

## **Trustees' Annual Report for the period**

**From 31<sup>st</sup> December 2019 To 31<sup>st</sup> December 2020**

**Charity name:** Castlepines Medical Foundation

**Charity registration number:** 1187050

**Charity address:** Level 4, 97 Jermyn Street, St James's, SW1Y 6JE

### **Trustees:**

**All Trustees acted for the whole year other than as specified below**

**David Grose, Chairman**

**Neil Carpenter, Secretary**

**Stanley Shepherd, Treasurer (appointed 18 Sep 2020)**

**Ngozi Erundu**

**Ian Jacobson**

**David Heymann**

**Tafadzwa Mugwagwa (appointed 23 Apr 2020)**

## **Structure and management**

The charity is constituted as a Charitable Incorporated Organization whose only voting members are its trustees.

The charity is managed by the Board of trustees under the chairmanship of David Grose. The Board held 8 meetings during the year.

Trustees have been identified through known contacts of current trustees and recruited and appointed by the Board.

The potential trustee is introduced to the existing Board of Trustees and is interviewed by the Chairman and at least one other trustee. Following a successful interview, the applicant will be discussed by the Board to ensure the individual provides a complementary set of skills, knowledge and experience, and has the commitment required to be an actively contributing Board member. Trustees are appointed to the Board based on the skills, knowledge and experience that they bring to the Charity to complement those of the other trustees.

The Board will vote to determine whether the applicant should be invited to become a trustee and, if a quorum (minimum 4 votes) is reached with positive votes, the applicant is formally invited to become a trustee. On appointment, the new trustee will receive a copy of the current signed Constitution as well as access to all historic trustees Annual Reports and statements.

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## Objectives

The advancement of health and relief of suffering, principally from non-communicable diseases and long-term chronic illnesses such as high blood pressure, hypertension, cardiovascular, coronary heart disease and diabetes to countries in Africa, through providing medicines to hospitals and health centres where there is no adequate provision of these health services to vulnerable children and adults by the State.

## Pre-formation Activities

The charity was inspired and founded by David Grose whose driving purpose was set out by him as follows:

*All really for me is service to God by serving the poor, wherever in the world, but Africa has my heart and that's been long-standing. I saw poverty up close in my 2 years in Calcutta at age 32 and therefore set the scene for what I do today. I don't like suffering, or bullying and cruelty, and so wish to do something about it, rather than just complain about it.*

*In 2018 Project Zambezi started by my seeing the obscene truth of pharma companies charging 9 – 10 times production cost for common medicines and so my desire to buy into a pharma company and drop prices by 80 – 90%, and still make a profit!*

David Grose invited a group of his trusted associates who he knew would share his views on the health needs of the poor and disadvantaged and would want to act, including Neil Carpenter, Ian Jacobson, Prof. David Heymann, Dr. Stan Shepherd, and Ngozi Erundu, all of whom subsequently became trustees of Castlepines Medical Foundation when the charity was registered in December 2019.

The group met during 2018 and 2019 and decided that their start point would be to help with the 'last mile' problem for basic medicines, including those for non-communicable diseases (NCDs). Medicines for communicable diseases such as malaria and HIV/AIDS are procured and distributed by global NGOs, whereas NCD medicines are considered essential medicines and are expected to be provided by the underfunded public health systems. This has led to huge drug shortages in the public sector. Through their networks and research the team were aware that in many countries in Africa basic medication for NCDs reaches district hospitals and clinics but frequently gets no further in rural areas.

The group reasoned that since other commodities, for example, water, beverages, and bread, do get through the last mile, there was an opportunity to work with those other suppliers to add medicines to their delivery schedules. The project was named Project Zambezi after the river which connected many of the sub-Saharan countries the team wanted to operate in.





The group carried out an analysis on which country in Africa would be most suitable to begin the last-mile project and after a comprehensive selection process identified Zimbabwe as the place to start. Zimbabwe would be challenging due to economic and political volatility, but has a strong education system and an educated population, a strong medical system with a well-distributed network of health facilities, albeit underfunded, and where English would be commonly spoken.

Ngozi Erundu, through her contacts at the London School of Hygiene and Tropical Medicine identified two key Zimbabwean colleagues who lived and worked in Zimbabwe and were willing to provide support for the project. They became part-time consultants to the project in 2019 when more technical work was required for Project Zambezi initiation.

In May 2019 Ngozi Erundu and Stan Shepherd travelled to Zimbabwe for a week to meet with the two Zimbabwean colleagues. The purpose of the visit was to meet potential partners to assist with the distribution of medicines to the last mile, and to visit hospitals and rural clinics to assess the need and identify potential solutions. They also met the Deputy Minister of Health, Dr. Mangwiro, representatives from WHO and USAID, District Medical Officers and NatPharm, the Government agency for supply and distribution of medicines in Zimbabwe.

The visit confirmed the need for better distribution of NCD medicines in Zimbabwe, and the concept of helping with the 'last mile' problem received strong support from potential partners.

Over June and July 2019 the group further developed the plan for supporting the 'last mile' problem.

From 29<sup>th</sup> July to 2<sup>nd</sup> August 2019 Ngozi Erundu and David Grose travelled to Zimbabwe to refine the plan with the local representatives and cement relationships with potential partners and the Zimbabwean Government.

The costs of all the pre-formation activities, including consultancy fees for the local representatives in Zimbabwe and for the two UK researchers, travel, transport and accommodation for the two visits to Zimbabwe, and meeting room hire amounted to £72,116.94. David Grose paid all the charities expenses in 2019 and the consultancy fees in 2020 (for work done in 2019) from his personal funds.

To support the delivery of Project Zambezi, the group resolved to form a charity, Castlepines Medical Foundation, and the charity was registered with the Charities Commission on 19<sup>th</sup> December 2019.





## Activities

Following the visits by trustees to Zimbabwe in 2019, the Charity planned to focus on identifying key areas where it can impact the supply and delivery of medicines for non-communicable diseases and long-term chronic, especially the problem of 'the 'last mile' in rural areas, that is the delivery of medicines to the nearest healthcare facility to patients who need the medicines.

## Achievements and Performance

The charity had no option but to pause any travel in 2020 during the Covid epidemic and its aftermath.

The trustees met on 8 occasions during 2020 to secure grant funding to support the charity's activities. Despite multiple grant giving bodies being approached, a persistent block on progress was the lack of a bank account by the charity.

When looking through banking requirements, Neil Carpenter noted that the charity did not officially have a Charity Secretary or Treasurer.

Neil Carpenter was agreed unanimously by the trustees to be the Charity Secretary.

Stan Shepherd was agreed unanimously by the trustees to be the Charity Treasurer.

Ngozi Erundu reported that fundraising is being hampered by the charity not having a bank account as a bank account is a requirement for many grants.

The Board agreed that, despite the delays because of COVID-19, they still wanted to open a bank account for the Charity and asked the Chairman and Treasurer to go ahead with opening a bank account.

However, efforts by the Chairman and Treasurer to open a bank account for the charity in December 2020 proved impossible. There was a reluctance by almost all UK High Street banks to open new accounts for charities during the Covid epidemic and its aftermath.

Metro Bank agreed to consider an account and the Chairman and Treasurer met with Metro Bank on 5 occasions from 5<sup>th</sup> December 2020 to 23<sup>rd</sup> December 2020.

On 29<sup>th</sup> December 2020 the Treasurer received a call from Metro Bank stating that the bank had rejected the charity's application for a Bank Account. The reason given was *"Your activities do not match with the risk profile of the bank"*.

Ngozi Erundu supervised the development of a website for the charity and a Fundraising video.

The trustees discussed the benefit of starting a Project Zambezi limited company, as well as the charity. Whilst there were concerns about diluting the objectives of Castlepines Medical



Foundation by having other shareholders involved who may want a return, David Heyman made the point that there were many investors who wanted to invest in ethical businesses rather than providing support to charities. They would do this without wanting shares or a return on funds as long as they could see the impact that their investment is having and that profits were being reinvested.

The Trustees confirmed by unanimous agreement that Ngozi Erundu should go ahead and put together Articles of Association with a view to setting up limited company once these have been approved by the Trustees.

Subsequently on 19<sup>th</sup> November 2020 Project Zambezi Limited was incorporated as a Private Limited Company with its Registered office address at 97 Jermyn Street, London, England, SW1Y 6JE. The 100% shareholder was Castlepines Medical Foundation, and the directors were Ngozi Erundu and Castlepines Medical Foundation.

## **Financial review**

The charity did not engage in any fund raising during 2020 and received no funds. The only expenses paid were in January and February 2020 for Consultancy Fees of £1,010.00 to two UK researchers for work completed at the end of 2019.

At the end of 2020 the charity had no funds and no reserves. As a result of the pre-formation activities the charity had an outstanding loan of £72,116.94 from David Grose who had paid all the charities expenses in 2019 and the consultancy fees in 2020.

The Trustees discussed the need to review conflicts of interests of members. It was decided that David Grose had no conflict of interests as Chair because he had declared his contributions to the charity of £72,116.94 and wields no undue power over the board.

David Grose stated that the initial investment is to be paid back from the proceeds of Project Zambezi. The Trustees agreed to this arrangement and formally recorded their gratitude for David Grose's contributions including providing administrative support through his personal staff for Project Zambezi.

David Grose suggested that should he be removed from the Chair the Charity should change its name to ensure no malfeasance of name use and risks to his company, Castlepines Equity.

No funds were held as a custodian trustee.



## **Reporting**

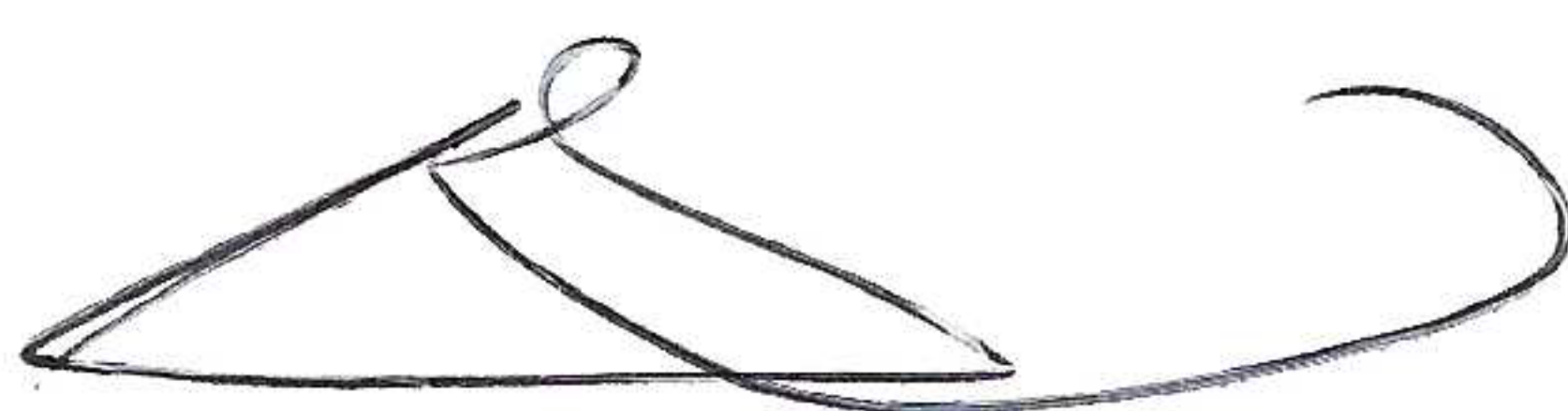
This 2020 Trustees Annual Report, and the 2020 Annual Return and 2020 Annual Accounts have been submitted late. This was due to initial inexperience on the part of the trustees, which has now been overcome.

## **Declarations**

The trustees declare that they have approved the trustees' report above.

Signed on behalf of the charity's trustees

**Signature**



**Full name**                **David Grose**  
                                 **Chairman**

**Date**                        **24<sup>th</sup> November 2023**



# Castlepines Med

## Income and Expenditure 1st Janu

Income	£/GBP
<b>Net Sales</b>	Nil
<b>Charitable Activities</b>	
<b>Grants received</b>	Nil
<b>Public Body Grants</b>	Nil
<b>Donations &amp; Legacies</b>	
<b>Donations - Companies</b>	Nil
<b>Donations - Individuals</b>	Nil
<b>Legacies</b>	Nil
<b>Total</b>	Nil

### Outstanding loan

<b>On 31st December 2019</b>	£71,106.94
<b>On 31st December 2020</b>	£72,116.94

### NOTES

Outstanding loan is interest free with no fixed term  
 Repayment is due at times and in amounts determinir  
 Trustees do not claim travel or other expenses



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**ary 2020 to 31st December 2020**

<b>Expenditure</b>	<b>£/GBP</b>
<b>Cost of Sales</b>	Nil
<b>Charity Administration</b>	Nil
<b>Web design and admin</b>	Nil
<b>Trustees meetings</b>	Nil
<b>Staff costs (UK)</b>	Nil
<b>Consultancy fees</b>	1,010.00
<b>Miscellaneous costs and consumables</b>	Nil

<b>Total expenditure</b>	<b>1,010.00</b>
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<b>Closing bank balance</b>	Nil
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