

## The Macfarlane Trust

During 2013 and early 2014, the Trust experienced a number of changes of personnel – both Trustees and staff. Two long-standing Trustees, Elizabeth Boyd and Russell Mishcon, retired when their periods of office expired after more than 13 years and 7 years respectively. Kate Evans, a Trustee appointed on the recommendation of the Haemophilia Society, also resigned due to work and personal commitments. Three new Trustees were appointed: Jamie O'Hara was appointed by the Haemophilia Society to succeed Kate Evans, and the Trust also appointed Paul Biddle and Alasdair Murray, who bring experience in finance and policy to the board.

Following a Board-approved restructuring, Roz Riley, who had worked for the Trust since 2000, latterly as Support Services Manager, left in October 2013. Linda Haigh, Finance Manager, also left in January 2014 after 10 years in the organisation. The Trust has subsequently been pleased to welcome Victoria Prouse and Joyce Materego as the new Director of Operations and Director of Finance respectively.

In 2013/14 the majority of the Trust's annual budget continued to be used to make regular discretionary top-up payments to primary beneficiaries and regular payments to widows. The Board also agreed a cost of living increase to regular payments to primary beneficiaries of 2.7% for 2014/15. A winter fuel payment was made to primary beneficiary households in 2013/14, and a similar payment will be made in 2014/15.

In July 2013 the Board decided to commit funds from its reserves to support beneficiaries by funding improvements to their properties which were related to health and mobility needs. After inviting applications, the Trust allocated funds to 110 beneficiaries, totalling £811,000. This was a one-off exercise; we do not foresee monies being available in the future to do so again. We are confident that we have been able to make a significant positive impact on the lives of those beneficiaries who were awarded grants through this exercise. Many have expressed their appreciation through letters and emails to the Chief Executive and her team.

The Trust had partial success in 2013 regarding its negotiations with the Department of Health (DH) over its financial allocation for 2014/15. The Trust submitted a strong case for increasing its allocation from £2.2 million for 2013/14 to £3.2 million for 2014/15. This was always presenting a major challenge, given the state of the economy and general reductions in public spending. The DH agreed a figure which is, effectively, the same as the previous year. Bearing in mind the reductions being made elsewhere in public spending budgets, this was the best outcome we could have expected in the circumstances. The Board has agreed to continue supplementing the annual DH allocation from the reserve funds; this means that in 2014/15 we will be operating at a similar level to last year. However, the level of reserve funds is now reducing year on year and we are already having, reluctantly, to be discerning when deciding which grants we can fund. Unless the DH and government are able to increase the annual allocation to us, before long we will have no alternative but to review the feasibility of our current funding policies. It cannot be assumed that they will increase our budget. The Trust will, nevertheless, continue to press strongly for an increase in annual funding.

The Board is encouraged that the level of interest and awareness of national politicians has risen tremendously over the last year or so. This is in no small way attributable to a number of beneficiaries lobbying their MPs. There is, sometimes, a misunderstanding as to the responsibilities of MFT. These are confined to allocating regular funding to the beneficiary community and negotiating the best possible financial allocation from the DH to do so. Our responsibilities do not extend to lobbying for the wider interests and needs of the beneficiary community, even if sometimes we would like to do so. This is for others to do and the efforts of the beneficiary community, as recognised above, are invaluable in that respect.

Jan Barlow  
Chief Executive, Macfarlane Trust  
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