 March 2024 £
General Fund	112,811	268,565	327,218	54,158
Restricted Fund	-	45,638	30,794	14,844
	<u>112,811</u>	<u>314,203</u>	<u>358,012</u>	<u>69,002</u>
Total Funds	<u>112,811</u>	<u>314,203</u>	<u>358,012</u>	<u>69,002</u>

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2024**

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds. The restricted funds are broken down as follows:

- The Lifestyle Club - Our type 2 diabetes remission coaching service, that helps people reverse their diagnosis through dietary changes.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

18. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	General Fund	Restricted Fund	Total Funds As at 31 March 2024 £	Total Funds As at 31 March 2023 £
Current Assets	152,939	14,844	167,783	168,323
Current Liabilities	(98,781)	-	(98,781)	(55,513)
<hr/>				
Net assets	54,158	14,844	69,002	112,810
<hr/>				

19. RELATED PARTY DISCLOSURES

Other than the following, no trustee or connected person has received fees or emoluments, during the year.

Merlin Accountancy Services Ltd

A company owned by Giles Corby, a trustee and treasurer of the Public Health Collaboration since April 2022.

During the year donations of £498 were received by the charity and during the year £3,519 was paid to them for bookkeeping and accounts work.

	2024 £	2023 £
Amount due to related party at the balance sheet date	-	-
	<hr/>	<hr/>

Olivia Khwaja

Olivia Khwaja, a trustee of the Public Health Collaboration since April 2022.

During the year £16,775 was paid to them for marketing and social media services. There was an amount due of £4,675 at the balance sheet date.

Ellen Calteau

Ellen Calteau, a trustee of the Public Health Collaboration since April 2022 and became an employee in February 2023. They resigned as a trustee in January 2024

PUBLIC HEALTH COLLABORATION

**NOTES TO THE FINANCIAL STATEMENTS - continued
FOR THE YEAR ENDED 31 MARCH 2024**

During the period that they were trustee £17,333 was paid to them for salary costs. There was no amount due at the balance sheet date.

PUBLIC HEALTH COLLABORATION

England & Wales - Charity number 1171887

Accounts

2022/2023

ANNUAL REPORT



Charity Registration Number 1171887 / SC052248

www.phcuk.org

Annual Report and Financial Statements
for the year ended 31 March 2023

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Balance Sheet	16
Notes to the Financial Statements	17 - 23



TRUSTEES' ANNUAL REPORT

The Trustees have pleasure in presenting their report along with the financial statements for the year ended 31 March 2023. The financial statements have been prepared in accordance with current statutory requirements, the charity's governing documents, and the recommendations of the Statement of Recommended Practice "Accounting and Reporting by Charities" (SORP 2005) and complies with applicable law. We have also referred to the guidance contained in the Charity Commission's guidance on public benefit when reviewing our aims and objectives for the year.

AIMS & OBJECTIVES

To advance physical, mental and social well-being among members of the public and healthcare professionals by contributing to the improvement of their level of knowledge, understanding and best practices concerning lifestyle and metabolic health.

VISION, MISSION & AMBITIONS

Our vision is a society where everyone enjoys good metabolic health.

Our mission is to empower, inspire and educate people that most chronic diseases can be prevented and reversed by maintaining good metabolic health through sustainable lifestyle changes.

The values by which we work are:

- Ambitious – We have a strong desire and determination to create the change we want to see.
- Attentive – We listen to everyone with care and attention.
- Compassionate – We appreciate everyone's perspective and will do our best to support them.
- Inquisitive – We like to ask questions and are always eager to learn.
- Proactive – We like to take action and create the change we want to see.
- Sincere – We genuinely want humanity to become healthier and happier.

Our ambitions are to:

1. Reverse the type 2 diabetes and prediabetes epidemic.
2. Have food addiction recognised as an official diagnosis.
3. Undo the childhood obesity crisis.

We will achieve these ambitions by delivering high-quality projects, collaborating with universities to conduct robust research and advocating for the changes we want to see. Through this process our hope is that we will build a society where everyone enjoys good metabolic health.

PUBLIC BENEFIT

The trustees have referred to the guidance contained in the Charity Commissions general guidance on public benefit whilst reviewing the Public Health Collaboration's mission, vision and objectives, and in planning the future activities of the charity.



ACHIEVEMENTS & PERFORMANCE

NEW BEGINNINGS

Following the development of our new logo and website last year, we wanted to help our members become better connected with one another. After reviewing all the different options, we decided to build our own app. This links up with our website, so whether you are on a phone or computer, as long as you're logged into your PHC members account, you'll always be looking at the same platform. With the app, we not only aim to help our members become more connected, but to bring more value to being a member, we also intend to provide exclusive content. Our app, PHC Connect is available on both [Android](#) and [Apple](#).



Our organisation has now been running for 7 years, and during that time our reach throughout the country has gone from strength to strength. Although still a relatively small amount in comparison to England and Wales, the number of Ambassadors springing up in Scotland has been steadily increasing. One of those recent Ambassadors is Moira Newiss, a Nutritional Therapist who specialises in chronic fatigue syndrome. Through her experience and energy we were able to register as a charity with the [Scottish Charity Regulator](#) (OSCR). We are eternally grateful for Moira's assistance and persistence in helping us get charity status in Scotland as well as her significant contribution to the PHC as a whole.

Our [Scientific Advisory Committee](#) (SAC) is a group of pioneering clinicians and researchers in metabolic health from varying specialties, who give expert advice for our projects and publications. During this year we looked at what skills we wanted to add to the SAC to become more knowledgeable for our current and upcoming projects. Through this review we concluded that we wanted a psychiatrist, an endocrinologist and someone with an intimate knowledge of the inner workings of the NHS. With thanks to the members of the SAC and Trustees we found three outstanding individuals. First is Dr Ali Ibrahim, who is an Oxford trained child and adolescent psychiatrist specialising in eating disorders. Second is Dr Abbi Lulseged, who is a consultant physician with a specialist interest in endocrinology and diabetes. He was also recently appointed a fellow of the Royal College of Physicians. Last is Dr Bob Gill, who is General Practitioner in Kent as well as the documentary filmmaker behind The Great NHS Heist.



At the end of last year, we had just begun the process for new [Trustees](#). From our recruitment drive, we received 25 applications. Through our review process, we shortlisted 15 individuals for an interview. Originally, we aimed to add 6 to 8, but after 2 rounds of interviews and the fact that two current Trustees were stepping down, we ended up appointing 10 new members to the Board - giving us a total of 11 Trustees.



With that in mind, we wanted to acknowledge the two Trustees who are passing on the baton of responsibility. A big thank you to Dr Ian Lake and Dr Trudi Deakin for all of your hard work and support over the past 7 years. We simply couldn't have got the PHC to where it is today without you.

On that note, we'd like to welcome our new Board of Trustees, who come from varying backgrounds and will give us the knowledge we need to help more people with their metabolic health.



Dr Joanne McCormack (Chair)



Dr David Jehring



Olivia Khwaja



Giles Corby (Treasurer)



Ellen Calteau RD



Graham Phillips FRPharms



Ben Rubin



Prof Susan Fairlie



Paul Whittle



James Capon



Lesley Adams

REMEMBERING YVONNE LANE

Having said that, it is with great sadness to report that one of the originally appointed Trustees, Yvonne Lane, passed away on 27th March 2023. By profession, Yvonne was a charity fundraiser, who had a wealth of expertise. However, she was also an amazing advocate for our approach, due to her experience of putting type 2 diabetes into remission. Her energy and enthusiasm for the change we want to see was never ending, and will be sorely missed, but she will never be forgotten.



RAISING AWARENESS

One of the primary ways we raise awareness about the importance of metabolic health is through our annual conference. After 2-years of being virtual, our 2022 conference at the University of Bristol was a wonderful return to in-person events. With speakers from around the world and 250 delegates, it was great to reconnect with everyone.



Our keynote speaker was New York Times best-selling author and science journalist, Nina Teicholz, who spoke about how science is being corrupted. Other speakers included Dr Paul Earley, who spoke about the brain affects behaviour, as well as Bitten Jonsson, who spoke about addiction interaction disorder. We also had a patient perspective on heart disease from Tony Royle and how to overcome infertility using real food with Natalie Coghlan.

Speaking of which, just the day before the main PHC conference, SAC member, Dr Jen Unwin hosted the first international conference on food addiction. Where the likes of Dr Earley and Bitten Jonsson were able to go into detail about their area of expertise. Also speaking was PHC Trustee, Ellen Calteau RD, who spoke about screening for food addiction in secondary care. This slide conference was very well received, and we hope to repeat its success in future years.

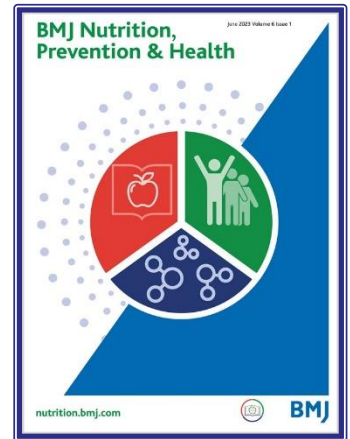


The conference was in May 2022 and then we managed to publish the recordings on our [YouTube channel](#) in August 2022. From then and up until the end of this financial year, we clocked up a mind blowing 304,000 views with 55,400 minutes of watch time. We also increased our subscriber base by 3,200 to a respectable 25,000. In the near future, we aim to use our YouTube channel more in raising awareness and engaging with wider communities.



Following our registration with the Scottish Charity Regulator, Ambassador for Oban, Argyll and Bute, Moira Newiss was keen for the PHC to host its first event in Scotland. Held in Edinburgh at The Quaker Meeting House on Victoria Street, the event had over 80 delegates and was a great start to more activity in Scotland. Talks included The Gut-Brain Axis by Dr Rachel Brown, The Coach Client Connection by Ally Houston and Supercharging Your Energy with Moira Newiss.

Another important way to help raise awareness about the importance of metabolic health is for us to fund papers to become open access, i.e., freely available to the public to read and not behind a paywall. This year SAC members Dr Jen Unwin and Dr David Unwin published two seminal papers on their work with the help of statistician and PHC Ambassador for Islington, Christine Delon. The first of which was titled “Low carbohydrate and psychoeducational programs show promise for the treatment of ultra-processed food addiction” published in the [Frontiers in Psychiatry](#) journal. The paper concluded that “The current data are the first to demonstrate the short-term clinical effectiveness of a low carbohydrate “real food” intervention delivered in an online group format with education and social support for individuals with [food addiction] symptoms.” The second paper was titled “What predicts drug-free type 2 diabetes remission? Insights from an 8-year general practice service evaluation of a lower carbohydrate diet with weight loss”. This paper published in [BMJ Nutrition](#) concluded “A low carbohydrate diet-based approach was able to achieve major weight loss with substantial health and financial benefit.”



The final method we’d like to bring attention to for raising awareness about the importance of metabolic health is through collaboration. A prime example of this from this year was our joint project with Love British Food. Every year LBF facilitates a Love British food Fortnight to celebrate the brilliance of British food. This year, we worked with LBF to create a [14 Day Healthy Living Action Calendar](#), to help people do something every day to combine healthy lifestyles with British food. It was a resounding success with hundreds of people downloading the action calendar as well as posting on social media what they did.

OUR PROJECTS

Thanks to the wonderful work of our employees and volunteers, our projects continue to help people around the country improve their health. Such as our health coach service for type 2 diabetes, The Lifestyle Club (TLC) being given The Largest Impact on Body Weight & Waist Circumference award from X-PERT Health. Congratulations to Director of TLC, Helen Gowers RD and the rest of her team for going above and beyond to make that happen.





Also, our Ambassadors Programme continues to have a significant impact on people's lives. We thank every single one of our volunteers for putting in all the time and effort it requires, but a special thank you must go to Ambassador for Beaconsfield, Sheila Docker and Ambassador for Windsor, Helen Ritchie. Who have been running a lifestyle support group at The Cedars Surgery in Maidenhead. They are now a mainstay of the surgery, and all patients are encouraged to attend the group.

A new project for this year comes from Ambassador for Portsmouth, Mark Hancock and Ambassador for Bournemouth, Olly Leicester. Earlier this year Mark and Olly came up with the idea of starting an informal running group by using parkrun as the weekly event to facilitate the group's activities. From this great idea [Real Food Runners](#) was born. Since the start of the year, we've had a few meet-ups both in the North and the South. Ambassador for Beaconsfield, Sheila Docker has even utilised Real Food Runners to galvanise her lifestyle support group members.



FINANCIAL REVIEW

Total incoming resources for the year to 31 March 2023 amounted to £313,281 (year ended 31 March 2022 £87,758).

Total resources expended for the year to 31 March 2023 amounted to £295,381 (year ended 31 March 2022 £123,620).

The Charity had £112,810 (year ended 31 March 2022 £94,910) in its general fund at the year ended 31 March 2023.

As at 31 March 2023, cash at bank and in handheld by the charity was £88,008 (31 March 2022 £137,652), with a healthy net current assets figure of £112,810 (31 March 2022 £94,910).

The purposes of the different types of funds are explained in the accounting policies as shown in the financial statements.

Notes 14 and 15 to the financial statements provide further explanation.

RESERVES POLICY

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

FUNDRAISING STATEMENT

The Public Health Collaboration does conduct fundraising activities. Fundraising is primarily from donations through the website, and, to a lesser extent, delivers fundraising through sponsored events and direct marketing appeals. The charity takes its responsibilities under the Data Protection Act and GDPR very seriously and ensures all activities are conducted in line with best practice guidance issued by the Institute of Fundraising and the Fundraising Regulator.

RISK MANAGEMENT

The Trustees have assessed the major risks to which the Charity is exposed, in particular those relating to the operations and finances of the Charity and are satisfied that systems are in place to mitigate the risks.

Risks considered relate to the current economic climate, external pressures and future fundraising opportunities.

The Trustees have identified that the current risks facing the Public Health Collaboration are:

- Large food companies resisting attempts to change current dietary guidelines including reversing the sugar tax.
- Pharmaceutical companies resisting attempts to change current health guidelines on treating Type 2 Diabetes and other metabolic diseases.
- Rising fuel and energy prices, inflationary pressures and economic recession and their impact on the Charity.
- Securing long term funding for the future.



PLANS FOR FUTURE PERIODS

Looking at the year ahead, we are planning to host our 8th annual conference in-person at the Crucible Theatre in Sheffield. Once again, we will be inviting speakers from around the world to congregate to share their area of expertise. In addition, we aim to make this the first year we include continued professional development points. We also aim to make this the first year we live stream the event.



This is our seventh year as an organisation, and so we have spent a significant amount of time reflecting on what we want our future to look like. With that in mind, we hired a consultant to help us with our [Theory of Change](#). We did this at an in-person weekend meeting in London, where we had representatives from across the charity. Including all employees, the new Trustees and representatives from the Scientific Advisory Committee and the Ambassadors Programme. The weekend was very thought provoking and enlightening. The outcomes were vast, but the one thing we all agreed on was that the PHC was about helping people improve their metabolic health through sustainable lifestyle changes. Over the summer of 2023, we will work on distilling all the ideas for what our future looks like to produce our Theory of Change.



STRUCTURE, GOVERNANCE & MANAGEMENT

Public Health Collaboration is a Charitable Incorporated Organisation, number 1171887 and SC052248.

The charity has a Board of Trustees, who are responsible for the overall governance of the charity and a Scientific Advisory Committee, who ensure that the charity is giving accurate and evidence-based advice, based on the latest scientific research.

The charity recruits new trustees to the board by advertising nationally, interviewing potential candidates and then appointing. Successful candidates are formally welcomed at the next trustees meeting, following their appointment. Each newly appointed trustee chooses how long they wish to stand for, 2 - 4 years, and can stand for another term.

Strategic decisions are made by the Board of Trustees, with the day-to-day management of the charity delegated to the Director, Sam Feltham.

The charity recruits new members to the Scientific Advisory Committee by identifying gaps in the knowledgebase and asking the current Committee members to recommend relevant professionals. The potential candidates are approached, interviewed and then appointed.

REFERENCE & ADMINISTRATION DETAILS

Patrons

Steve Bennett
Giancarlo and Katie Caldesi
James Goolnik BDS MSc (from October 2023)
Hannah Sutter

Trustees

Dr Joanne McCormack (Chair until July 2023)
Dr David Jehring (Chair from July 2023)
Olivia Khwaja (Co Vice Chair from Sept 2023)
Graham Phillips FRPharmS (Co Vice Chair from Sept 2023)
Giles Corby FCA (Treasurer)
Ellen Calteau RD
Professor Susan Fairlie RN, BSc (Hons), MSc (from March 2023)
Benjamin Rubin
Paul Whittle
Lesley Adams (to July 2023)
James Capon (to May 2023)
Dr Ian Lake (to September 2022)
Yvonne Lane (from April to October 2022)

Scientific Advisory Committee	<p>Dr Aseem Malhotra (President to February 2023)</p> <p>Dr David Unwin (Chair from February 2023)</p> <p>Dr Joanne McCormack (PHC Board representative)</p> <p>Dr Ian Lake</p> <p>Dr Jen Unwin</p> <p>Dr Ayan Panja (to May 2022)</p> <p>Dr Trudi Deakin</p> <p>Dr Campbell Murdoch</p> <p>Dr Katharine Morrison</p> <p>Dr Tamsin Lewis (to July 2022)</p> <p>Dr Bob Gill (from Nov 2022)</p> <p>Isabella Cooper (from Nov 2022 to March 2023)</p> <p>Dr Ali Ibrahim (from Nov 2022)</p> <p>Dr Abbi Lulsegged (from Nov 2022)</p> <p>Dr Kesar Sadhra (from July 2023)</p>
Director	Sam Feltham
Registered Charity Number	1171887 and SC052248
Registered Address	C/o Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS
Bankers	HSBC Bank PLC, 23/24 Paddington House, Festival Place, Basingstoke, Hants, RG21 1LJ
Solicitors	Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS
Independent Examiner	Beechtree Bookkeeping, 9 Wallaford Road, Buckfastleigh, Devon, TQ11 0AR
Accountant	Merlin Accountancy Services Ltd, 2nd Floor, 33 Longbrook Street, Exeter, Devon, EX4 6AW

STATEMENT OF TRUSTEES' RESPONSIBILITIES


Charity Law requires the Trustees to prepare financial statements for each financial period, which give a true and fair view of the state of affairs of the company and the profit or loss for that period. In preparing those financial statements the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgments and estimates that are reasonable and prudent;
- Prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the company will continue to operate;
- State whether the policies adopted are in accordance with the charities SORP and with applicable accounting standards, subject to any material departures disclosed and explained in the Financial Statements.

The Trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that financial statements comply with the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provisions of the governing document. The Trustees are also responsible for safeguarding the assets of the charity and, hence, for taking reasonable steps for the prevention and detection of fraud and other irregularities.

As the charities trustees, we certify that:

- So far as we are aware, there is no relevant information of which the charities Independent Examiners are unaware, and
- We have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant information and to establish that the charity's Independent Examiners are aware of that information.

Signed.....


Name: Dr David Jehring

Date..13/12/2023.....

**INDEPENDENT EXAMINER'S REPORT TO THE MEMBERS OF
PUBLIC HEALTH COLLABORATION**

Year Ended 31 March 2023

I report on the accounts of the charity for the year ended 31 March 2023, which are set out on pages 15 to 23.

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;
- To follow the procedures laid down in the General Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
- To state whether particular matters have come to my attention.

Basis of Independent Examiner's Report

My examination was carried out in accordance with the General Directions given by 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 the 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 and the report is limited to these matters set out in the statement below.

Independent Examiner's Statement

In the course of my examination, no matter has come to my attention:

1. which gives me reasonable cause to believe that, in any material respect, the trustees have not met the requirements to ensure that:
 - proper accounting records are kept in accordance with section 130 of the 2011 Act; and
 - accounts are prepared which agree with the accounting records and comply with the accounting requirements of the 2011 or
2. to which in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

Philip Northcott

P Northcott
Beechtree Bookkeeping
9 Wallaford Road, Buckfastleigh
Devon, TQ11 0AR

Signed:.....

Date:.....19/12/2023.....



PUBLIC HEALTH COLLABORATION
STATEMENT OF FINANCIAL ACTIVITIES
(INCLUDING INCOME AND EXPENDITURE ACCOUNT)

Year Ended 31 March 2023

	Notes	Total Funds 2023 £	Total Funds 2022 £
Incoming Resources			
Donations and Legacies	3	179,533	63,120
Other Trading Activities	4	19,914	10,292
Income from Charitable Activities	5	113,834	14,346
Total Incoming Resources		313,281	87,758
Resources Expended			
Expenditure on Raising Funds	6	26,782	7,293
Expenditure from Charitable Activities	7	268,599	116,327
Total Resources Expended		295,381	123,620
Net Income/(Expenditure) for the year		17,900	(35,862)
Total Funds Brought Forward at 1st April 2022	13	94,910	130,772
Total Funds Carried Forward at 31st March 2023	13	112,810	94,910

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

All income resources and resources expended derive from continuing activities. No operations have been discontinued or acquired during the year.

The notes on pages 17 to 23 form part of the Financial Statements.

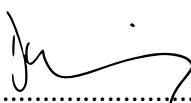
**PUBLIC HEALTH COLLABORATION
BALANCE SHEET**

Registered Charity Number: 1171887 and SC052248

As at 31 March 2023

		2023		2022	
	Notes	£	£	£	£
Current Assets					
Debtors and Prepayments	10	80,315		938	
Cash at bank and in hand	11	<u>88,008</u>		<u>137,652</u>	
		168,323		138,590	
Current Liabilities					
Amounts falling due within one year	12	<u>(55,513)</u>		<u>(43,680)</u>	
Net Current Assets			<u>112,810</u>		<u>94,910</u>
Net Assets			<u>112,810</u>		<u>94,910</u>
Total Funds					
Unrestricted Funds	14		<u>112,810</u>		<u>94,910</u>

Approved by the Board of Trustees on 13/12/23..... and signed on its behalf by:


.....

Dr David Jehring

PUBLIC HEALTH COLLABORATION
NOTES TO THE FINANCIAL STATEMENTS

Year Ended 31 March 2023

1. CHARITY STATUS

The charity is a Charitable Incorporated Organisation (CIO) and has no share capital and is registered in England and Wales, and Scotland. The CIO was registered on 17th March 2017 in England and Wales, and on 12th January 2023 in Scotland, and the CIO's registered number and registered office address can be found within the Reference and Administration details on page 11 - 12 of the financial statements.

2. ACCOUNTING POLICIES

a) Basis of Preparation of Financial Statements

The financial statements have been prepared in accordance with 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 2015) - (Charities SORP FRS 102) and the Charities Act 2011.

In drafting these financial statements, the charity has also takes advantage of the exemptions for smaller charities contained in Charity Commission publication CC17.

Public Health Collaboration meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

The financial statements are presented in pound sterling (£) which is the charity's functional and presentation currency.

b) Preparation of the financial statements on a going concern basis

Public Health Collaboration reported a net surplus in the reporting period of £17,900, with total funds held at the end of the period of £112,810.

The trustees are of the view that, on the above basis, the charity is a going concern.

Public Health Collaboration is reliant on donations and memberships to continue providing their core services. The economic outlook and cuts in public spending, are a potential area of financial uncertainty for the charity.

c) Incoming Resources

Donations and memberships are recognised in the financial statements on the date they are received.

Income from other trading activities, fundraising and charitable activities is included in the period in which it relates.

Grants, whether they are of a general nature or for a specific purposed, are recognised as a charitable activity and recorded at the date received.

Accounting Policies – continued

d) **Resources Expended**

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with use of resources.

- Costs of generating funds are those costs incurred in attracting donations, and those incurred in trading activities that raise funds.
- Charitable activities include charitable distributions and the costs involved in the provision of services that the Public Health Collaboration provides.
- Governance costs include those incurred in the governance of the charity and its assets and are primarily associated with constitutional and statutory requirements.

Resources expended include attributable VAT which cannot be recovered.

e) **Taxation**

Under section 505 ICTA 1988 the charity is exempt from certain taxes. Full account is taken of tax credits attaching to gifts and qualifying donations. Public Health Collaboration has charitable status and is exempt from Income Tax on income it receives.

f) **Debtors**

Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid.

g) **Creditors and Provisions**

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

h) **Financial instruments**

Public Health Collaboration only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

- Financial assets, includes trade receivables, cash and balances and investments are recognised at transaction value.
- Financial liabilities, includes trade payables and recognised at transaction value. Trade payables are obligations to pay for goods and services required from suppliers in the course of business activities.

Accounting Policies – continued

i) Reserves Policies

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources.

3. DONATIONS AND LEGACIES

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Donations	111,642	63,120
Gift Aid Reclaim	67,891	-
	<hr/>	<hr/>
	179,533	63,120
	<hr/> <hr/>	<hr/> <hr/>

4. OTHER TRADING ACTIVITIES

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Books and Publications	3,871	10,212
Merchandise Income	-	80
Other Events	16,043	-
	<hr/>	<hr/>
	19,914	10,292
	<hr/> <hr/>	<hr/> <hr/>

5. **INCOME FROM CHARITABLE ACTIVITIES**

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Fundraising Income	653	3,137
Membership	15,480	10,465
Conference Income	35,601	744
Food Addiction Resource Income	19,900	-
The Lifestyle Club Income	42,200	-
	<hr/>	<hr/>
	113,834	14,346
	<hr/>	<hr/>

6. **EXPENDITURE ON RAISING FUNDS**

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Books and Publications	8,879	5,606
Merchandise Expenditure	1,837	1,134
Other Events Expenditure	15,409	553
Fundraising Expenditure	657	-
	<hr/>	<hr/>
	66,170	7,565
	<hr/>	<hr/>

7. **EXPENDITURE FROM CHARITABLE ACTIVITIES**

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Advertising	13,558	952
Bank Charges	1,717	1,117
Computer Costs	8,627	10,843
Insurance	1,590	185
Printing, Postage and Stationery	4,752	1,511
Telephone and Internet	327	-
Travel and Accommodation	1,914	2,716
Staff Costs	117,075	33,750
Sundry Costs	68	-
Training	12,801	-
Conference Expenditure	39,388	272
The Lifestyle Club	23,531	59,130
Governance	43,251	5,851
	<hr/>	<hr/>
	268,599	116,327
	<hr/>	<hr/>

8. STAFF COSTS

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Salaries	92,908	33,750
Employers National Insurance	5,059	-
Employers Pension Contribution	19,107	-

The staff costs relate to the salaries paid to the full time Director, Project Managers and Administration.

The Key Management Personnel of Public Health Collaboration is the Director. The total employee benefits paid to them in the year were:

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Salaries	45,000	33,750
Employers National Insurance	3,550	-
Employers Pension Contribution	1,163	-

No employee received remuneration in excess of £60,000 in either the current or previous year.

The average number of employees during the year were 3.16 (2022: 1).

In addition to employees, the charity has a number of unpaid voluntary workers.

9. TRUSTEE REMUNERATION AND EXPENSES

During the year £1,187 was paid to Trustees for reimbursement of travel expenses.

10. MOVEMENTS IN TOTAL FUNDS FOR THE YEAR

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
This is stated after charging:		
Independent Examiner's Fee	150	110

11. DEBTORS AND PREPAYMENTS

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Due Within One Year		
Debtors	4,500	-
Prepayments	75,373	938
SS & Other Taxes	442	-
	80,315	938
	80,315	938

12. CASH AT BANK AND IN HAND

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
HSBC – Current	83,487	137,652
Paypal	715	-
Stripe	3,742	-
Wise	64	-
	<u>88,008</u>	<u>137,652</u>

13. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£	£
Creditors	16,148	3,600
Accruals	39,139	39,634
Paypal Account	-	446
Other Creditors	226	-
	<u>55,513</u>	<u>43,680</u>

14. MOVEMENT IN FUNDS

	As at 01 April 2022	Income	Expenditure	As at 31 March 2023
	£	£	£	£
General Fund	94,910	313,281	295,381	112,810
	<u>94,910</u>	<u>313,281</u>	<u>295,381</u>	<u>112,810</u>

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

15. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Total Funds As at 31 March 2023 £	Total Funds As at 31 March 2022 £
Current Assets	168,323	138,590
Current Liabilities	(55,513)	(43,680)
Net assets	112,810	94,910

16. RELATED PARTIES

Other than the following, no trustee or connected person has received fees or emoluments, during the year.

Merlin Accountancy Services Ltd

A company owned by Giles Corby, became a trustee and treasurer of the Public Health Collaboration in April 2022. During the year donations of £387 were received by the charity and during the year £1,836 was paid to them for bookkeeping and accounts work.

	2023 £	2022 £
Amount due to related party at the balance sheet date	<u>-</u>	<u>376</u>

Olivia Khwaja

Olivia Khwaja became a trustee of the Public Health Collaboration in April 2022. During the year £13,200 was paid to them for marketing and social media services. There was no amount due at the balance sheet date.

Ellen Calteau

Ellen Calteau became a trustee of the Public Health Collaboration in April 2022 and became an employee in February. During that time £2,340 was paid to them for salary costs. There was no amount due at the balance sheet date.

PUBLIC HEALTH COLLABORATION

England & Wales - Charity number 1171887

Accounts

ANNUAL REPORT

2021/2022

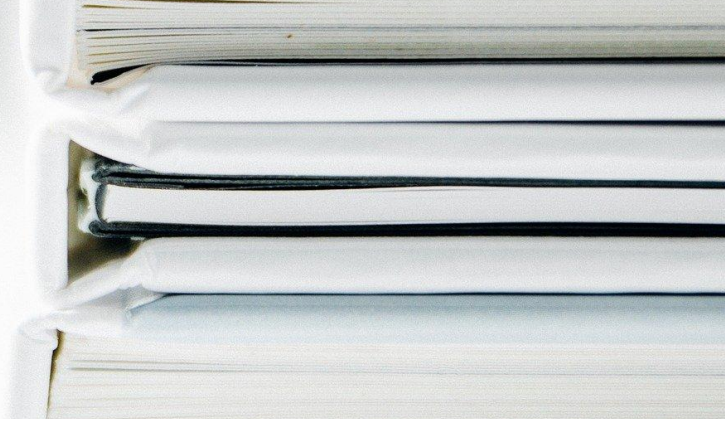


To advance physical, mental and social well-being among members of the public and healthcare professionals by contributing to the improvement of their level of knowledge, understanding and best practices concerning lifestyle and metabolic health.

Charity Registration Number 1171887
www.phcuk.org

Annual Report and Financial Statement
for the year ended 31st March 2022

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TRUSTEES' ANNUAL REPORT

The Trustees have pleasure in presenting their report along with the financial statements for the year ended 31 March 2022. The financial statements have been prepared in accordance with current statutory requirements, the charity's governing documents, and the recommendations of the Statement of Recommended Practice "Accounting and Reporting by Charities" (SORP 2005) and complies with applicable law. We have also referred to the guidance contained in the Charity Commission's guidance on public benefit when reviewing our aims and objectives for the year.

AIMS & OBJECTIVES

To advance physical, mental and social well-being among members of the public and healthcare professionals by contributing to the improvement of their level of knowledge, understanding and best practices concerning lifestyle and metabolic health.

VISION, MISSION & VALUES

Our vision is a society where everyone can achieve their optimal health.

Our mission is to empower people to take control of their health and campaign for effective health policies.

The values by which we work are; evidence-based, practical, inclusive, courageous and compassionate.

PUBLIC BENEFIT

The trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit whilst reviewing the Public Health Collaboration's mission, vision and objectives, and in planning the future activities of the charity.



ACHIEVEMENTS & PERFORMANCE

NEW BEGINNINGS

We started off this year by revealing our new logo and launching our new website. This was the best possible way to start the year after the previous year’s challenges. The process of coming up with a new logo started in February 2021 and took about a month before we settled on one that felt right. It was a difficult task for the graphic designer because we wanted it to come across as professional yet friendly as well as new yet familiar. There were several attempts where we felt like we were getting close, but we knew it wasn’t quite there yet.

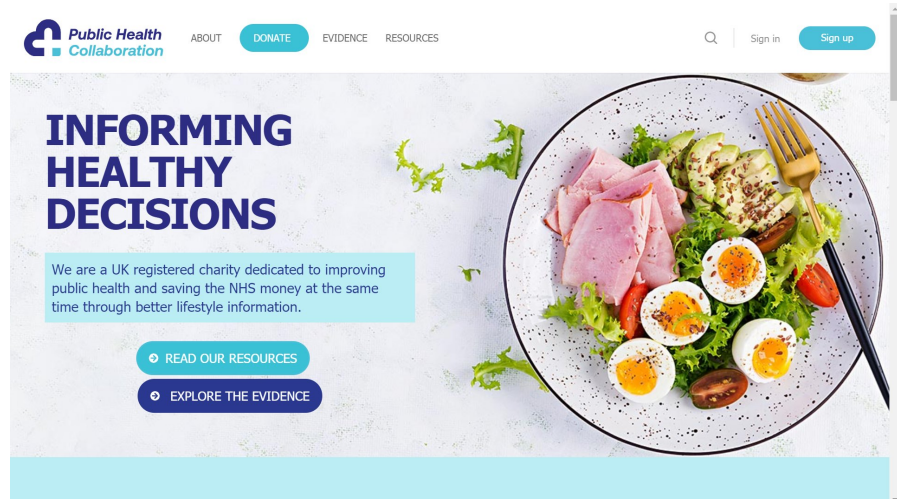


Eventually, after many back and forths with the graphic designers, they came up with the one that we felt was professional yet friendly as well as being new yet familiar. In particular, it was the icon that encapsulated what the Public Health Collaboration stands for. With both the medical cross that represents professionalism and the heart that represents passion.



Once the logo was finalised it was time to create a new website. We had been using the same website since we started in 2016, which was functional but not altogether user friendly. Again, we wanted the website to come across as professional yet friendly as well as new but familiar. We also wanted to have the ability to

create a private members website, so that we could create a space just for our members. The web designer did a fantastic job and as well as ourselves being happy, the feedback from our community has been resoundingly positive.



ANNUAL CONFERENCE 2021

We launched the new logo and website in April 2021, which was just in time for our annual conference on 8th and 9th May 2021. Due to the continually changing circumstances surrounding Covid, we decided to host the event online for the second year running. The experience from the previous year's conference was helpful because we now had a good understanding of how to host an online event smoothly.



In total, we managed to get 18 speakers from around the world to present their talks for our conference. With an additional 2 talks that were presented by multiple people. One was made by healthcare professionals who were presenting the idea of [rethinking type 1 diabetes](#). The other was presented by people who had [health success stories](#) to tell. As a result of these magnificent talks, we also managed to raise just over [£1,200 in funds](#).

Our [YouTube channel](#) remains one of our most successful places to help share our information for the public to benefit from. Over the conference weekend specifically, we gained 253 subscribers, taking us to 17,700 subscribers in total with 3,800 hours of watch time from viewers. However, over the entire year we gained just over 4,000 subscribers, taking us to just under 22,000 subscribers with 86,400 hours of watch time.

REMEMBERING DR KAILASH CHAND OBE

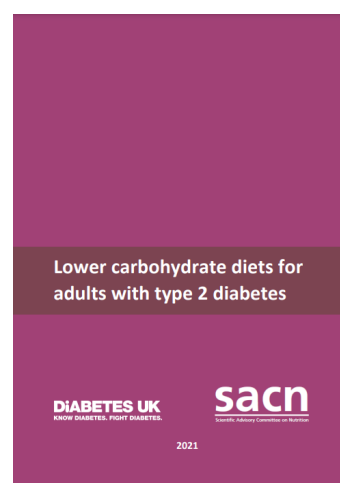
On 26th July 2021 we learnt the sad news that one of our founding members and advisory committee had passed away. Dr Kailash Chand OBE was an award-winning GP, leading NHS campaigner and one of the most influential doctors in the UK. He was also a kind and wonderful soul who will be sorely missed. Dr Chand had obituaries in many publications but three stood out; [Pulse](#), [BMA](#) and [The Guardian](#). May he rest in peace.



SPREADING THE MESSAGE

Our Ambassadors Programme remains one of the main ways we spread the message of how powerful lifestyle can be for improving health. With over 250 volunteers, our Ambassadors are located up and down the country liaising with NHS GP practices to help them set up free lifestyle support groups. The past year has been challenging for Ambassadors, but they have adapted very quickly in being able to run their groups online. However, the hope is that in the near future they will be able to return to in-person groups to help people face to face.

Last year we published a [case study book](#), which was very well received by healthcare professionals across the country. This is but part of the tools we are using to change the hearts and minds of healthcare professionals to better utilise the power of lifestyle. Although the work of the Ambassadors might not have directly influenced Public Health England (PHE), it does seem as though there is a consensus forming. On 26th May, [PHE released a report](#) from the Scientific Advisory Committee on Nutrition (SACN) and Diabetes UK, which suggests that *“a diet lower in carbohydrates is an effective option up to 6 months for adults living with type 2 diabetes and overweight or obesity.”* This acknowledgement of what we’ve been advocating for since the charity started is a big step in the right direction and we congratulate PHE, SACN and Diabetes UK in taking it.





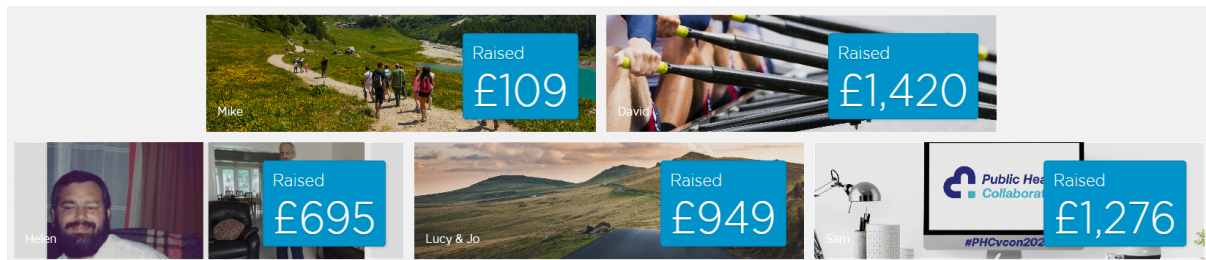
Following this on 29th July, five of our scientific advisory committee members published a peer-reviewed paper in the [Journal of Human Nutrition and Dietetics](#). The paper was titled “*Dietary strategies for remission of type 2 diabetes: A narrative review*” and was co-authored with representatives from the British Dietetic Association (BDA) and Diabetes UK. One of the major findings from the paper was that “*low carbohydrate diets have been demonstrated as being effective in facilitating weight loss and remission of T2DM*”. This acknowledgment of the growing evidence that we have been championing is most welcome and we look forward to further collaborations with the BDA and Diabetes UK in the near future.

Our library of [sugar infographics from Dr David Unwin](#) continues to grow, which are now available in 18 different languages. In addition to the sugar infographics being translated we also received an [Arabic translation of our Healthy Eating Guidelines](#) report from Dr Arwa Amin. She has translated several of the sugar infographics as well, and so we wanted to give her a special thank you for all of her hard work.



FUNDRAISING

In addition to this year’s virtual conference raising extra funds for the charity, our members and volunteers have gone above and beyond, to do their bit. Starting off with Fitness Trainer, Lucy and Chiropractor, Jo who rode 100 miles of the South Downs Way to [raise £949](#). Then there was Mike, who is part of a lifestyle support group in Bognor Regis. Mike’s group challenged themselves to 200,000 steps each over the period of a month, which they managed to do as well as [raising £109](#) for the charity.



After that, we received the saddening news that one of our most passionate ambassadors, John Collyer, passed away. John was a very kind man and superb advocate for our work. So, it was such an honour that in lieu of flowers his wife asked for donations to the PHC, which [raised £695](#). To find out more about John, you can watch his conference talk from 2020 on our [YouTube channel](#). The last fundraiser of this year was from another ambassador, David Sogan, who rowed 60km the day after his 60th birthday in memory of his father and a friend, who sadly passed away 3 years prior from leukaemia. The sponsored row gave us the best boost of the year, [raising £1,420](#).

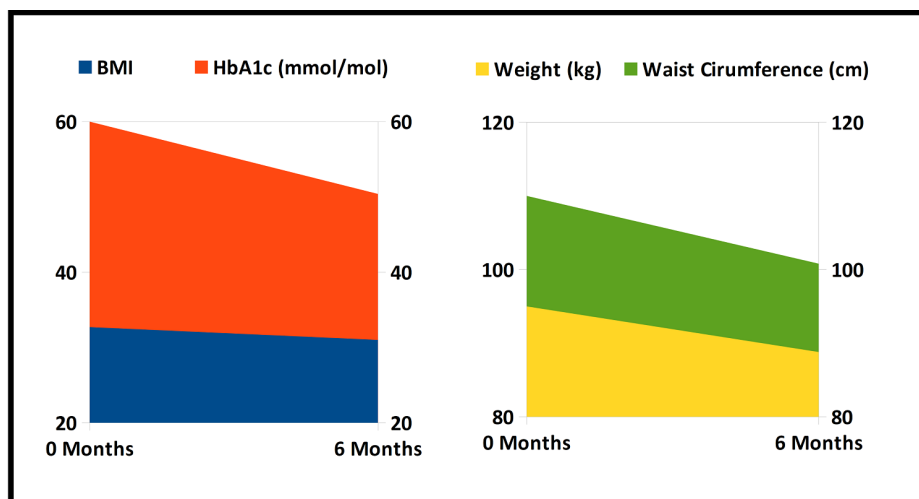
THE LIFESTYLE CLUB

In last year's report we announced that we were in the early stages of a new service for people living with prediabetes and type 2 diabetes called [The Lifestyle Club](#) (TLC). With that in mind, it's with pleasure to share that over the past year we have completed a pilot study for TLC as well as having run two further rounds of courses for the service in collaboration with several NHS GP practices.



To give a brief overview, TLC initially guides people in groups of 6-12 participants through an 8 week course, facilitated by a health coach via video conferencing. Alongside the sessions, participants are sent a 100 page printed handbook to refer to during in and outside of sessions. Once they've completed the 8 week course, they are invited to monthly drop-in sessions with other TLC participants from around the country as part of the ongoing support that's on offer.

Over the past year, we have had almost 300 people complete the initial course through 41 individually run courses by our 4 health coaches. After 6 months the results showed a weight reduction of 6.2kg, a waist circumference reduction of 9.2cm and an HbA1c reduction of 9.8mmol/mol. Also, 86.4% of participants either reduced or entirely stopped their medication for type 2 diabetes.



The plan for next year is to train 4 more health coaches, to help with the increasing demand for the service. We also plan to employ someone full-time to be responsible for the day to day running of TLC as well as helping to develop it into a scalable service that could effectively help support the NHS.

FINANCIAL REVIEW

- Total incoming resources for the year to 31 March 2022 amounted to £87,758 (year ended 05 April 2021 £120,128).
- Total resources expended for the year to 31 March 2022 amounted to £123,620 (year ended 05 April 2021 £33,044).
- The Charity had £94,910 (year ended 05 April 2021 £130,772) in its general fund at the year ended 31 March 2022.
- As at 31 March 2022, cash at bank and in hand held by the charity was £137,652 (05 April 2021 £130,772), with a healthy net current assets figure of £94,910 (05 April 2021 £130,772).
- The purposes of the different types of funds are explained in the accounting policies as shown in the financial statements.
- Notes 13 and 14 to the financial statements provide further explanation.

RESERVES POLICIES

Reserves Policy

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

Fundraising Statement

The Public Health Collaboration does conduct fundraising activities. Fundraising is primarily from donations through the website, and, to a lesser extent, delivers fundraising through sponsored events and direct marketing appeals. The charity takes its responsibilities under the Data Protection Act and GDPR very seriously and ensures all activities are conducted in line with best practice guidance issued by the Institute of Fundraising and the Fundraising Regulator.

Risk Management

The Trustees have assessed the major risks to which the Charity is exposed, in particular those relating to the operations and finances of the Charity and are satisfied that systems are in place to mitigate the risks.

Risks considered relate to the current economic climate, external pressures and future fundraising opportunities. The Trustees have identified that the current risks facing the Public Health Collaboration are:

- Large food companies resisting attempts to change current dietary guidelines including reversing the sugar tax.
- Pharmaceutical companies resisting attempts to change current health guidelines on treating Type 2 Diabetes and other metabolic diseases.
- Rising fuel and energy prices, inflationary pressures and economic recession and their impact on the Charity.
- Securing long term funding for the future.

PLANS FOR THE FUTURE

Looking at the year ahead, we are planning to host our 7th annual conference in-person at the University of Bristol. We had booked this for our 2020 conference but the University has been very kind in holding our deposit until we are able to hold the event. The speakers that we had originally booked for the 2020 conference have also been very understanding in agreeing to shift their participation to 2022. We're very excited to have well renowned speakers from all over the world as well as many UK-based professionals, who are doing some incredible work.



In addition, to our usual annual conference Dr Jen Unwin from our Scientific Advisory Board has organised the first International Food Addiction conference. We plan to explore this field in greater detail over the next year and beyond.

Lastly, for the past 6 years we have been operating with three terrific trustees, but it is becoming apparent that as the charity grows, we need more people with a wider base of skills and expertise. With that in mind, we have begun the process of recruiting new members for the Board of Trustees. After widely promoting the [recruitment pack](#), we have received applications from 25 interesting individuals. We are now in the midst of the interview process and plan to appoint new trustees in the coming weeks. Although it's going to be a lot of hard work, 2022 is sure to be a very exciting year that we hope will bring about more improvements in public health.



STRUCTURE, GOVERNANCE & MANAGEMENT

Public Health Collaboration is a Charitable Incorporated Organisation, number 1171887.

The charity has a Board of Trustees, who are responsible for the overall governance of the charity and a Scientific Advisory Committee, who ensure that the charity is giving accurate and evidence-based advice, based on the latest scientific research.

The charity recruits new trustees to the board by advertising nationally, interviewing potential candidates and then appointing. Successful candidates are formally welcomed at the next trustees meeting, following their appointment. Each newly appointed trustee chooses how long they wish to stand for, 2 - 4 years, and can stand for another term.

Following a formal recruitment process a number of new trustees joined the board during 2022. These trustees meet the gaps in skills and experience of the 2020/2021 board and have all undergone a formal induction process.

Strategic decisions are made by the Board of Trustees, with the day-to-day management of the charity delegated to the Director, Sam Feltham.

The charity recruits new members to the Scientific Advisory Committee by identifying gaps in the knowledgebase and asking the current Committee members to recommend relevant professionals. The potential candidates are approached, interviewed and then appointed.

REFERENCE & ADMINISTRATION DETAILS

Patrons

Steve Bennett
Hannah Sutter
Giancarlo and Katie Caldesi
Rosemary Wellman

Trustees

Dr Joanne McCormack (Chair)
Dr David Jehring (Vice Chair from June 2022) (from April 2022)
Dr Ian Lake (Vice Chair to June 2022)
Giles Corby FCA (Treasurer) (from April 2022)
Ellen Calteau RD (from April 2022)
James Capon (from April 2022)
Yvonne Lane (from April to October 2022)
Graham Phillips FRPharmS (from April 2022)
Benjamin Rubin (from April 2022)
Paul Whittle (from April 2022)
Olivia Khwaja (from April 2022)
Lesley Adams (from April 2022)

Scientific Advisory Committee

Dr Aseem Malhotra (President)
Dr David Unwin (Vice President)
Dr Joanne McCormack (PHC Board representative)
Dr Ian Lake (PHC Board representative)
Dr Jen Unwin
Dr Ayan Panja (to May 2022)
Dr Trudi Deakin
Dr Campbell Murdoch
Dr Katharine Morrison
Dr Tamsin Lewis (to July 2022)
Dr Bob Gill (from Nov 2022)
Isabella Cooper (from Nov 2022)
Dr Ali Ibrahim (from Nov 2022)
Dr Abbi Lulseggged (from Nov 2022)

Director

Sam Feltham

Registered Charity Number

1171887

Registered Address

C/o Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS

Bankers

HSBC Bank PLC, 23/24 Paddington House, Festival Place, Basingstoke, Hants, RG21 1LJ

Solicitors

Reed Smith, The Broadgate Tower, 20 Primrose Street, London, EC2A 2RS

Independent Examiner

Beechtree Bookkeeping, 9 Wallaford Road, Buckfastleigh, Devon, TQ11 0AR

Accountant

Merlin Accountancy Services Ltd, 2nd Floor, 33 Longbrook Street, Exeter, Devon, EX4 6AW

STATEMENT OF TRUSTEES' RESPONSIBILITIES

Charity Law requires the Trustees to prepare financial statements for each financial period, which give a true and fair view of the state of affairs of the company and the profit or loss for that period. In preparing those financial statements the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgments and estimates that are reasonable and prudent;
- Prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the company will continue to operate;
- State whether the policies adopted are in accordance with the charities SORP and with applicable accounting standards, subject to any material departures disclosed and explained in the Financial Statements.

The Trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that financial statements comply with the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provisions of the governing document. The Trustees are also responsible for safeguarding the assets of the charity and, hence, for taking reasonable steps for the prevention and detection of fraud and other irregularities.

As the charities trustees, we certify that:

- So far as we are aware, there is no relevant information of which the charities Independent Examiners are unaware, and
- We have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant information and to establish that the charity's Independent Examiners are aware of that information.

Signed: 

Name: Dr Joanne McCormack

Date: Monday 23rd January 2023

**INDEPENDENT EXAMINER'S REPORT TO THE MEMBERS OF
PUBLIC HEALTH COLLABORATION
YEAR ENDED 31ST MARCH 2022**

I report on the accounts of the charity for the year ended 31 March 2022, which are set out on pages 15 to 22.

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:

1. Examine the accounts under section 145 of the 2011 Act;
2. To follow the procedures laid down in the General Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
3. To state whether particular matters have come to my attention.

Basis of Independent Examiner's Report

My examination was carried out in accordance with the General Directions given by 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 the 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 and the report is limited to these matters set out in the statement below.

Independent Examiner's Statement

In the course of my examination, no matter has come to my attention:

1. which gives me reasonable cause to believe that, in any material respect, the trustees have not met the requirements to ensure that:
 - a. proper accounting records are kept in accordance with section 130 of the 2011 Act; and
 - b. accounts are prepared which agree with the accounting records and comply with the accounting requirements of the 2011 or
2. to which in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

P. Northcott

P Northcott
Beechtree Bookkeeping
9 Wallaford Road, Buckfastleigh
Devon, TQ11 0AR

Signed:.....

.....

Date: 25/01/2023
.....

PUBLIC HEALTH COLLABORATION
STATEMENT OF FINANCIAL ACTIVITIES
(INCLUDING INCOME AND EXPENDITURE ACCOUNT)
Year Ended 31 March 2022

	Notes	Total Funds 2022	Total Funds 2021
		£	£
Incoming Resources			
Donations and Legacies	3	63,120	120,128
Other Trading Activities	4	11,036	-
Income from Charitable Activities	5	13,602	-
Total Incoming Resources		87,758	120,128
Resources Expended			
Expenditure on Raising Funds	6	7,565	-
Expenditure from Charitable Activities	7	116,055	33,044
Total Resources Expended		123,620	33,044
Net Income/(Expenditure) for the year		(35,862)	87,084
Total Funds Brought Forward at 6th April 2021	13	130,772	43,688
Total Funds Carried Forward at 31st March 2022	13	94,910	130,772

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

All income resources and resources expended derive from continuing activities. No operations have been discontinued or acquired during the year.

The notes on pages 17 to 22 form part of the Financial Statements.

**PUBLIC HEALTH COLLABORATION
BALANCE SHEET
Registered Charity Number: 1171887
As at 31 March 2022**

	Notes	2022		2021	
		£	£	£	£
Current Assets					
Debtors and Prepayments	20	938		-	
Cash at bank and in hand	20	137,652		130,772	
		<u>138,590</u>		<u>130,772</u>	
Current Liabilities					
Amounts falling due within one year	21	(43,680)		(-)	
Net Current Assets			94,910		130,772
Net Assets			94,910		130,772
Total Funds					
Unrestricted Funds	21				
			94,910		130,772

Approved by the Board of Trustees on Monday 23rd January 2023 and signed on its behalf by:

Dr Joanne McCormack

Dr Joanne McCormack

PUBLIC HEALTH COLLABORATION
NOTES TO THE FINANCIAL STATEMENTS
Year Ended 31 March 2022

1. CHARITY STATUS

The charity is a Charitable Incorporated Organisation (CIO) and has no share capital and is registered in England and Wales. The CIO was registered on 17th March 2017, and the CIO's registered number and registered office address can be found within the Reference and Administration details on page 7 - 8 of the financial statements.

2. ACCOUNTING POLICIES

a. Basis of Preparation of Financial Statements

The financial statements have been prepared in accordance with 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 2015) - (Charities SORP FRS 102) and the Charities Act 2011. In drafting these financial statements, the charity has also taken advantage of the exemptions for smaller charities contained in Charity Commission publication CC17. Public Health Collaboration meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s). The financial statements are presented in pound sterling (£) which is the charity's functional and presentation currency.

b. Preparation of the financial statements on a going concern basis

Public Health Collaboration reported a net deficit in the reporting period of £35,862, with total funds held at the end of the period of £94,910. The trustees are of the view that, on the above basis, the charity is a going concern. Public Health Collaboration is reliant on donations and memberships to continue providing their core services. The economic outlook and cuts in public spending, are a potential area of financial uncertainty for the charity.

c. Incoming Resources

Donations and memberships are recognised in the financial statements on the date they are received. Income from other trading activities, fundraising and charitable activities is included in the period in which it relates. Grants, whether they are of a general nature or for a specific purpose, are recognised as a charitable activity and recorded at the date received.

d. Resources Expended

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with use of resources. Costs of generating funds are those costs incurred in attracting donations, and those incurred in trading activities that raise funds. Charitable activities include charitable distributions and the costs involved in the provision of services that the Public Health Collaboration provides. Governance costs include those incurred in the governance of the charity and its assets and are primarily associated with constitutional and statutory requirements. Resources expended include attributable VAT which cannot be recovered.

e. Taxation

Under section 505 ICTA 1988 the charity is exempt from certain taxes. Full account is taken of tax credits attaching to gifts and qualifying donations. Public Health Collaboration has charitable status and is exempt from Income Tax on income it receives.

f. Debtors

Trade and other debtors are recognised at the settlement account due. Prepayments are valued at the amount prepaid.

g. Creditors and Provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

h. Financial instruments

Public Health Collaboration only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method. Financial assets, includes trade receivables, cash and balances and investments are recognised at transaction value. Financial liabilities, includes trade payables and recognised at transaction value. Trade payables are obligations to pay for goods and services required from suppliers in the course of business activities.

i. Reserves Policies

Unrestricted reserves are one fund that covers the day-to-day operations of the charity. Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds. Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources.

3. DONATIONS AND LEGACIES

	Year Ended 31 March 2022	Year Ended 05 April 2021
Donations	£63,120	£120,128
	£63,120	£120,128

4. OTHER TRADING ACTIVITIES

	Year Ended 31 March 2022	Year Ended 05 April 2021
Books and Publications	£10,212	-
Conference Income	£744	-
Merchandise Income	£80	-
	£11,036	

5. INCOME FROM CHARITABLE ACTIVITIES

	Year Ended 31 March 2022	Year Ended 05 April 2021
Fundraising Income	£3,137	-
Membership	£10,465	-
	£13,602	-

6. EXPENDITURE ON RAISING FUNDS

	Year Ended 31 March 2022	Year Ended 05 April 2021
Books and Publications	£5,606	-
Conference Expenditure	£272	-
Merchandise Expenditure	£1,134	-
Other Events Expenditure	£553	-
	£7,565	-

7. EXPENDITURE FROM CHARITABLE ACTIVITIES

	Year Ended 31 March 2022	Year Ended 05 April 2021
Advertising	£952	-
Bank Charges	£1,117	-
Computer Costs	£10,843	-
Insurance	£185	299
Printing, Postage and Stationery	£1,511	2,004
Telephone and Internet	-	2,911
Travel and Accommodation	2,716	-
Staff Costs	33,750	26,880
The Lifestyle Club	59,130	-
Governance	5,851	950
	116,055	33,044

8. STAFF COSTS

	Year Ended 31 March 2022	Year Ended 05 April 2021
Salaries	£33,750	£26,880

The staff costs relate to the salaries paid to the full time Director who runs the Public Health Collaboration.

The Key Management Personnel of Public Health Collaboration is the Director.

No employee received remuneration in excess of £60,000 in either the current or previous year.

The average number of employees during the year were 1 (2021: 1).

9. TRUSTEE REMUNERATION AND EXPENSES

During the year no reimbursement of expenses or remuneration was paid to Trustees.

10. MOVEMENTS IN TOTAL FUNDS FOR THE YEAR

This is stated after charging:	Year Ended 31 March 2022	Year Ended 05 April 2021
Independent Examiner's Fee	£110	£350

11. DEBTORS AND PREPAYMENTS

Due Within One Year	Year Ended 31 March 2022	Year Ended 05 April 2021
Prepayments	£938	-
	£938	-

12. CASH AT BANK AND IN HAND

	Year Ended 31 March 2022	Year Ended 05 April 2021
HSBC – Current	£137,652	£130,772
	£137,652	£130,772

13. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	Year Ended 31 March 2022	Year Ended 05 April 2021
Creditors	£3,600	-
Accruals	£39,634	-
Paypal Account	£446	-
	£43,680	-

14. MOVEMENT IN FUNDS

	As at 06 April 2021	Income	Expenditure	As at 31 March 2022
General Fund	£130,772	£87,758	£123,620	£94,910
Total Funds	£130,772	£87,758	£123,620	£94,910

Unrestricted reserves are one fund that covers the day-to-day operations of the charity.

Restricted funds are those for a pre-agreed purpose where the donor has imposed conditions on the use of the funds. The policy for such funds is to adhere to the relevant conditions; temporary timing differences for income received may occur at the reporting date and is the reason for negative balances on some funds.

Designated reserves are built up of surplus unrestricted reserves assigned for specific purposes and are explained in more detail below. The trustees have decided that setting aside funds in this way is an effective financial discipline which helps the charity make the best use of its resources. These are reported as follows:

- General Reserve - to cover 3-6 months running costs and any potential wind-up costs of the charity.

15. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Total Funds As at 31 March 2022	Total Funds As at 05 April 2021
Current Assets	£138,590	£130,772
Current Liabilities	(£43,680)	-
Net assets	£94,910	£130,772

16. RELATED PARTIES

Other than the following, no trustee or connected person has received fees or emoluments, or reimbursement of expenses incurred during the year.

Merlin Accountancy Services Ltd

A company owned by Giles Corby, became a trustee and treasurer of the Public Health Collaboration in April 2022. During the year donations of £144 were received by the charity and £376 was accrued for bookkeeping and accounts work for the year ended 2021/2022.

	2022	2021
Amount due to related party at the balance sheet date	£376	-

PUBLIC HEALTH COLLABORATION

England & Wales - Charity number 1171887

Accounts

ANNUAL REPORT

2020/2021

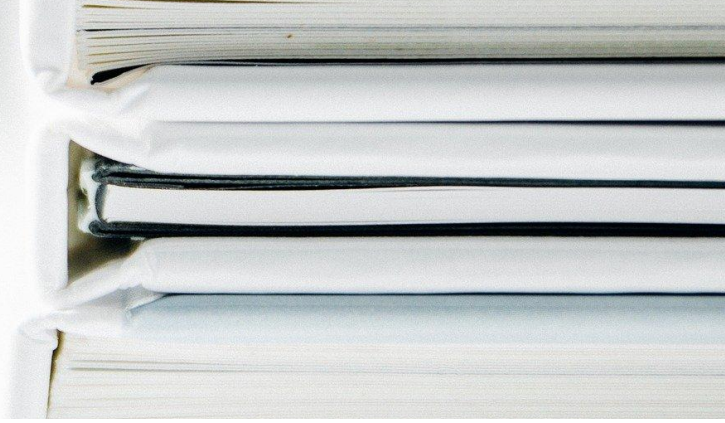


To advance (for the public benefit) the health of the public by contributing to the improvement of the level of knowledge, understanding and best practice concerning healthy diet and exercise among members of the public and healthcare professionals.

Charity Registration Number 1171887
www.phcuk.org

Annual Report and Financial Statement
for the year ending 5th April 2021

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ADMINISTRATION & GOVERNANCE

The Public Health Collaboration (PHC) was registered as a Charity Incorporated Organisation (CIO) on the 17th of March 2017. Its Charity registration Number is: 1171887

TRUSTEES

Dr Joanne Ruth McCormack (Chair)

Dr Ian Lake

Dr Trudi Deakin

The trustees are responsible for the overall governance of the charity. The trustees have delegated the day-to-day running of the charity to the Charity Director.

SCIENTIFIC ADVISORY BOARD

Dr Aseem Malhotra (Chair)

Dr David Unwin (Vice-Chair)

Dr Joanne McCormack

Dr Ian Lake

Dr Jen Unwin

Dr Ayan Panja

Dr Trudi Deakin

Dr Campbell Murdoch

Dr Katharine Morrison

Dr Tasmin Lewis

The Scientific Advisory Board ensures that the PHC is giving accurate, evidence-based advice, based on the latest scientific research.

STAFF

Sam Feltham - Charity Director

FOREWORD

It was a long time coming, but by Christmas day 2020 my hair was down to my shoulders and it was about time that I had it cut. My wife and daughter relished the chance to remove my [lockdown locks](#) and as I'm never one to miss a fundraising opportunity, we managed to turn what was a difficult situation into something positive by raising £1,327 for the charity. This pretty much sums up how this year has been.



A tremendous amount of things happened this year but one stands out, and that is how everyone within the PHC pulled together. From shifting the annual conference online to publishing our work in a peer-reviewed journal, everyone moved forward as one. From the bottom of my heart, I'd like to thank the scientific advisory board, patrons, members and ambassadors for going above and beyond to help make the most of what was a difficult year.

That being said, although this year was difficult, there are so many opportunities ahead of us that I have a lot of hope for what the future holds and I'm certain that next year will be our best yet.

Onwards and upwards,

Sam Feltham

Sam Feltham

Director of the Public Health Collaboration





ACTIVITIES

AMBASSADORS PROGRAMME

Throughout this year the Ambassadors Programme has continued to grow, and now we now have a network of 260 volunteers. These volunteers operate from Exeter to Edinburgh, and the hard work they put into their lifestyle support groups forms the cornerstone of our efforts to spread the messages of better health through local communities across the UK.

In order to illustrate some of the success stories from our ambassadors and supportive NHS healthcare professionals, we have produced a [Case Study Book](#). The examples laid out within this book showcase why individuals chose to become ambassadors, how they set up their lifestyle support groups, and the amazing results they achieved in their communities.



The book is full of inspiring journeys and data, including that of Lou Walker, PHC Ambassador for Winchester. Not only did Lou help people reduce their medication and improve their health, but her results were published in [BMJ Nutrition, Prevention & Health](#). Produced with fellow ambassador Christine Delon, and local GP, Dr Natalie Smith, the paper was possibly the first study to demonstrate improved health outcomes through lifestyle changes in an NHS GP practice during the pandemic. Titled “Weight loss, hypertension and mental well-being improvements during COVID-19 with a multicomponent health promotion programme on Zoom: a service evaluation in primary care”, the paper concluded that:

“A multicomponent weight loss and health promotion programme with a low-carbohydrate dietary component, clinically and statistically significantly improved health outcomes including weight status, blood pressure and mental well-being in a group of primary care patients when delivered remotely. Further research is warranted.”

Thanks to contributions from PHC donors, we were able to make this paper open access, for everyone to read for free. As a result, this paper is also listed in the top 5% of all research outputs by [Altmetric](#). It's such a proud moment for us to see our ambassadors beginning to publish papers in world-renowned journals.



We'd also like to acknowledge the ambassador for Derby, Neil Roberts, who was featured in a news segment on [BBC East Midlands Today](#), raising awareness of how important lifestyle support is for people with type 2 diabetes. The piece explained how his groups couldn't meet up during lockdowns, and the negative impact this had on their type 2 diabetes management. This demonstrates how vital our ambassadors and our peer-to-peer support groups are in helping people improve their health.

ANNUAL CONFERENCE & REAL FOOD ROCKS

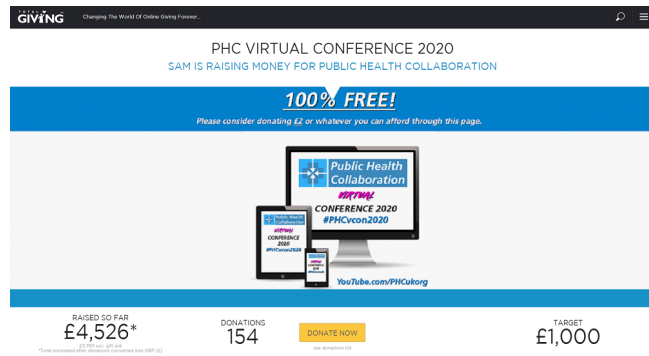
We always aspire to host thought leaders from around the world at our annual conference, and this year we were looking forward to hearing from the likes of Dr Sarah Hallberg from the US and Bitten Jonsson RN from Sweden. However, due to the changing circumstances surrounding Covid, we had to rapidly adapt and move the conference online.



This was no easy task. But thanks to technology, and to everyone involved going above and beyond, we were able to host a very successful online conference. The speakers were able to record their presentations at home using their own computers, which were then sent to us to be edited and uploaded to the [PHC YouTube channel](#) for live-streaming in May.

This "virtual" conference went ahead on the original dates of the 16th and 17th May. The online event ran smoothly and all delegates were able to interact through the comments section of the videos as well as on social media. We also used the hashtag [#PHCvcon2020](#) in order for delegates to interact more easily.

Usually, tickets for our conference cost around £100 per day, but because this year's event was online we decided to make the conference free, in order to help share our message as far and wide as possible. However, we did ask for donations using [TotalGiving](#), and ultimately raised £4,526 including Gift Aid. It was humbling to see so many people make voluntary donations for the conference, and we would like to thank every single person who donated.



It was particularly exciting to note the viewing figures for the conference. Over the weekend we had more than 14,000 unique viewers watching approximately 7,700 hours of content via our [YouTube channel](#). These numbers were so astounding, that we may in future decide to host both a virtual and an in-person conference. In this way, we can reach a much broader audience with our messages.

In addition to these fantastic conference viewing figures, this year saw our YouTube channel reach the milestone of 15,000 subscribers: a noteworthy achievement, considering that we don't advertise whatsoever. What's more, between 6th April 2020 and 5th April 2021, our YouTube channel had 944,465 views which resulted in 227,700 hours of watch time, and an average view duration of 14 minutes and 28 seconds. The average view duration is in the 3 minute range, so we're encouraged that our videos keep people engaged for so long.

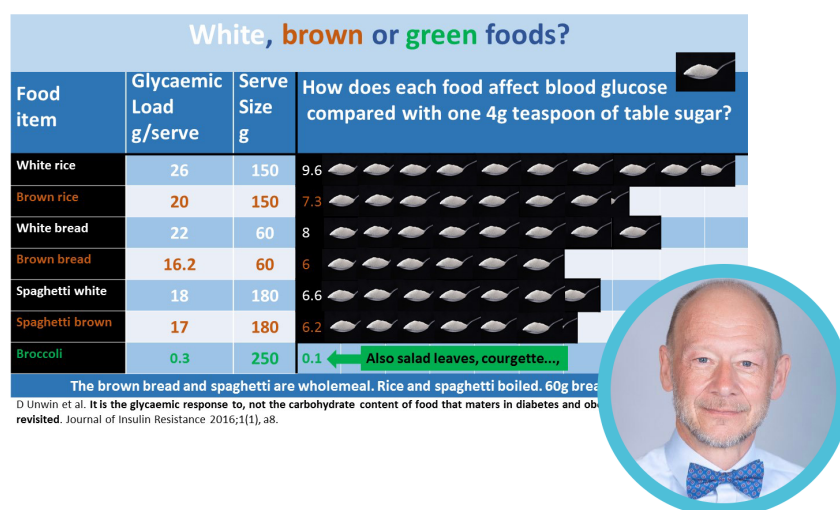
We also usually host another annual event called [Real Food Rocks](#). In 2019, we held our first Real Food Rocks festival at Brathay Hall near Ambleside, Cumbria. This was incredibly successful, and so we were looking forward to hosting our second at Millets Farm near Oxford. However, due to government restrictions we were unable to do so, and the decision was made to postpone this event until 2021.



SPREADING THE MESSAGE

We spread and validate our message in a number of ways, and one of the main avenues is through our Scientific Advisory Board. This year, our Vice Chair Dr David Unwin was particularly busy sharing his knowledge and our key messages with audiences far and wide.

In June 2020 he published a new version of his [sugar infographics](#) for white, brown and green foods. Dr Unwin's sugar infographics are world-renowned, and are designed to help people understand at a glance the effects that various foods may have on blood sugar levels, by comparing their sugar content to a 4-gram teaspoon of table sugar. His newest version featured a wider range of foods, including white rice (the equivalent to about 9 teaspoons of sugar per 150g portion) and a 250g portion of broccoli (which is equivalent to 0.1 teaspoons of sugar).



In addition to publishing this new version, we also received a German translation of Dr Unwin's sugar infographics, followed by Greek, French, Japanese, Portuguese, Kurdish, Filipino and Italian translations throughout the year. In total, these infographics are now available in 15 different languages.

Dr Unwin also published a new peer-reviewed paper in [BMJ Nutrition, Prevention & Health](#). Titled "Insights from a general practice service evaluation supporting a lower carbohydrate diet in patients with type 2 diabetes mellitus and prediabetes: a secondary analysis of routine clinic data including HbA1c, weight and prescribing over 6 years", the paper concluded that:

"This approach to lower carbohydrate dietary advice for patients with T2D and prediabetes was incorporated successfully into routine primary care over 6 years. There were statistically significant improvements in both groups for weight, HbA1c, lipid profiles and blood pressure as well as significant drug budget savings. These results suggest a need for more empirical research on the effects of lower carbohydrate diet and long-term glycaemic control while recording collateral impacts to other metabolic health outcomes."

The paper was very widely read, and according to [Altmetric](#) is in the top 5% of all research outputs scored by the organisation. This was facilitated by PHC donors, who paid to make the paper open access and available for everyone to read for free. Thank you to everyone who donated this year.

Over the past five years, it's been incredible to see the level of support we've managed to garner from NHS healthcare professionals. This realisation came completely coincidentally by way of a [Daily Mail article](#) which outlined how an "army" of doctors was growing out of inspiration from Dr David Unwin's work. It's a true honour to have Dr David Unwin as part of the Public Health Collaboration, and we very much look forward to seeing what next year holds.



Other members from our Scientific Advisory Board also had a busy year. Two of our trustees, Dr Ian Lake and Dr Trudi Deakin PhD took on the [Zero Five 100 challenge](#), which required them to run or walk 100 miles over five days whilst fasting, or consuming zero calories. Alongside them was Olympic rower James Cracknell, PHC ambassadors Jon Furniss and Gayle Gerry, and PHC patron, Steve Bennett. The idea of the challenge was to demonstrate that it's possible to do endurance exercise whilst fasting. To give people a good sense of what happened during the challenge, Steve Bennett put together a very well produced [20-minute documentary available on YouTube](#).

Lastly, in September 2020 we added a new [randomised controlled trial to our summary table](#), which is widely distributed in the real food community. The table presents the most up-to-date summary of those randomised controlled trials (RCTs) comparing low-fat and low-carb diets in the context of weight loss or controlling blood glucose. This latest study brought the total number to 64 trials, with 55 of those showing greater weight loss for low-carb diets compared to low-fat diets.

FUTURE PLANS

If this year has taught us one thing, it's that the future is uncertain and that you must be prepared for anything. With that in mind, next year we will be seeking to have a governance review and charity health check. Although we feel we have adapted well this year, we think that we can do better, and so that is why we would like an external assessment of the PHC.

We also feel that after 5 years of having the same website and logo, that it is time for a fresh new look. In the new year ahead we will seek to commission a web and graphic designer to give the PHC a digital makeover. Another lesson learnt is that we share a lot of our information online and so, we will also look at creating a stronger presence online through a social media strategy.

Lastly, the level of financial support that we have received through this year has been overwhelming. It's been a tough year for a lot of people, and the fact that people kept on donating to us is very much appreciated. One donor stands out in particular, and that is Steve Bennett. An entrepreneur from Birmingham, Steve has had his own physical transformation and so knows how difficult it is to reclaim good health. In December 2020, Steve reached out to us and has kindly pledged a significant sum of funding to help build the work of the PHC. This will allow us to move to the next step of creating an accredited health coach service that will be able to be commissioned through the NHS for people living with prediabetes and type 2 diabetes. Although we are in the early period of planning, we have named this service The Lifestyle Club, and plan to pilot it in 2021.



ACCOUNTS

Public Health Collaboration

Receipts and Payments Accounts

For the Period 6th April 2020 to 5th April 2021

Section A Receipts and Payments

A1 Receipts

Description	Unrestricted Funds	Restricted Funds	Total Funds	Last Year
Donations	120,128	-	120,128	64,869
Fund-Raising Events	-	-	-	21,176
Sub-Total (Gross Income)	120,128	-	120,128	86,045

A2 Assets and Investment Sales

Sub-Total	-	-	-	-
Total Receipts	120,128	-	120,128	86,045

A3 Payments

Cost of Events	-	-	-	27,522
Wages	26,880	-	26,880	23,629
Telephone and Internet	2,911	-	2,911	578
Printing, Postage and Stationery	2,004	-	2,004	2,609
Bank Interest and Charges	-	-	-	335
Travel	-	-	-	504
Insurance	299	-	299	299
Other Charges	950	-	950	1553
Sub-Total	33,044	-	33,044	57,029

A4 Assets and Investment Purchases

Sub-Total	-	-	-	-
Total Payments	33,044	-	33,044	57,029

Description	Unrestricted Funds	Restricted Funds	Total Funds	Last Year
Net of Receipts (Payments)	87,084	-	87,084	29,016
A5 Transfers between Funds	-	-	-	-
A6 Cash Funds Previous Year End	43,688	-	43,688	14,672
Cash Funds This Year End	130,772	-	130,772	43,688

Section B Statement of Assets and Liabilities at the End of the Period

	Unrestricted Funds	Restricted Funds	Endowment Funds
B1 Cash Funds	130,772	-	-
B2 Other Monetary Assets	-	-	-
B3 Investment Assets	-	-	-
B4 Assets Retained for Charity's Own Use	-	-	-
B5 Liabilities	-	-	-
Total Funds	130,772	-	-


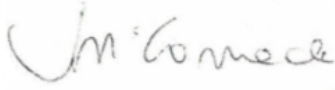
Notes to the accounts


The charity had a significant surplus at the financial year end which was due to two main reasons.

- 1) Expenditure was lower due to the Annual Conference moving online and cancellation of the Real Food Rocks event, resulting from Covid restrictions.
- 2) Significant unrestricted donations were received shortly before the end of the financial year which the trustees have earmarked for the development of The Life Style Club education programme and capacity building of the charity. These funds will be utilised during 2021-22.

Reserves Policy - The charity does not currently have a reserves policy but will look to introduce one next year due to the increase in income.

Signed by two trustees

Signature	Print name	Date of Approval
	DR IAN LAKE	04/02/2022
	DR JOANNE MCCORMACK	04/02/2022

 CHARITY COMMISSION FOR ENGLAND AND WALES		Independent examiner's report on the accounts	
Report to the trustees/ members of		PUBLIC HEALTH COLLABORATION	
On accounts for the year ended		Charity no (if any)	
5th APRIL 2021		1171887	
Set out on pages		PAGE 10,11,12	
Responsibilities and basis of report		<p>I report to the trustees on my examination of the accounts of the above charity ("the Trust") for the year ended</p> <p>As the charity's trustees, you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ("the Act").</p> <p>I report in respect of my examination of the Trust's accounts carried out under section 145 of the 2011 Act and in carrying out my examination, I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.</p>	
Independent examiner's statement		<p>[The charity's gross income exceeded £250,000 and I am qualified to undertake the examination by being a qualified member of [insert name of applicable listed body]]. <i>Delete [] if not applicable.</i></p> <p>I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination (other than that disclosed below *) which gives me cause to believe that in, any material respect:</p> <ul style="list-style-type: none"> • the accounting records were not kept in accordance with section 130 of the Charities Act; or • the accounts did not accord with the accounting records; or • the accounts did not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 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. <p>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 accounts to be reached.</p> <p><i>* Please delete the words in the brackets if they do not apply.</i></p>	
Signed:		Date: 27.1.2022	
Name:		CAROLINE McALINDON	
Relevant professional qualification(s) or body (if any):		ACA	

Address:	105 GROVE LANE
	HALE ALTRINCHAM
	CHESHIRE WA15 8JQ
	Only complete if the examiner needs to highlight material matters of concern (see CC32, Independent examination of charity accounts: directions and guidance for examiners).
Give here brief details of any items that the examiner wishes to disclose.	