Knowledge for Change Annual Report & Accounts

2020

By the end of 2020, Knowledge for Change had directly benefitted

Over 750,000

health workers, hospital patients, local community members and school children in low-income countries by improving quality and access to health and education systems.

This has included:

- ✓ Providing comprehensive training and mentoring for over 5,500 health workers in Africa and India
- ✓ Placing over 600 professional and student healthcare, social work and biomedical engineering volunteers from the UK to work in health and education facilities
- ✓ Completing 44 major international development and global health research projects
- ✓ Investing over £400,000 in the provision and repair of essential health facility infrastructure and equipment

Beyond the people who have benefitted directly, many more have benefitted indirectly from successful interventions being sustained and up-scaled; improved health and education outcomes for their family members and positive governmental policy changes influenced by our high quality and high impact research.

2020 highlights at a glance:

- Successful completion of our THET funded Antimicrobial Stewardship Project, in partnership with Salford University and the Pharmaceutical Society of Uganda, which achieved major reductions in inappropriate antibiotic prescription rates, lengths of hospital stays and maternal deaths from sepsis.
- Successful completion of our DFID funded Cervical Screening Project which involved setting up comprehensive cervical screening and treatment services at Kagote and Bukuuku Health Centres and running intense community awareness raising campaigns. To date, over 3,000 women have been screened and/or treated.
- Award of a new UKRI grant to establish Covid-19 testing facilities in Gulu, Uganda, in partnership with Uganda Virus Research Institute, Salford and Gulu Universities and Gulu Regional Referral Hospital.
- Award of a new MRC grant to Promoting Universal Health Coverage for Amputees through Social Enterprise and Engineering Innovation, in partnership with Makerere, Salford, Manchester and Aga Khan Universities.
- Successfully hosted 7 British Commonwealth Scholarship funded fellowships for Ugandan nursing, midwifery and pharmacy staff travelling to the UK to undertake intensive 3-month training programmes.

Front cover images (clockwise from top left)

1. Prosthetist, Oisin, working with local staff to fit new prosthetic arms for Ninsiima, a victim of domestic abuse, in Kampala
2. Kagote midwife, Euphrasia, completes her postgraduate certificate in health and social care at Salford University
3. Pharmacy lecturer, Clare, teaching school children in Fort Portal how to reduce the spread of infections
4. Project manager, Allan, manufacturing hand gel for distribution to local health facilities in Fort Portal
5. Nursing student, Peninah, enjoying well-earned ‘downtime’ whilst supporting a baby health clinic at Kagote Health Centre

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Back in 2017, Knowledge for Change supported Ninsiima, a survivor of domestic violence who lost both of her arms following an assault by her partner, by designing and fitting new prosthetic arms to enable her to continue earning money through chicken farming and to care for her five young children.

Ninsiima's story highlighted the challenges faced by amputees in countries like Uganda and led us to partnering with University researchers on two new projects to 'develop fit-for-purpose, affordable and locally manufactured upper-limb prosthetic devices' (2018-22) and to 'promote universal health coverage for amputees through social enterprise and engineering innovation' (2021-2023). These exciting new projects will improve the lives and opportunities of amputees living in Uganda.

Foreword from our Chair

As chair of Knowledge for Change (K4C), I am pleased and excited to present the sixth annual report for the Charity, together with a summary of our activities and our financial statements for the period 1st January to 31st December 2020. This will be a year that all of us remember, due to the sudden and severe impact of the Covid-19 pandemic which has affected billions of lives across the globe. Despite a feeling of optimism that we might soon reach the light at the end of the tunnel, many of the negative impacts of the pandemic on the health and wellbeing of societies around the world, including those in low- and middle income countries, will continue to be felt long into the future. Looking forwards, I hope this pandemic will act to raise awareness of the global nature of health and improve the preparedness and capabilities of countries to deal with similar scenarios in future, including the recurring Ebola and other haemorrhagic fever outbreaks which have affected some African countries for many years.

The effect of the pandemic on Knowledge for Change has been huge. We were forced to make important decisions at very short notice, including the repatriation of all our staff, professional volunteers and students from locations across Uganda in March. Our professional volunteering and student placement programmes remained suspended throughout the remainder of the year due to our concerns about risk, insurance and safeguarding. The cancellation of all student placements planned for 2020 had huge financial repercussions, leading to a reduction in annual income of over £70,000.

Despite the repatriation of all our UK staff and volunteers, the majority of our projects and activities were able to continue effectively due to the tremendous hard work, dedication and professionalism of our in-country clinical and administrative staff. They have continued to work tirelessly in the wake of unprecedented challenges faced over the course of the year. We continue to offer them our utmost gratitude and respect.

Some of our main successes over the course of 2020 included the successful completion of our DFID funded "Cervical Screening Project" and THET funded "Antimicrobial Stewardship Project" in May and October respectively. The highly positive impacts of these projects are detailed within in this report. We have also worked closely with partners on several new funding applications, some of which have since been successfully awarded. These have included an MRC funded project to promote universal health coverage for amputees in Uganda through social enterprise and engineering innovation; a UKRI funded project to establish Covid-19 testing facilities in Gulu (northern Uganda) and funding from the University of Salford to improve health facility procurement systems for drugs and basic equipment in Uganda. These exciting new projects form the basis of our activity planning for 2021, as we continue to await greater certainty before resuming our professional volunteering and student placement programmes.

I would like to thank all our staff, trustees, volunteers and stakeholders for their on-going support throughout 2020, which has enabled us to continue to improve the health and wellbeing of some of the poorest and most vulnerable communities in the world. I look forward to continuing this exciting and highly beneficial work over the course of 2021.

Professor Louise Ackers
31st December 2020

Strategic Report

An overview of who we are and what we do, a review of our achievements and performance in 2020, and a summary of our objectives for the coming financial year.

Who we are and what we do

BACKGROUND

Knowledge for Change (K4C) was registered with the Charity Commission for England and Wales in January 2012 (no. 1146911) and has been hosted by the University of Salford in Manchester since July 2014. Its working names are 'Knowledge for Change', 'Knowledge 4 Change' and 'K4C'. The official charity address is 11, Newmarket Street, Skipton, North Yorkshire, BD23 2HX.

Knowledge for Change formally merged with its sister charity, the Liverpool-Mulago Partnership (no. 1136219), in 2015 and continues to manage the legacy of both organisations.

OUR OBJECTIVES

"To improve the standard of healthcare and education provision for the poorest and most vulnerable members of society in Low- and Middle-Income Countries"

For over 10 years, we have been working across multiple hospitals and health centres in Uganda to sustainably improve the health system and achieve better standards of care for patients. The work we do includes the placement of professional volunteers, infrastructural developments, the provision and repair of medical equipment, staff training and capacity building, working with local educational institutions to develop new and improved undergraduate and postgraduate curricula, organising staff exchange programmes and running ethical and educational elective placements for students.

CORE VALUES

Our core values centre on making ethical, sustainable and mutually beneficial improvements to health and education systems LMICs. We believe that the best way to do this is through the transfer of knowledge between professionals and students working in the health and education systems in order to improve their skills and capacity. Sticking to these values ensures that we achieve the best long-term outcomes for all the High-, Middle- and Low-Income Countries that we work with.

CURRENT AREAS OF FOCUS

Knowledge for Change currently focuses most of its activities in Uganda, however we also have past and on-going linked projects and networks in Tanzania and India. Initially, we focused primarily on maternal and newborn health but have since expanded our remit to include other areas of health, social care, children's education, laboratory science and (in 2020) wildlife protection.

In line with our commitment to support populations of highest need, K4C works primarily in public (as opposed to private) health and education facilities, in recognition that these facilities cater for the poorest and more vulnerable members of society. Our in-country partners range from large urban hospitals to small rural health centres, primary schools, Universities, community-based organisations, local councils and governmental bodies.

OUR ACTIVITIES

International Development Projects:

K4C has run numerous international development projects over the years including sustainable volunteering, biomedical engineering, infection prevention and control, antimicrobial stewardship, cervical screening, developing a high dependency unit, promoting respectful maternity care, building accessible toilets within schools and supporting the Uganda Blood Transfusion Service amongst others. Our main donors have included Health Education England, the UK Department for International Development, the Tropical Health Education Trust and the Burdett Trust for Nursing. Many projects are run in partnership with the University of Salford, and all are designed and evaluated in line with our core values of sustainability, ethics and mutual benefit.

Professional Volunteering:

K4C's primary activity has included the placement of over 300 professional volunteers from High-Income Countries in Uganda over the last 10 years, initially supported by the UK Department for International Development through the Tropical Health Education Trust. These volunteers have included doctors, midwives, nurses, biomedical engineers, allied health professionals, social workers and social scientists; all of whom have worked alongside local staff to exchange valuable knowledge, skills and experience to the mutual benefit of both countries. Most volunteer placements are 6+ months in duration, however shorter placements are permitted when necessary. We have also supported over 50 Ugandan health workers to travel to the UK to complete training courses and degree programmes to enhance their learning, primarily funded by the British Commonwealth Fellowship Scheme.

"The continued presence of UK volunteers, working alongside my health workers, has transformed Kagote Health Centre into one of the best performing Community Health Centres in Uganda"

Dr Richard Mugahi, Assistant Commissioner for Reproductive Health, Uganda Ministry of Health

Student Placements:

More recently, K4C has begun to focus on the improving the education of students through undergraduate and postgraduate student exchange programmes. Our student placement project (initially supported by Health Education England) has now placed over 300 students in Uganda and India from courses including medicine, nursing, midwifery, the allied health professions, social work, prosthetics and orthotics and business. All student placements are linked to K4C's on-going development projects and are supervised by our highly competent team of professional volunteers and local staff.

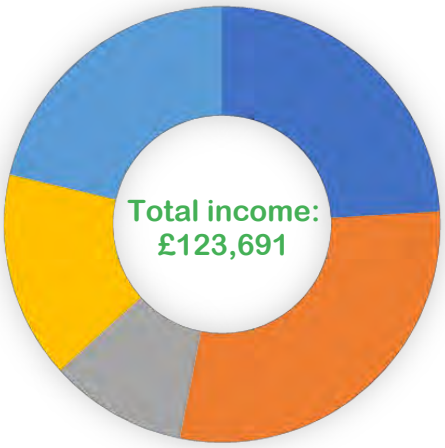
Global Health Research:

K4C endeavours to remain at the forefront of Global Health Research and has been closely involved with several research projects and publications, in partnership with the University of Salford. All K4C projects are designed to be dynamic and are closely monitored and evaluated in order to maximise their impact and cost efficiency. Research findings have been shared through policy reports, books and journal articles as well as regular presentations at conferences, workshops and with British and Ugandan government officials.

K4C clinical staff, Dr Judith Auma and Peninah Wampambah, provide essential health services at Kagote Health Centre.

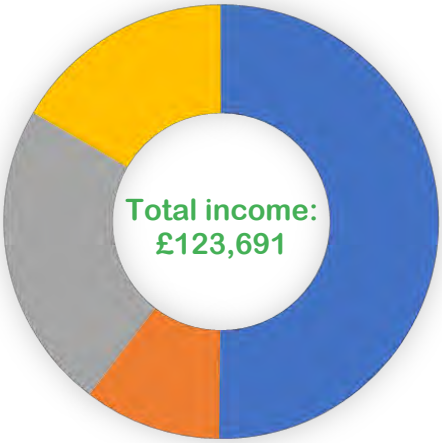
Income & Expenditure Highlights

Knowledge for Change's total gross income in 2020 was £123,691. Two breakdowns of our income are provided below; the first in relation to sources of income and the second in relation to its intended purpose:



24%	**£30k** from public donations
29%	**£36k** from organisations
10%	**£13k** from the Department for International Development (DFID)
16%	**£19k** from the Commonwealth Scholarship Commission
21%	**£26k** in refunds from cancelled placements*

50%	**£62k** for our Student Placement Project
10%	**£13k** for our Cervical Screening Project
23%	**£28k** for our Antimicrobial Stewardship Project
17%	**£21k** to support Commonwealth Scholarship Commission Fellowships
<1%	**<£1k** in miscellaneous/non-project specific funding



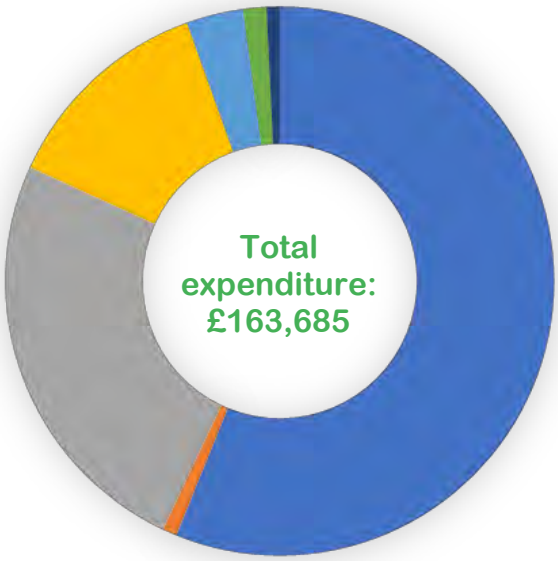
WHERE OUR INCOME CAME FROM IN 2020

Knowledge for Change's total income for 2020 was £123,691, a decrease of £73,807 (37%) on the previous year. This reduction in income was expected, primarily due to the severe impact of Covid-19 on income from our student placement programme, combined with the UK government's decision to reduce its expenditure on UKAid from 0.7% to 0.5% of GDP and the resulting reduction/delays in project funding. We do not expect our income to return to the levels achieved prior to the Covid-19 pandemic until the 2022 financial year.

*Refunds from flights cancelled due to the Covid-19 pandemic has been included for reference.

Income & Expenditure Highlights

Knowledge for Change's total expenditure in 2020 was £163,685. A breakdown is provided below:



- 56% **£92k** on student placements
- 1% **£1k** on biomedical engineering, blood transfusion and laboratory services
- 25% **£41k** on hand hygiene, infection prevention and control (IPC) and antimicrobial stewardship
- 13% **£21k** on cervical screening services
- 3% **£5k** on non-project specific equipment and infrastructure
- 1% **£2k** on Commonwealth Scholarship Commission Fellowships
- 1% **<£1k** on 'other' costs including banking and website costs

EXPENDITURE FOR 2020 AT A GLANCE

Knowledge for Change's total expenditure for 2020 was £163,685, an increase of £20,781 on the previous year. This increase was largely due to the recruitment of three new clinical staff in Uganda, additional contributions towards project management staff time at the University of Salford and the costs incurred in repatriating our professional volunteers from Uganda to the UK at the beginning of the Covid-19 pandemic.

For every pound we spent during 2020, 85p was spent on our charitable activities. The remaining 15p per pound was spent on our project management and administration costs in the UK and Uganda (totalling £25,016). A further breakdown of all income and expenditure can be found in our annual accounts (see pages 30-35).

Our Activities and Impact

How are we achieving our charitable objectives?

OUR REACH IN 2020

Our work to strengthen health and education systems in Low- and Middle-Income Countries continued throughout 2020, despite the unprecedented impacts of the Covid-19 pandemic. In Uganda, where the majority of our project activities currently take place, we provided training and capacity building for over 200 medical, nursing and midwifery staff in areas such cervical screening, antimicrobial stewardship, infection prevention and control and respectful midwifery care. Our activities directly benefitted over 20,000 local people who accessed improved healthcare services. For example, our Antimicrobial Stewardship Project successfully reduced maternal mortality due to sepsis following c-section at Fort Portal Regional Referral Hospital by over 95% in 2020 (compared to the number of cases in 2018).

Over 95% of the total number of people reached by our activities were women. This is highly significant as women make up the majority of disempowered and impoverished populations in Uganda. This success aligns with several of the UN Sustainable Development Goals: reducing poverty, improving healthcare and empowering women and girls.

OUR EFFECTIVENESS

Our expertise in research and project evaluation enables us to carefully review our activities and make positive changes on an ongoing basis to maximise their impacts and efficiency. Each of our individual projects is evaluated separately, however we also evaluate our overall impact across entire thematic areas.

Externally funded projects are also independently evaluated by their respective funding bodies. This was the case for our DFID funded Cervical Screening Project which officially ended in May and achieved an outstanding score of A+.

"The overall assessment of the report is that the project has scored an A+ (outcomes moderately exceeded expectation). The grant holder provided insightful analysis and reflections on the project's overperformance across outcomes and outputs. The project clearly demonstrated strong delivery, community engagement, high quality services and an early sustainability model which is soon to be replicated in other districts. In terms of project design, the detailed targeting, mapping of community needs, community engagement / sensitisation and blended form of training and mentoring for healthcare workers were strong contributing factors to the project's overall successes.

Key achievements included exceeding the milestone target for the number of women's cervical screening by 50% and the number of health workers trained. Project communities now benefit from comprehensive, free, see-and-treat cervical screening services in community-based health facilities, the first of its kind in Uganda. Marginalised women in particular benefitted from this service and this has continued despite the project ending in May. The project also demonstrated a strong capacity building approach for project staff through opportunities to further their academic studies as well as strengthen on-the-ground training in project districts."

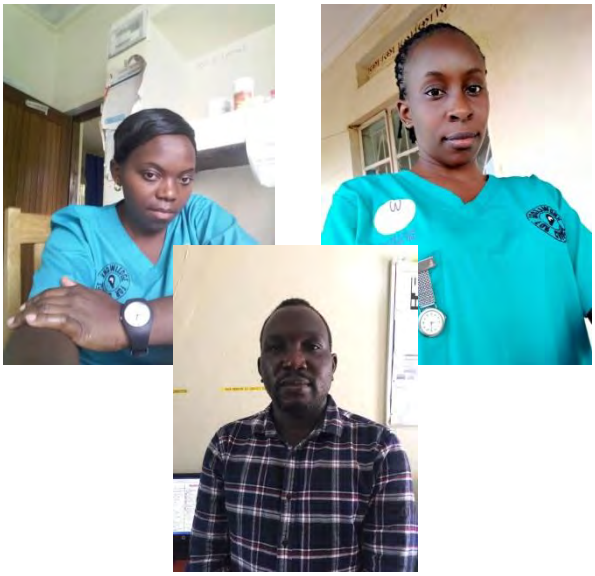
Excerpt from DFID's End of Project Evaluation Report for the Cervical Screening Project

Our Team in Uganda

STAFFING

Knowledge for Change directly employs several highly skilled clinical and project management staff in Uganda to support local health and education services and our on-going projects. We were pleased to welcome a new nurse, midwife and pharmacist to our team in January 2020; Annet, Angela and Joe (pictured below) have already proven to be highly valuable members of our team.

As of December 2020, Knowledge for Change directly employs 8 fulltime staff including 4 midwives, 1 nurse, 1 pharmacist, 1 project manager and 1 administrator. We also indirectly employ (via our partners) 1 doctor and 1 biomedical engineer.



PROFESSIONAL VOLUNTEERING

Since it was established, Knowledge for Change has placed over 300 professional volunteers in Uganda including nurses, midwives, doctors, social workers and biomedical engineers. Our professional volunteers play important roles in our projects and work alongside local facility staff to exchange valuable knowledge, skills and experience.

We had originally planned to host 12 long-term and several more short-term professional volunteers throughout 2020; however the onset of the Covid-19 pandemic in February led to the immediate suspension of our professional volunteering programme and emergency repatriation of all volunteers on placement at the time. This decision was not taken lightly and we faced some resistance from the volunteers themselves, however safeguarding their health, safety and wellbeing was our highest priority. As the suspension continued throughout the remainder of 2020, we only placed three long-term (a nurse, an obstetrician and a midwife) and three short-term volunteers (2 pharmacists and a microbiologist) in 2020. We plan to recommence this programme in June 2021.

STUDENT PLACEMENTS

Unfortunately, our student placement programme was also suspended in February as a result of the Covid-19 pandemic. This led to the cancellation of over 120 planned placements for nursing, midwifery, social work and allied health professional students. A further 8 students who began placements in January faced early repatriation.

As an ethical organisation, K4C quickly reimbursed all students in full for any funds transferred to us. Thankfully, the vast majority of flight tickets were fully refunded by airlines. We look forward to recommencing this programme in July 2021.

Cervical Screening

SUMMARY

Cervical cancer remains the main cause of cancer deaths in LMICs. In Uganda, cervical cancer contributes to over 80% of all female malignancies and is the leading cause of cancer-related deaths, mainly because of late presentation and delays in receiving appropriate treatment. There were previously no cervical screening facilities in Fort Portal, meaning women had to travel over 6 hours to Kampala to access screening. Many women could not afford this journey and were therefore left without access to this vitally important service.

ACTIVITIES

The Cervical Screening Project was initially funded by a £1,500 donation from a group of nursing students from Liverpool John Moore's University. They identified the need for the service during their elective placement with K4C. Their funding helped K4C to develop its first cervical screening unit at Kagote Health Centre in Fort Portal. This included renovating the unit and purchasing the necessary equipment, including Enhanced Visual Assessment (EVA) and Cold Coagulation devices. Subsequent funding of £50,000 was received from UKAid to upscale and expand the service model from 1 to 3 sites to include Bukuuku Health Centre and Fort Portal Regional Referral Hospital and provide intensive user training to staff across all 3 sites.

K4C's professional volunteers have played important roles in providing comprehensive training to local staff. Other activities have included raising awareness through community engagement, social media and radio broadcasts; conducting a community survey and GPS mapping exercise to improve planning of outreach activities; and establishing a telemedicine service to enable local staff to share images of cervixes and receive on-going diagnostic mentoring from UK based gynaecologists and oncologists. Where treatment is indicated, K4C has procured a washable and rechargeable Cold Coagulation Device which does not require consumables, thus improving sustainability. Supported by these technological innovations, our model has significant potential to increase screening rates and reduce deaths from cervical cancer.

RESULTS SO FAR

Over the course of the project, 67 nursing and midwifery staff have been trained in cervical screening and treatment. To date, over 2000 women have been screened and over 50 have received cold coagulation treatment or have been referred for further management. These women would unlikely have otherwise been screened and treated and, as a result, may have gone on to develop cervical cancer. Although our UKAid funded project ended in April 2020, K4C has continued to support all three of the screen and treat services setup and we plan to apply for further funding to expand and upscale the service model we have developed and piloted in 2021.

Antimicrobial Stewardship

SUMMARY

Antimicrobial Resistance is one of the biggest threats to global health, food security and development in the world today and has the potential to reverse decades of medical progress. Multi-drug resistant bacteria don't respect national borders; what happens in one country affects us all. LMICs such as Uganda are particularly hard hit. Infectious diseases still cause a high proportion of deaths and, as many of the most commonly used antibiotics fail to work, resource-poor settings struggle to cover the costs of newer and more expensive antibiotics. Sepsis is a major cause of maternal mortality in Uganda and is often a result of poor Infection Prevention and Control (IPC) during surgery, leading to surgical site infections.

Our Antimicrobial Stewardship (AMS) project ran from November 2018 to October 2020 and was funded by the Commonwealth Pharmacy Association and the Tropical Heath Education Trust (£60,000 in partnership with the University of Salford and Tameside and Glossop NHS Trust).

ACTIVITIES

K4C's clinical staff and professional volunteers provided comprehensive training and mentoring for over 80 pharmacy and nursing staff at Fort Portal Regional Referral Hospital in areas including prescribing practices, the management of sepsis and IPC measures. Simon Sseguya (a senior hospital pharmacist) was awarded a British Commonwealth funded fellowship to travel to the UK for 3 months from March to complete placements at Tameside and Glossop NHS Trust and Salford University.

One core element of the AMS project was a Maternal Sepsis Intervention (MSI) which focused on two key contributors to AMS; reducing the incidence of infections (especially those acquired from hospitals) and improving the use of antibiotics to fight the infections that do occur.

Essential supplies and equipment were purchased and/or maintained for the hospital, including these drugs trolleys

RESULTS SO FAR

The full project evaluation is still on-going, however we have seen evidence that the MSI has fostered multi-disciplinary teamworking to improve IPC, wound swabbing and management and the laboratory analysis of swab results to identify the bacteria responsible and target the most effective antibiotic. Since the beginning of the project, the percentage of suspected sepsis cases being tested for culture and sensitivity has risen from 0% to 95%. Furthermore, the hospital's score on the WHO's IPC Infrastructure Audit Tool rose from 58.7% to 96.8%.

The MSI has seen transformational change on the wards. Major improvements have resulted in improved patient outcomes, reduced maternal mortality (to zero!), reduced length of stay on the wards and substantial financial savings for the hospital. Appropriate new and existing tools and protocols have been developed within the hospital; the Medicine Therapeutic Committee has been restarted and the 'Rx system' is now fully functional which will have a positive impact on AMS and the procurement of appropriate antibiotics.

British Commonwealth Fellowships

SUMMARY

K4C has hosted and supported over 70 Ugandan Health professionals in the UK between 2013 and 2020, including midwives, nurses, doctors, healthcare managers, record keepers and laboratory and orthopaedic technicians. The fellows have travelled from our partner organisations to the UK for between 1 and 6 months to complete educational courses, such as diploma and Masters modules, and to enhance their experience, knowledge and skills. The structure of each fellowship is designed to meet a specific need that has been identified in advance, and many of these link to K4C's on-going projects.

Each fellowship has been supported by the British Commonwealth Fellowship Scheme which provides funding to cover their travel, accommodation, living and course costs.

ACTIVITIES

The most recent groups of fellows travelled to the UK for 3 months from March 2020. They included a pharmacist and 5 nursing and midwifery staff from Fort Portal Regional Referral Hospital and Kagote Health Centre. Their fellowships focused on antimicrobial stewardship and cervical screening respectively.

Despite disruption caused by the onset of the Covid-19 pandemic which led to the suspension of some teaching and placement opportunities, the fellowships were still extremely successfully and yielded positive learning outcomes for all of the fellows. K4C maintains a close relationship and provides on-going support for all fellows once they have returned to Uganda, and many continue to support our projects longer-term.

Professor Louise Ackers (K4C trustee) and Dr Judith Auma (K4C doctor) celebrate with 5 nurses and midwives from Uganda upon successful completion of their fellowships at the University of Salford in May.

Infection Prevention & Control

SUMMARY

Sepsis is one of the most common causes of death of patients in Uganda. Many infections that lead to sepsis are contracted within health facilities and can be avoided by implementing Infection Prevention and Control (IPC) measures and making relatively small investments in hospital equipment and infrastructure, such as sinks and washing facilities. Over the last 5 years, K4C has run several capacity building and infrastructural development projects across multiple health facilities in Uganda, covering various aspects of IPC including hand hygiene, antimicrobial stewardship and surgical safety. For example, we have provided running water to more than 30 hospital wards by fitting new (or fixing existing) sinks and plumbing systems. This work is of even higher priority during the Covid-19 pandemic.

ACTIVITIES

Throughout 2020, our hand gel project has provided free supplies of locally manufactured alcohol hand sanitiser to 3 public hospitals and 1 primary school in Fort Portal. We have also sold it at cost price (not for profit) to other charities and not-for-profit health facilities in the area.

Through our AMS project, we have purchased various equipment such as autoclaves (for sterilising medical equipment), rubber mattress covers, delivery beds and drugs trolleys and have invested over £2,000 in renovating hospital and health facilities to reduce infection risks.

Visitors at Kagote Health Centre were urged to wash their hands to reduce the spread of infections.

Before being repatriated to the UK in March due to the Covid-19 pandemic, our professional nursing, medical and midwifery volunteers provided invaluable training and mentoring for local staff across 3 health facilities to build their skills and capacity. Their training covered a wide range of areas including surgical safety (for example implementing the WHO safe surgery checklist), hand hygiene, appropriate cleaning and decontamination of medical equipment, antibiotic prescribing practices, improved operative techniques (for example transverse c-section) amongst others. Our volunteers also implemented new and existing policies, protocols and guidelines to further support staff clinical practice.

Albert, a business student from Mountains of the Moon University, demonstrates using alcohol hand sanitiser produced by K4C, with bottles and labels designed and branded by himself and a group of fellow students in Uganda.

Prosthetics & Orthotics

SUMMARY

Limb amputations are far more common in LMICs than in High-Income Countries (HICs). Most are caused by trauma as a result of road traffic accidents or conflict. Other common causes include congenital defects, infections and tumours. Having a limb amputated tends to have severe repercussions in LMICs as more people are reliant on physical activity to earn a living (through manual labour, farming, transportation etc.) and there is no social security system to provide support. Additionally, people's access to prosthetic or orthotic devices is extremely limited due to them being relatively expensive to design, manufacture and maintain.

K4C's focus on prosthetics and orthotics began in 2017, stimulated by a woman named Ninsiima who was a victim of domestic violence whilst being 8 months pregnant. As a result of the attack, Ninsiima lost both of her arms from the elbow down, however thankfully her baby was delivered successfully with the support of K4C's midwifery staff and volunteers. At this point, K4C embarked on a project (in partnership with the prosthetics department at the University of Salford) to provide Ninsiima with prosthetic arms to enable her to care of her 5 children and continue to earn a living through chicken farming. A fundraising campaign was setup and the project subsequently featured on BBC World News.

ACTIVITIES

Ninsiima's story highlighted the challenges faced by amputees in countries like Uganda. This led a team of researchers at the University of Salford to design a project aimed at developing fit-for-purpose, affordable and locally manufactured upper-limb prosthetic devices in Uganda (in partnership with K4C) and Jordan. The 'Fit-For-Purpose Prosthetics Project' received £1.4M of EPSRC funding and is running from February 2018 through to January 2022.

In 2020, K4C collaborated on a successful MRC grant application titled "Promoting Universal Health Coverage for Amputees through Social Enterprise and Engineering Innovation", in partnership with Makerere, Salford, Manchester and Aga Khan Universities. This exciting new project, led by one of our charity trustees (Dr Robert Ssekitoleko) will begin in 2021 and will continue to improve the lives and opportunities of amputees living in Uganda.

Prosthetics students from the University of Salford work alongside local staff to cast,

design and fit new prosthetic devices for amputees in Uganda during their placement with K4C.

Respectful Midwifery Care

SUMMARY

Uganda has one of the highest maternal mortality rates in the world. The Sustainable Development Goals framework focuses on improving Maternal Health through gender equality, human rights, empowerment and poverty reduction. Disrespectful care not only undermines women's human rights and disempowers them; it also results in poor levels of engagement with public services and damaging delays in accessing them. 99% of all maternal mortality occurs in LMICs; much of this is due to delays in women seeking care. In Uganda, it is not uncommon for women to receive verbal or sometimes physical abuse whilst giving birth in health facilities. Through empowerment of women and collaboration between healthcare staff, stakeholders, families and communities, we aim to improve the health and well-being of mothers and their babies. We received £20,000 from the Wellbeing of Women Foundation in 2018 to research the challenges faced by mothers and staff during pregnancy and birth, and how levels of quality and respect could be improved within maternity care settings (WeCare Project).

ACTIVITIES

Throughout 2020, we have continued to implement the findings of our WeCare project across 5 health facilities in Uganda (Kasangati, Kiira, Kagote and Bukuuku Health Centres and Fort Portal Regional Referral Hospital). Our staff and professional volunteers have provided training and promoted simple changes in practice, for example urging staff to greet mothers respectfully and introduce themselves by name, allowing mothers their choice of birthing position, providing more information about procedures before beginning them and providing counselling and grieving care. Other interventions have included providing basic new equipment such as privacy screens and curtains, delivery beds and ward mattresses and supporting general maintenance of maternity units, including kitchen, toilet and hand washing facilities.

Implementing these simple, cost effective and sustainable interventions has greatly improved the level of respectful care received by mothers and has led to increasing numbers of women seeking care at the respective health facilities. For example, Kagote Health Centre now averages 45 births per month, compared to just 22 prior to our WeCare project. A publication containing the full WeCare project findings can be accessed for free here.

Raziqa, a midwifery student from Salford University, cares for a newborn baby at Fort Portal Regional Referral Hospital during her placement with K4C.

Covid-19 Response

SUMMARY

The impact of the Covid-19 pandemic on LMICs has been stark, with health facilities and individual workers struggling to cope with the additional number and nature of hospital patient cases. At one point in July 2020, Fort Portal Regional Referral Hospital reported having only 2 spare intensive care beds for Covid-19 patients to cover a population of over 3 million people.

Providing direct care to patients suffering from Covid-19 is not the only challenge. As is now clear in many countries around the world, reducing the spread of the virus is key to reducing deaths, however this relies heavily on testing capacity which is extremely limited in LMICs.

ACTIVITIES

From the outset of the pandemic, K4C has increased its focus on Infection Prevention and Control mechanisms in order to reduce Covid-19 transmission between hospital staff and patients in Uganda. This involved stepping up our manufacture and distribution of free hand sanitiser to partner health facilities. We also received £2,000 funding from the University of Salford to create an informative short video to show in hospital waiting areas to improve awareness of Covid-19 and the importance of infection prevention and control.

In order to improve Covid-19 testing capacity in Uganda, K4C partnered with the Uganda Virus Research Institute, Salford and Gulu Universities and Gulu Regional Referral Hospital to apply for grant funding to establish an effective Covid-19 testing facility in Gulu, northern Uganda. £580,000 was received from UKRI in September 2020 and the project began shortly thereafter. Once setup, the testing facility stands to benefit the many highly vulnerable communities living in nearby refugee camps. It will also act as a pilot model that (if successful) can be scaled up and rolled out more widely across the whole country.

PLANS FOR 2021

The Covid-19 pandemic is ongoing and K4C will continue to find ways to support our partner health facilities, colleagues and the wider population in Uganda. In partnership with Makerere and Salford Universities, we plan to conduct research into the roles of hospital visitors and 'attendants' and how they can be better managed to reduce transmission of hospital acquired infections, including Covid-19. We are also planning action research into the impact of Covid-19 and associated government lockdown measures on children's education in Uganda and health students' University courses in the UK.

As and when it becomes available, we commit to supporting the rollout of a Covid-19 vaccination programme in Uganda. We will do this by committing clinical staff time, consumables and also our capacity in biomedical engineering to ensure effective vaccine supply chains, including maintenance of refrigeration and other equipment.

Image from a short educational film created by K4C to reduce transmission of Covid-19 between patients at Fort Portal Regional Referral Hospital. We also fitted new TV screens in patient waiting areas for it to be shown on.

Child Welfare & Education

SUMMARY

Worldwide, over 57 million children of primary school age remain out of school and more than half of these children live in sub-Sahara Africa. According to the Ugandan legal framework, all children should be given free and accessible education. However, there appears to be a discrepancy between the policy and practice; in the Kabarole District of Uganda (where K4C is based), 82.4% of children with disabilities are reported to be out of school. The reasons for this are complex and include political factors (such as lacking demographic data and funding), physical barriers (such as inadequate infrastructure and a lack of assistive devices and transport) and social barriers (such as lacking understanding and awareness of disability within wider society).

ACTIVITIES

Despite being primarily a health focused organisation, K4C recognises the importance of education and the negative impact that poor access to education can have on a child's life opportunities, economic empowerment and subsequently their health needs. We expanded our activities to include primary education in 2018, focusing initially on improving access to education for disabled children, in recognition of the additional challenges faced in this area and the closer link to our experience and capacity in physical and mental health.

Rose appreciates new learning materials and a wheelchair donated to her school to help her get between classes and avoid getting her knees dirty from crawling.

K4C supports several local Community Based Organisations (CBOs) working in this field; including the Youth and Women's Empowerment Foundation (YAWE), the Agency for Community Development and Welfare (ACODEWE) and Kyaninga Children's Development Centre (KCDC). This year, we have also begun negotiating a new and exciting partnership with 'Kids Club Kampala' which promotes educational opportunities for vulnerable children living in slum areas of Kampala.

K4C has also continued to support Canon Apollo Primary School which caters for children with physical and mental disabilities. Our work at Canon Apollo has included infrastructural developments, facility refurbishments, the provision of computing equipment and learning aides and providing social work support for families.

[Left] K4C pharmacist (Clare) teaches school children how bacteria can spread. [Right] K4C midwives (Sylvie and Stella) give a lesson on health promotion.

Supporting Local Community Based Organisations

K4C staff support the 'Youth and Women's Empowerment Foundation' to conduct interviews and run workshops to support women in business.

SUMMARY

Knowledge for Change not only runs its own projects but also supports a number of local, independent Community Based Organisations (CBOs) with similar organisational objectives to our own. Most of these CBOs are relatively small but are highly experienced in their respective fields and run extremely beneficial projects supporting the health and educational needs of local communities. The areas of focus of these CBOs are varied and include women and children's empowerment, mental health services, family planning, HIV screening and counselling, caring for children with physical and mental disabilities and rehousing orphaned children within wider families and communities.

ACTIVITIES

Throughout this year, K4C has supported our partner CBOs in various ways including providing direct finance, building staff capacity, promoting joint research collaboration and offering use of our office facilities and human resources.

In February, we began building a new partnership with 'Kids Club Kampala' which promotes educational opportunities for vulnerable children living in slum areas of Kampala, however discussions were paused due to Covid-19. They will hopefully to resume later in 2021.

In October, we successfully formed a new relationship with the 'Joint Effort to Save the Environment (JESE)' foundation which focuses on environmental sustainability. In order to reduce the environmental impact of our activities, K4C has committed to provide funding to JESU to support the planting of 100 new trees for every international flight taken by our staff, volunteers and students.

Simona, an Environmental Science student from Liverpool University, spent 4 weeks on placement with K4C and partners at JESE and the Uganda Wildlife Authority in October, placing trackers on wild animals to support research and ensure their on-going protection.

Publication and Dissemination of Global Health Research

SUMMARY

Our experience of designing and implementing the above projects, along with their respective impacts, outcomes and findings, are used to inform our research. This research enables us to constantly analyse and refine our charity's activities to maximise our efficiency and effectiveness.

We also present our research at national and international conferences and policy meetings and publish findings in Open Access books and articles. This helps us lobby for positive changes to policies at organisational, regional and national levels in both the UK and Uganda to improve the way organisations and governments carry out global health and international development activities.

ACTIVITIES

In collaboration with various partners, we published several books and journal articles throughout 2020, some of which are detailed here and can be accessed for free via our website:

Antimicrobial Stewardship:

Ackers, H.L., Ackers-Johnson, G., Welsh, J., Kibombo, D. and Opio, S. (2020) ***"Anti-Microbial Resistance in Global Perspective"***, Palgrave. (https://link.springer.com/book/10.1007/978-3-030-62662-4)

Ackers, H.L., Ackers-Johnson, G., Seekles, M., Odur, J. and Opio, S. (2020) ***"Opportunities and Challenges for Improving Anti-Microbial Stewardship in Low- and Middle-Income Countries; Lessons learnt from the Maternal Sepsis Intervention in Western Uganda".*** Antibiotics 2020, 9, 315; doi:10.3390/antibiotics9060315. (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7345100/)

Ackers-Johnson, G; Kibombo, D; Kusiima, B; Nsubuga, M. L; Kigozi, E; Kajumbula, H. M; Kateete, D.P. Walwema, R; Ackers, H. L; Goodhead, I B; Birtles, R. J. & James C. (2020 – preprint) ***"Antibiotic resistance profiles and population structure of disease-associated Staphylococcus aureus infecting patients in Fort Portal Regional Referral Hospital, Western Uganda"***. https://doi.org/10.1101/2020.11.20.371203

Biomedical Engineering:

Oshabaheebwa, S., Ssekitoleko, R.T., Namuli, L.K., Tusable, M., Nantume, J., Ackers, H.L. (2020) ***"Enhancing skills to promote the utilization of medical laboratory equipment in low resource settings".*** Health Policy and Technology https://doi.org/10.1016/j.hlpt.2020.01.001

International Development:

Ackers, H.L., Seekles, M., Horder, C. and Nantamu, M. (2019) ***"The Impact of Research Council Funding on International Development"*** (Unpublished Report), UK Research and Innovation

Professional Volunteering:

Tyler, N., Ackers, H.L., Ahmed, A., Byrne, G. and Byrne-Davis, L. (2020) ***"A questionnaire study of the negative outcomes for UK health professional volunteers in low and middle income countries"***, BMJ Open (doi:10.1136/bmjopen-2020-037647)

Prosthetics & Orthotics

Kenney L., Ssekitoleko R., Mwaka E., Donovan-Hall M., Morgado Ramirez D., Chadwell A., Kyberd P., Sobuh M., Ackers L., Howard D., Holloway C. and Miodownik, M. ***"Upper-limb prostheses for low- and middle income countries"***. Scope, 2018, 27(4): 38-40.

Ssekitoleko R., Byamukama, S. and Wanda, S., (2019) ***"Clinical Engineering in Uganda (Handbook)"*** Academic Press. ISBN: 9780128134689.

Student Placements:

Ackers, H.L., Ackers-Johnson, J., Ahmed, A. and Tate, N. (2019) ***"Optimising student learning on international placements in Low Income Settings"***, Open Journal of Social Science; Volume 7.

Key Stakeholder Testimonial

DR RICHARD MUGAHI
ASSISTANT COMMISSIONER FOR REPRODUCTIVE HEALTH
MINISTRY OF HEALTH, UGANDA

I first engaged with Knowledge for Change more than 6 years ago, while I worked as District Health Officer for Kabarole District, responsible for coordinating the delivery of health services to local communities with a population of 500,000, served by 72 health facilities. I was attracted to their work by their unique approach to complex health system issues; using the system strengthening model of engaging health professional volunteers from the UK National Health Service to work closely with the local health workforce and facilitate transfer of knowledge and skills.

Unlike many others, their approach (and the research that underpins this) has proven to deliver highly sustainable health systems change. For example, Kagote Health Centre 3 was a failing community health facility that had not delivered a single baby in over 16 years despite having a full establishment of health workers. K4C's sustainable professional volunteering model is based on a principle of 'co-presence', requiring UK volunteers to always be working alongside their Ugandan colleagues. This is the first time I have come across this concept and, at first, it was such a departure from the way that foreign actors engage with us that health workers found it hard to understand and comply with. It is very common for other foreign volunteers to walk into Ugandan health centres and simply take over the work of locals. This contributes to one of the main causes of health systems failure; namely absenteeism and poor time-keeping. Many of these volunteers also assume they have superior knowledge and clinical skills to our local health workers which can undermine relationships and opportunities to share learning.

The continued presence of K4C volunteers, working alongside our own health workers, has transformed Kagote Health Centre to one of the best performing Community Health Centres in Uganda. Performance increased across all indicators, admissions, deliveries, reductions in referrals and laboratory testing. We also saw the introduction of the first See-and-Treat cervical cancer prevention program in a public Community health facility in Uganda. This combined state-of-the art devices with a community GIS mapping system that has reached over 3,000 households and resulted in major and continuing increases in screening rates especially amongst women who are HIV positive and sex workers. Kagote was selected as the venue for national celebrations for the International Day of the Midwife in 2018 and was visited by leading health commissioners and colleagues from the Ministry of Health.

K4C's work on antimicrobial resistance at Fort Portal Regional Referral Hospital has had a sustained impact on maternal mortality and greatly reduced the length of stay of post-natal women. The impact on hospital budgets demonstrates the sustainability of this approach, again using mentoring and co-working. I am excited to continue this partnership with Knowledge for Change into 2021 and future years.

Dr Richard Mugahi
31st December 2021

Governance and Accountability

Dr Ali Hardie and Claire Horder (Midwife) at Fort Portal Regional Referral Hospital, Uganda

Structure, Governance & Management

CHARITY REGISTRATION IN THE UK

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

OUR TRUSTEES IN 2020

Our UK based trustees throughout 2020 were:

- Professor Louise Ackers (Chairperson) – Chair in Global Social Justice, University of Salford.
- Natalie Tate (Secretary) – Project Manager, Liverpool School of Tropical Medicine.
- Dr James Ackers-Johnson (Treasurer) – Project Manager, University of Salford.
- Professor Anya Ahmed – Chair in Wellbeing & Communities, Manchester Metropolitan University.
- Dr John Chatwin – Post-doctoral Researcher, University of Salford.
- Dr Chris Coey – Grant Writer, University of Liverpool.
- Eileen Cunningham – Lecturer and PhD Researcher, University of Salford.
- Claire Horder – Midwife, University Hospitals Dorset NHS Foundation Trust.

Dr Robert Ssekitoleko, a Biomedical Engineer, also serves as a trustee for K4C whilst being based at Makerere University in Uganda.

RECRUITMENT, APPOINTMENT & INDUCTION OF CHARITY TRUSTEES

The Trust Deed states that there must be a minimum of 4 trustees acting on behalf of K4C. There is no maximum term of appointment and trustees can serve until they resign should they continue to fulfil the terms stated in the Trust Deed. Mechanisms for the removal of trustees do exist and are also detailed in the Trust deed. All existing trustees have long experience of the nature of the charitable activity of K4C and, aside from expenses, were not remunerated for their trusteeship. Where new trustees are appointed, they are given a formal induction to the work of the trust and provided with the information they need to fulfil their roles, which include information about the role of trustees and charity law. New trustees are nominated by members of the board of trustees, interviewed by the board of trustees and appointed where they have the necessary skills to contribute to the charity's management and development. Trustees are responsible for monitoring all of the trust's activities and are bound by the terms stated within K4C's Declaration of Trust and amendments.

AMENDMENTS TO THE BOARD OF TRUSTEES

Knowledge for Change announced the appointment of Claire Horder as a trustee in October 2019. Claire had previously spent 12 months volunteering with us in Uganda and had a great understanding of our work and on-going projects. Throughout 2020, she has proven to be a great asset to our organisation, offering vital clinical input as an experienced midwife. We are delighted that Claire has now committed to remain as a K4C trustee in the longer-term.

There have been no amendments to K4C's board of trustees in 2020.

ORGANISATIONAL GOVERNANCE

The mechanisms for organisational governance within K4C have remained largely unchanged throughout 2020. The Board of Trustees remains responsible for making decisions on all matters of general concern and importance to K4C including strategic, operational and financial decisions. Many of the K4C trustees are based near the University of Salford and are able to meet on at least a

quarterly basis or often more regularly. Uganda based trustees are engaged virtually.

Comprehensive policies are in place to ensure good governance within K4C, including:

- Safeguarding Children & Vulnerable Adults
- Safeguarding Staff, Volunteer and Student Health, Safety and Wellbeing
- Code of Conduct & Disciplinary Procedures for Staff, Volunteers and Students
- Human Resource Management (including anti-discrimination)
- Risk Assessment
- Conflict of Interest
- Whistleblowing
- Procurement
- Anti-bribery, Counter Fraud & Corruption
- Financial Depreciation of Assets

All policies are formally reviewed and updated on an annual basis, or more frequently as required. They were also subject to successful external review by Mannion Daniels (on behalf of the Department for International Development) as a requirement of our funded cervical screening project in March 2020.

The trustees confirm that there were no cases of breaches of K4C policies in 2020 that require notification to the Charity Commission.

COVID-19

In the period since March 2020, the Covid-19 pandemic has had a substantial adverse effect on Knowledge for Change's operations and performance in both the UK and Uganda, in some cases marking a deceleration in the pace at which we have been able to deliver our programmes in the many communities that we serve. Where possible, all staff and volunteers have worked from home with office working minimised and subject to rigorous social distancing and cleansing regimes.

As an ethical employer, we have committed to not making any redundancies or salary reductions during the pandemic and we have so far achieved this. However, our financial situation is being continuously reviewed, especially in light of the recent decision by the UK government to reduce its financial commitment to UKAid from 0.7% to 0.5% of national income, which poses a risk to our current and future projects and income streams.

OBJECTIVES, STRATEGY AND PUBLIC BENEFIT

The official charitable objectives of Knowledge for Change are as follows:

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

K4C works in close partnership with the University of Salford (UK), Mountains of the Moon University (Uganda) and Kabarole Health District (Uganda). Additional support has been received from the UK Department for International Development, the Tropical Health Educational Trust, the Commonwealth Pharmacy Association and the Ugandan Ministry of Health.

The trustees are aware of the Charity Commission's Guidance on Public Benefit. They have reviewed the objectives of the charity, its activities in 2020 and future plans in the light of this guidance and find that all of these comply.

The activities described within this report have primarily benefited the people who live in the catchment areas of the health and education facilities in which K4C operates. More generally, all professional volunteers, students and British Commonwealth funded fellows that have completed placements through K4C will have gained new skills and experience which will benefit the public in the UK and Uganda more widely depending on where they go on to work. All benefits are related to the objectives of the charity, as stated above. The trustees are not aware of any

direct or indirect harm arising from the activities of the charity, nor of any private benefit which could be considered perverse or unjustified.

NGO REGISTRATION IN UGANDA

To formalise our operations in Uganda and reduce our costs related to currency exchanges, Knowledge for Change has setup a subsidiary organisation named "Knowledge for Change Uganda" which is was registered with the Uganda NGO office in September 2020 (registration no. 3592). Its registered address is Plot 39, Saaka Road, PO Box 392, Fort Portal, Kabarole District.

Knowledge for Change Uganda (K4C Uganda) is governed by an executive board which is chaired by one of our K4C (UK) trustees, Dr Robert Ssekitoleko. Other members of the board include Allan Ndawula and Jesca Nantume, both of whom have long standing affiliations with K4C.

Although a formal agreement, written in the form of a Memorandum of Understanding (MOU), has been created to govern the relationship between K4C (UK) and K4C (Uganda), each organisation retains its independence and is accountable to the laws, regulations and reporting requirements in the UK and Uganda respectively.

EXTENDING OUR ETHICAL COMMITMENT TO ENVIRONMENTAL STARDARDS

Knowledge for Change has always committed to making all of its project activities and outcomes as ethical and sustainable as possible. This year, we decided to expand this commitment to better account for the indirect impacts of our projects and activities on the wider environment, in particular making efforts to reduce our organisational carbon footprint. This has involved establishing a mechanism for calculating and evaluating levels of carbon emissions for our activities and finding ways to reduce and/or offset these.

As a result of Covid-19, many of our staff have been forced to work differently, resulting in reduced requirements for local and international travel. We are planning to continue this way of working as far as possible to ensure continued reduction in travel.

However, we also openly recognise that we will need to resume some forms of national and international travel after the pandemic ends in order to continue to achieve our organisational objectives.

By far, our biggest contribution to carbon emissions results from international flights taken by our staff, volunteers and students. In order to mitigate the impact of this travel, we have now committed to funding the carbon offsetting cost of all flights, as is frequently offered by airlines. Moreover, we have negotiated an exciting new partnership with the Joint Effort to Save the Environment (JESE) Foundation in Uganda. Through JESE, we have committed to funding the plantation of 200 trees for each and every international flight taken by our staff, volunteers and students, beginning in January 2021.

COMMUNICATIONS

One of Knowledge for Change's main organisational weaknesses identified relates to our communications strategy. We are very proud of the hugely positive impacts our projects have on local communities. However, with the exception of our academic publications, we often fail to effectively relay this positive news and information to our stakeholders, supporters and the wider public. Such communications are of increasing importance in the ever more competitive global environment, supporting awareness raising, fundraising, engagement and networking.

To rectify this, K4C commissioned 'Dakini Design' to develop a new website (due for completion in March 2021). This will be launched along with revamped social media channels including Facebook, Twitter, Instagram and YouTube.

www.knowledge4change.org

@K4C_Uganda

@Knowledge4Change

@K4CUganda

@Knowledge4Change

Risk Assessment & Mitigation

Knowledge for Change conducts a comprehensive annual risk assessment which covers all aspects of risk for all parties involved in our activities. Only 2 risks were classified as being 'major risks' for the next (2021) financial year. These have been summarised below:

Major Risks and Uncertainties	**Potential Impacts**	**Planned Mitigating Actions**
Covid-19 (and related government lockdown regulations)	Financial: - Reduced income from student placements (due to inability to travel) - Reduced income from project funding (due to reduction in UKAid budget)	- Diversification of funding sources, for example seeking alternative research / international development grant income streams - Strengthening and diversifying partnerships to widen networks, experience and remit - Reducing expenditure as far as possible whilst ensuring achievement of our charitable objectives
	Human Resource: - Risk to K4C staff health and wellbeing	- Continued assessment of risks and effective mitigating actions taken as required.
	Strategic: - Changing needs and priorities of partners - Restricted organisational growth	- Continued assessment of the priorities and needs of stakeholders and beneficiaries - Maintaining current and building new networks to ensure organisational growth can continue as quickly as possible after the pandemic
	Operational: - Inability to achieve organisational objectives as a result of restricted travel and social distancing	- Continue to review and adapt all current and future activities to ensure they can continue as much as possible and be as effective as possible. For example, continue to deliver training programmes virtually until face-to-face training can safely resume.
Merging of UK Foreign, Commonwealth & Development Office (FCDO) and Department for International Development (DFID)	Financial/Strategic: - Objectives, remit and areas of priority of FCDO differ from DFID, potentially impacting our ability to apply for grant funding	- Monitor grant calls and FCDO publications to assess areas of priority and focus and ensure our activities and future grant applications are aligned

Financial review

Summary

This Annual Report covers the 12-month period from 1st January 2020 to 31st December 2020. Total receipts on Knowledge for Change funds for this period were £123,691. These receipts included all income from public donations, various sources of project funding, refunded bank charges and income provided by the University of Salford to cover the costs incurred in running joint projects in Uganda, such as the Antimicrobial Stewardship Project.

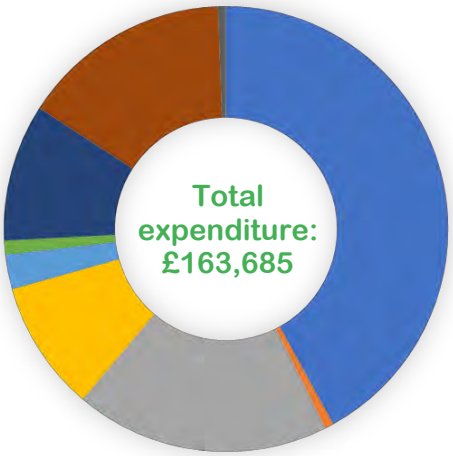
Total payments of Knowledge for Change funds for the 12-month period from 1st January 2020 to 31st December 2020 totalled £163,685. This included payments made for all projects including those in the UK and Uganda, those run in partnership with the University of Salford and those funded by external sources.

The total balance brought forward at the beginning of the financial year was £232,271. Over the course of the 12-month period, there was an excess of payments over receipts of £39,994. This gave a combined total fund available at 1st January 2021 of £192,277.

Financial Statement

	Reference Note	Total Funds (31/12/20)	Total Funds (31/12/19)
RECEIPTS AND PAYMENTS ACCOUNT	**1**	**£**	**£**
Receipts			
Public Donations	**2a**	**29,743**	**159,090**
Income from Organisations	**2b**	**67,580**	**38,018**
Refunds	**3**	**26,368**	
Miscellaneous Funding		**-**	**390**
Sub-total	**4**	**123,691**	**197,498**
Bank Interest/Charge Reversals		**-**	**-**
		123,691	**197,498**
Payments	**5**		
Ethical Elective Placement Project		**68,723**	**45,820**
Biomedical Engineering, Blood Transfusion & Laboratory		**1,030**	**300**
Hand Hygiene, Infection Control & Antimicrobial Resistance		**30,346**	**28,231**
Cervical Screening Project		**15,539**	**29,810**
General Equipment & Infrastructure (Health Systems)		**4,100**	**14,697**
General Equipment & Infrastructure (Education Systems)		**-**	**3,273**
British Commonwealth Fellowships		**1,677**	**4,707**
General Infrastructural Developments		**-**	**-**
K4C Uganda Setup Costs		**147**	**-**
Website Development		**210**	**147**
Bank Charges		**209**	**142**
Publishing / Project Dissemination		**373**	**912**
Staffing Costs (UK)		**32,631**	**7,455**
Staffing Costs (Uganda)		**8,700**	**7,410**
		163,685	**142,904**
Excess of Receipts over Payments		**(39,994)**	**54,594**

STATEMENT OF ASSETS & LIABILITIES			
Cash Funds			
Bank Current Account 1 (UK)		**183,653**	**228,647**
Bank Current Account 2 (Uganda)		**5,280**	**-**
GBP Currency Cards		**1,239**	**1,531**
Cash in Hand (Uganda)		**2,105**	**2,093**
		192,277	**232,271**
Liabilities			
Expenses due		**-**	**-**
Invoices/Payments due		**-**	**-**
Other liabilities		**-**	**-**
		-	**-**
Net Total (Assets – Liabilities)		**192,277**	**232,271**



42% **£69k** on student placements

1% **£1k** on biomedical engineering, blood transfusion and laboratory services

19% **£30k** on hand hygiene, infection prevention and control (IPC) and antimicrobial stewardship

9% **£16k** on cervical screening services

2% **£4k** on non-project specific equipment and infrastructure

1% **£2k** on Commonwealth Scholarship Commission Fellowships

10% **£16k** on project evaluation, dissemination and publication

15% **£25k** on project management/administration (UK and Uganda)

10% **<£1k** on 'other' costs including banking and website costs

Notes to the Financial Statement

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

2. Receipts Analysis

	Total Funds (31/12/20)	Total Funds (31/12/19)
	£	£
a. **Public Donations**		
Direct Donations	**21,560**	**98,136**
BT MyDonate	**-**	**15,767**
CAF Donations	**-**	**80**
Amazon Smile	**5**	**10**
KindLink	**387**	**10,483**
Wonderful	**7,791**	**115**
HMRC Gift Aid	**-**	**34,469**
	29,743	**159,090**
b. **Funding from Organisations**		
University of Salford	**28,442**	**1,800**
Liverpool John Moore's University	**7,505**	**9,000**
DFID	**12,633**	**15,141**
Commonwealth Scholarship Commission	**19,000**	**12,077**
	67,580	**38,018**

3. As a result of the Covid-19 pandemic and associated governmental lockdown and travel restrictions, a large number of student placements were cancelled. This line represents income from refunds on expenditure by Knowledge for Change, primarily for cancelled and refunded airfares.

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

Specified Project	Income (£) to 31/12/20:	Income (£) to 31/12/19:
Student Placement Project	62,049	167,489
Cervical Screening Project	12,633	15,141
Antimicrobial Stewardship Project	28,442	-
Biomedical Engineering / UBTS Projects	-	-
Respectful Care Project	-	-
Children's Education Project	-	1,498
Commonwealth Scholarship Commission Fellowships	20,500	12,077

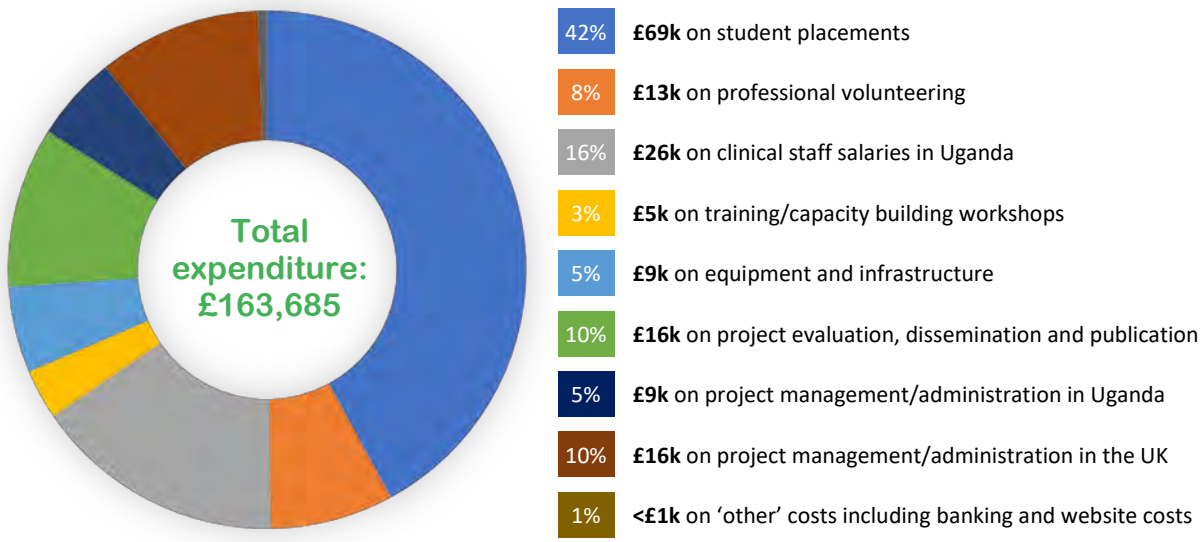
Professional Volunteering Project	-	707
Miscellaneous/Non-Project Specific	68	586
Total	**123,691**	197,498

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

Line Item:	**Expenditure (£) to 31/12/20:**	**Expenditure (£) to 31/12/19:**
Professional Volunteering		
Stipend Payments	5,307	22,896
International Travel Costs	5,247	3,245
Local Travel Costs	2,000	300
Sub-Total:	***12,554***	***26,441***
Student Placements		
International Travel Costs	27,824	32,782
Local Travel Costs	700	3,522
Accommodation Costs	3,600	3,670
Subsistence Costs	-	565
Student Placement Bursaries	-	3,963
Placement Cancellation Costs*	36,770	-
Sub-Total:	***68,894***	***44,501***
Ugandan Clinical Staff		
Salaries	25,665	7,900
Sub-Total:	***25,665***	***7,900***
Training Workshops/Conferences		
Training Programmes in Uganda	3,448	10,000
Training Programmes in the UK	1,677	4,707
Sub-Total:	***5,125***	***14,707***
International Travel		
Project Management	229	3,435
Project Stakeholders	-	-
Sub-Total:	***229***	***3,435***
UK Admin/Staffing		
Salaries	32,631	7,455
UK Travel	130	790
Sub-Total:	***32,761***	***8,245***
Uganda Admin/Staffing		
Salaries	8,700	4,910
Sub-Total:	***8,700***	***4,910***
Direct Investments/Infrastructural Developments		
Student Hosting Contributions	170	18,903
Provision of Medical Equipment	8,648	10,161
Sub-Total:	***8,818***	***29,064***

Other		
Office Supplies & Stationery (Uganda)	373	912
Banking Costs	209	142
Website Costs	210	147
'K4C Uganda' Setup Costs	148	2,500
Sub-Total:	***940***	***3,701***
Total Expenditure:	**163,685**	**142,904**

*Placement cancellation costs refers to funding reimbursed to students following cancellation of their placements in Uganda due to Covid-19 and associated international travel restrictions. All students were reimbursed in full.



6. Knowledge for Change does not possess any fixed assets or short or long-term liabilities; only current assets in the form of cash within the two separate current accounts, several currency cards and the small amount of cash in hand as noted.

Independent Examiner's Report

I report on the accounts for Knowledge for Change for the year ended 31 December 2020, which are set out on pages 30-35 of the Charity's 2020 Trustee's Annual Report and cover a 12-month period.

Respective responsibilities of trustees and examiner

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

It is my responsibility to:

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

Basis of independent examiner's statement

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

Independent examiner's statement

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

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

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

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

11 Newmarket Street
Skipton, North Yorkshire
BD23 2HX

Date: 23/04/21

Eric Johnson
Independent Examiner
NESTEGG FINANCIAL SERVICES

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

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