



WellChild 
the national charity for sick children

annual review

09 10

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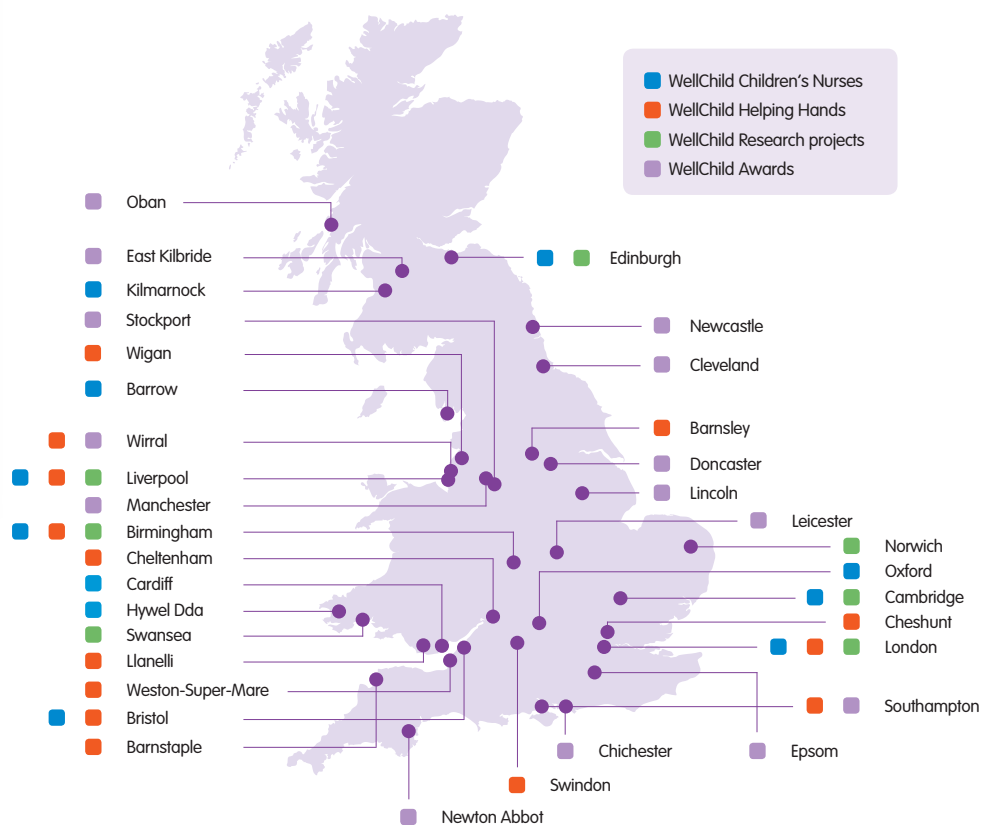
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WellChild is the national charity for sick children

We help children and young people who are seriously ill or who have complex health conditions – and their families – through our programmes of Care, Support and Research.



W elcome to our review of WellChild's activities, successes and challenges of the past 12 months.

A year ago, WellChild's annual review focused on 'realistic but crucial' growth, the growing need for our services, and our ambitious plans to reach more and more children, young people and families.

And while it is fair to say that the past 12 months have been challenging for WellChild, we are delighted that we have been able to continue to move forward and make an impact in all three of our core charitable areas of Care, Support and Research.

Funding for two new members of the WellChild Children's Nurse team has been secured, while another two crucial research projects have begun. We also exceeded our target for the number of Helping Hands projects completed, and have continued (with our partners at the Royal College of Nursing) to develop our influential Better At Home campaign – raising the profile of the issues faced by young people with complex health conditions.

As so often highlighted through our annual WellChild Awards, the children and families we support show remarkable resolve and perseverance, attributes that have also been demonstrated right across our organisation over the past year. It is a real achievement for us to have continued to progress across all our charitable activity.

The support of our Patron Prince Harry and the members of the England football team through our partnership with their Team England Footballers Charity has been invaluable. Added to that is the crucial support of those companies, other organisations and volunteers who give their time or money to help with our work – and our thanks go out to them all.

The next 12 months will see the launch of a national fundraising campaign Reach Out For Sick Children, and we are as ambitious as ever to develop our care and support for seriously ill children and young people right across the UK. The results of the independent evaluation of our Nurse programme will help to steer that development.

Our aim is to re-double our efforts to maintain the steady growth we have achieved in all of our work – and to continue to provide the services we know are crucial.



Colin Dyer
Chief Executive



John Evans
Chairman

A message from our Patron, Prince Harry



As Patron of WellChild, I am so proud of the way the charity has not only weathered the financial climate of the past twelve months, but has actually managed to increase the levels of its unique and life-changing support for seriously ill children and their families. In that time, two new nursing posts have been created, as well as two new research projects launched. This is an extraordinary achievement given the circumstances, and speaks so highly of the professionalism of the WellChild staff and management, and the dedication and loyalty of those who support the charity.

The WellChild Awards last September were as humbling and inspiring as ever. The incredible young people, their families, and the WellChild carers whom I met there represent for me all that is finest about the human spirit: courage, love, and supreme professionalism in care - in other words, the very essence of WellChild.

I urge you to continue your support for this wonderful charity.

Harry.

WellChild Care

Over the past 12 months, two new nurses have been appointed to the expanding WellChild Children's Nurse network, and we have allocated funds for the appointment of our 10th and 11th nurse posts as we continue to develop this programme across the UK.

Five years ago following a period of research and consultation, WellChild identified a serious gap in the care of children and young people with serious and often long term complex health conditions. This led to the creation of the WellChild Children's Nurse programme and the funding of the first four WellChild Nurse posts. Since then the numbers of children and young people with complex illness continues to increase every year and with it the need for more WellChild Children's Nurses.

WellChild Children's Nurses are highly experienced children's nurses funded by WellChild and employed by the local health service provider. They provide a valuable service to the families of children and young people with a wide range of conditions which can be life-limiting, life-threatening, degenerative, congenital or caused as a result of trauma or accident. Unfortunately some of these children will never receive a diagnosis so their future is difficult to predict.

Across the network a very important focus for each of the WellChild Nurses continues to be the enabling of the children and young people they support to leave hospital and receive the specialist care they need at home. It is widely acknowledged that whilst some hospital stays are essential this is not always the case, and the overwhelming evidence shows that children benefit in so many ways from being in hospital for the shortest possible time. In addition, being able to receive care at home reduces the practical, emotional and financial impact on the child's family.

Looking ahead, our vision continues to be on expanding the network across the UK to ensure that as many children and young people with long term complex health conditions and their families have access to a WellChild Children's Nurse.



WellChild Children's Nurse Lucy Andrews.

A Nurse Manager's view

WellChild Nurses are funded by the charity but employed by their local health service provider. Liz Pendleton, Senior Nurse at the Children's Community Nursing Service at Llandough Hospital, manages Cardiff WellChild Children's Nurse Rhian.

She said: "Prior to the WellChild-funded post, although children were discharged home, the process did not always allow time for vital equipment and care to be in place. Since Rhian has been in post, planning meetings for all children with a level of complex needs have been the norm. The ward staff and medical consultants know who to contact regarding the discharge of a child. The families feel supported and also have one point of contact should they have any questions. Community staff become involved at an earlier stage than previously and generally the whole process is addressed at a much earlier stage. I believe that the WellChild post and Rhian herself have transformed the planning process for children and young people and their families and the professionals involved. Many professionals and families alike have commented positively on both Rhian and her post. We are grateful to WellChild for their invaluable funding."

WellChild Nurses are flexible in what they offer, responding to the needs of individual children and young people. Their role can be varied, but typically involves:

- Co-ordinating a child's discharge from hospital ensuring that all necessary equipment, care and support is in place for the family
- Acting as a key worker, co-ordinating the child's care once at home and providing nursing support
- Teaching parents and carers how to use equipment such as oxygen and feeding tubes
- Providing emotional and practical support, especially in times of crisis.

In the past year, we have welcomed new WellChild Nurses in Cardiff and in Barrow-in-Furness (Cumbria). Rhian Greenslade started in September as WellChild Community Liaison Nurse in Cardiff and Melanie Riley began her post in Barrow-in-Furness at the end of 2009.

Funding for two more new WellChild Nurses has been allocated during the past 12 months and those appointments will be made in Ayrshire and Arran and in West Wales (covering Pembrokeshire, Ceredigion and Carmarthenshire). Plans to further extend the network of children's nurses across the UK are progressing well, and the results of an independent evaluation

of the network, carried out by a team of researchers from the University of Central Lancashire and the Children's Nursing Unit at Alder Hey Hospital (expected mid-2010) will help to shape the next phase of the programme's development.



Leo

Three year old Leo from Cardiff was born with hydrocephalus – water on the brain – and with part of his left arm missing. He spent his first three months in special care and at eight months old suffered his first epileptic seizure. His dad Kyle Jones, 22, is a single parent.

Kyle found Leo having a seizure in bed in November 2009. He was rushed into intensive care at the Children's Hospital for Wales and a scan showed extensive brain damage.

Thankfully Leo survived, but continues to need highly specialised care. He takes nine different medicines and is tube-fed. For Kyle, caring for him is a daunting prospect – but WellChild Children's Nurse Rhian has become a crucial supporter, patiently teaching him what he needs to know.

Kyle started by taking Leo home from hospital for a few hours each day. "Hospital feels safe, but when you are there constantly with a sick child, it can begin to feel like a prison. I was desperate to get Leo home.

"For both of us, it is much easier to relax when we are on our own."

With Rhian's help, Kyle is working towards caring for Leo at home full time. Kyle said: "She has been brilliant, organising the equipment I need, dealing with all the things that I would never have known how to sort out, such as free nappies and physiotherapy and rehabilitation treatment. But most of all, she's been a friend. For as long as she is there, I know I don't have to cope alone."



A Nurse's view

Rhian Greenslade,
WellChild Children's Nurse,
Cardiff



The children definitely benefit so much from being cared for at home rather than in a hospital and the parents benefit too.

Everyone is better off because the child being in hospital can be a huge drain on the family and it makes an enormous difference for them to be able to get some sort of family life back again.

For the child, being able to get back to their family is so important. In some cases where children require prolonged admissions to hospital the parents could be away from their other children for long periods and many families travel long distances from all around Wales, so it is really important to the family and child to return home as safely and quickly as possible.

I am a link between hospital and community and offer continuity, so that if a child needs to be re-admitted there is always someone who the family can contact to support them through their hospital experience. I am able to make sure that children get what they need in terms of equipment and support – and that their basic needs are being met.

It is so worthwhile having WellChild Nurses because trying to get children home from hospital when they have complex health needs requires knowledge and experience of many issues, and time allocated to co-ordinate an individual support package in the community. If someone is in that role they are able to make sure that the time these children spend in hospital is kept to a minimum, and that there are community services to support their care at home.



A Nurse's view

Melanie Riley,
WellChild Children's Nurse,
Barrow-in-Furness



The role of the WellChild Nurse is about us being creative and allowing the children we support to live life to their full potential. We have to be flexible and adaptable but there is no difference between these children and other children – it's about allowing them to flourish.

It is about helping parents get their children home and keep them there. If a child's sick it can be very traumatic for them to end up in a hospital away from everything that's familiar. By having children at home, it's less distressing for everyone involved and it means family can remain close for help and support.

But I can't do it on my own, it's about supporting the parents so that they feel absolutely confident in all aspects of the care of their child. That's how they are able to live without their family life being disrupted too much.



Cardiff WellChild Nurse, Rhian Greenslade, with Rhiannon, her mum, Debbie and sister Angharad.

WellChild Support

With a 15 per cent increase in the number of projects completed over the past 12 months compared to the previous year, and a greater geographical spread across the UK, this has been an important period for WellChild's Helping Hands programme.

The Helping Hands scheme offers immediate and practical support to sick and seriously ill children and their families across the UK, giving them much needed assistance to carry out tasks in their own homes.

Working alongside companies and other organisations, our Helping Hands projects involve managing a team of volunteer workers in the home of a seriously ill child as they carry out work such as decorating a bedroom or remodelling a garden. This work can enhance the life of the child and help to solve problems for the family – giving young people safer, healthier and more attractive environments in which to live.

Families in this situation often do not have the time available to prioritise some of these tasks – Helping Hands takes that worry away by providing the manpower and resources to give that kind of practical support.

The Helping Hands projects are also valued by our volunteers who find them truly inspiring and motivating, allowing company staff or colleagues from other organisations to work together and achieve remarkable results in a short space of time.

WellChild manages the Helping Hands projects from start to finish, providing the expertise needed to make them go smoothly and organising the workforce, equipment and materials needed to make each job a success. The projects have clear, achievable aims and address real needs for each of the families.

WellChild wishes to thank all the organisations which have provided volunteers and assistance for our Helping Hands projects throughout the year – we could not have done it without you.

09/10 Helping Hands partnerships:



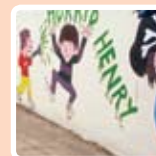
Luke

Project:
Created safe garden area
Volunteers:
John Lewis



Kecian

Project:
Created a safe garden area
Volunteers:
Salesforce.com & Quickstart Global



Lewis

Project:
Made garden sensory and fun
Volunteers:
WellChild



Abir

Project:
Made garden accessible & sensory
Volunteers:
Goldman Sachs



Jamelia

Project:
Redecorated bedroom
Volunteers:
Wall2Wall



Precious

Project:
Created safe and private garden space
Volunteers:
Citigroup



Reece

Project:
Made garden accessible & sensory
Volunteers:
United Utilities



Aleksandra

Project:
Created princess themed bedroom
Volunteers:
Barclays



Megan & Harry

Project:
Made garden safe and accessible
Volunteers:
HSBC



Ben

Project aim:
Make garden more accessible and make over bedroom

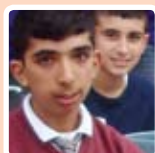
Volunteers:
SSL International

Eight year old Ben from Penketh, Warrington, has Cerebral Palsy Spastic Diplegia which means he cannot walk and needs a wheelchair. He can use walking sticks to travel short distances and at home he mostly crawls to get from place to place. Ben is an independent young man and wanted a more grown-up bedroom with storage at his level so he could choose his own clothes. He loves football and does his best to play with his brothers in the garden which can lead to a muddy mess.

A team of workers from SSL International gave their time to work on the bedroom and garden at Ben's home in Penketh as one of WellChild's Helping Hands projects. In the garden they managed to repaint and fix all the garden fences, sand and stain the decking, dig up the lawn and replace it with fake grass – which involved laying tonnes of sand and hardcore – lay a wood bark border and put up a football net. In Ben's bedroom they were able to repaint the room and make it Liverpool football club themed with curtains, bedding, lampshade and pictures. They were also able to create new storage for Ben's clothes and a computer desk with enough room to allow him to get his mobility chair underneath.

🗨️ Thanks a million – you have given us this amazing present, we cannot believe it. Ben kept asking us if it was just a dream and thought it was as exciting as Christmas, thank you. 🗨️

Ben's mum Bernie



Bekir

Project:
Created safe and usable garden
Volunteers:
John Lewis



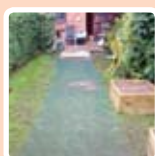
Reefah

Project:
Created safe, sensory garden
Volunteers:
InterContinental Park Lane



Gabriella

Project:
Made bedroom more comfortable
Volunteers:
UNUM



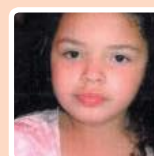
Georgie Mae

Project:
Created accessible garden
Volunteers:
Stockport Council



Callum

Project:
Made 'rockstar' theme bedroom
Volunteers:
DWP



Mya

Project:
Made garden usable and safe
Volunteers:
Salesforce.com & Bottomline



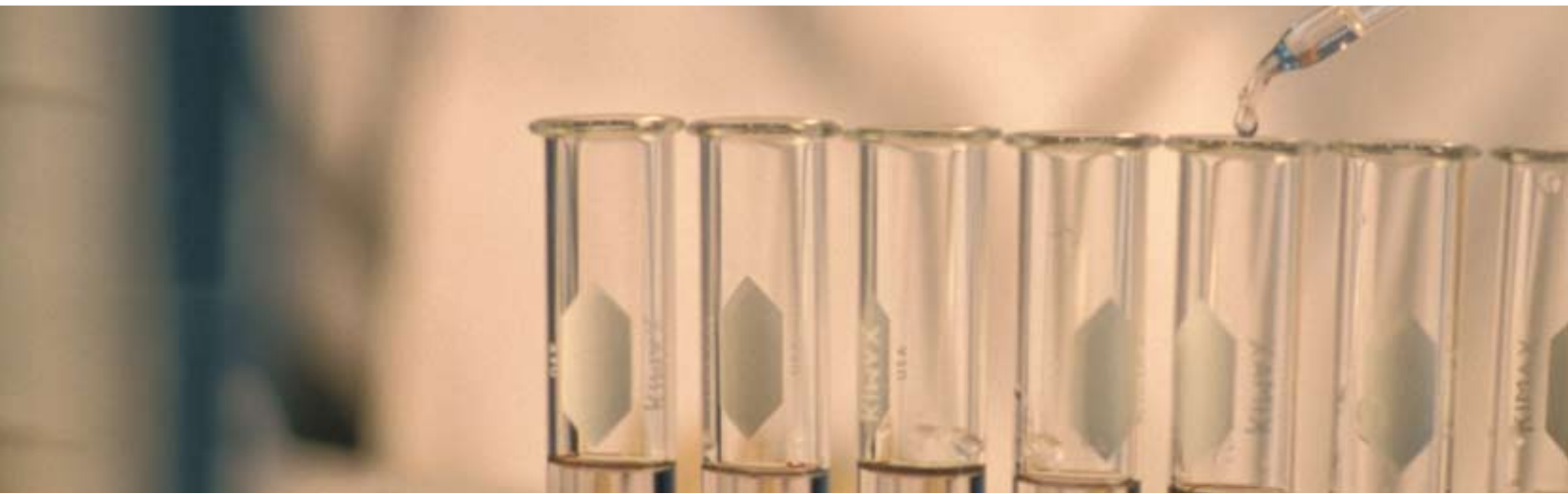
Mert

Project:
Made safe and secure garden
Volunteers:
Experian



Akeel

Project:
Created safe sleeping area and redecorated room
Volunteers:
King Sturge



WellChild Research

This year has seen a number of exciting new developments in the area of research. In early 2010, WellChild was granted National Institute for Health Research (NIHR) Partner Organisation status through its 'Project Grants' funding stream. This means that research project grants awarded by WellChild could be eligible for inclusion on the NIHR Clinical Research Network Portfolio and, therefore, able to access NHS support via the NIHR Clinical Research Network infrastructure.



Also, continuing our commitment to support early career researchers, WellChild has developed a new joint clinical training fellowship award with the Medical Research Council, with the first award expected to be made towards the end of 2010.

With work beginning on two innovative research projects, and funding allocated for two further collaborative projects working alongside the Action Medical Research charity, WellChild has continued its commitment to supporting high quality research over the past 12 months.

Over 30 years, WellChild has established its profile as a funder of children's health research within the research and scientific community and has invested more than £20 million. But with so much more to be done, WellChild remains determined to invest in high impact and effective research that ensures the best quality of life and clinical care for children and young people with long term and serious illness.

The two projects which began in earnest over the past 12 months (following the allocation of funding in the previous year) focused on eating disorders and sexually transmitted infections in children – two very important research areas which historically are not well funded but, as these projects intend to demonstrate, can have a very real impact on the long-term health of children in the UK.

New projects this year have been funded in collaboration with Action Medical Research and focus on iron deficiency in children and the MRI scanning of unborn children in the womb. More information can be found opposite.

 I have been impressed by WellChild's commitment to funding research which aims to help prevent childhood disorders and their enthusiasm in fostering this. Without WellChild we would not have been able to carry out much-needed research into eating disorders in teenagers. 

Dr Nadia Micali, Clinical lecturer, Department of Child and Adolescent Psychiatry, Institute of Psychiatry, King's College London.

Sudden unexpected early postnatal collapse



Most babies are healthy at birth and do not need extra medical care. Tragically though rarely, some babies who appear well at birth collapse unexpectedly in the first hours of life and need urgent resuscitation. Dr Julie-Clare Becher became aware of the problem of sudden neo-natal collapse

following five cases of babies collapsing unexpectedly shortly after birth on her unit at the Royal Infirmary of Edinburgh in 2006. Unfortunately as a result four babies died immediately.

Dr Becher was then contacted by a neonatology colleague at another hospital who had also witnessed this happening. In an effort to establish whether this was a common occurrence in other units, contact was made with other neonatology and paediatric colleagues across the UK. It was discovered that although this was a relatively uncommon – around one baby every two to three years – the main concern was about the lack of information available as to why this was happening and what could be done to prevent it.

What was known was that the babies often died due to injuries sustained during the collapse, for example as a result of asphyxia. However as post mortems were rarely carried out there was little evidence available on other possible causes. However Dr Becher

wanted to understand more about the circumstances of these collapses and in 2008 was awarded a WellChild Research Grant to carry out a surveillance study of sudden unexpected early postnatal collapse.

As part of this research study Dr Becher has gathered information on 45 such cases. Of these around 12 babies died, with the others surviving. Around half of those who died did so because of an obstruction to their airways. At the time the babies were on their mother's breast and were not being supervised by medical staff. In addition it occurred in mainly first time parents when the mother was often sleeping in dimmed light. As in previous cases very few of these were followed up with a post mortem.

Dr Becher felt that the majority of these cases could have been avoided, and so working with a team of professional colleagues has developed guidelines for parents and those working in obstetrics to both increase awareness of the risks of sudden collapse, and with how to prevent this occurring. These guidelines have now been trialed in Dr Becher's unit where the number of instances of sudden unexpected infant collapse has dramatically reduced. There has only been one case during the last twelve months. The guidelines are currently being reviewed by professional bodies with the hope that they can be disseminated and used by other units across the UK.

WellChild is delighted to announce that it is working collaboratively with Action Medical Research to support the funding of two new exciting projects which will start in 2010.



Dr Jonathon Powell

MRC Collaborative Centre for Human Nutrition Research, Cambridge

RAPID DEVELOPMENT OF NOVEL IRON MATERIALS TO ADDRESS CHILDHOOD IRON DEFICIENCY ANAEMIA

Iron deficiency is the most common and widespread nutritional disorder in the world. It is particularly prevalent in periods of rapid growth, such as in late infancy and early childhood, and also in pregnancy. It can cause vulnerability to infection, tiredness, delayed development and a reduced ability to learn, especially if it occurs in infants between 6 and 24 months. In the UK, anaemia affects about one in 10 pre-school children and a quarter of school-age children. Adolescents can feel tired and breathless, experience poor concentration and capacity to work. Susceptibility to infections is increased in all age groups due to the impairment of the immune system.

Worldwide, anaemia affects nearly half of all pre-school children and contributes to 20 per cent of all maternal deaths. Iron deficiency continues to be in the top 10 World Health Organisation target diseases for cure and prevention.

The oral iron supplements that are currently available can have adverse effects. Dr Powell and his team of researchers are developing new iron compounds that resemble the natural iron which is present after we eat. This should mean that any iron which is not absorbed will not lead to any adverse gastrointestinal effects. In this study they aim to identify the optimum formulation of the iron supplement for children in preparation for its subsequent use in clinical trials.



Professor Mary Rutherford

Professor in Perinatal Imaging, Imperial College, London

OPTIMISATION OF FETAL DIFFUSION TENSOR MR IMAGING TO ASSESS TISSUE MICROSTRUCTURE AND CONNECTIVITY IN THE DEVELOPING BRAIN

Some babies develop abnormalities in the brain during pregnancy. This can lead to lifelong problems such as cerebral palsy, learning disabilities and behavioural disorders. In theory, MRI scans have the potential to identify brain damage in unborn babies, but movement of the baby during the scanning procedure reduces image quality. MRI is a safe technique for assessing the fetal brain and providing more detail than ultrasound. Professor Rutherford and her team are developing a way to overcome the problems caused by the babies' movement, to provide superior quality images and improve diagnosis. The team also want to develop and optimise a more advanced MR technique – diffusion imaging – in order to map the connections within the brain. They will document the baby as it grows as well as study complicated pregnancies, where there is concern about the development of the brain. They will also be able to detect early signs of injury to the brain and will compare data from premature and regular term babies.

Premature babies are at higher risk of later developmental problems that seem to relate to abnormal brain connectivity. This new information will be used to improve management of high risk pregnancies and premature babies and promote good brain development.



An important part of WellChild's commitment to ensuring seriously ill children and young people have the highest possible quality of care and support is our work to bring current health issues to the attention of Government decision makers and other organisations – and to the wider public.

WellChild's profile as a campaigning organisation is at an early stage but it is firmly focused on influencing improvements in the health and quality of life of these vulnerable children and young people.



During 2009/10 our 'Better at Home' Campaign (in collaboration with the Royal College

of Nursing) continued to lobby for care to be delivered in the family home wherever possible, for better packages of care tailored to children's needs, and for investment in community children's nurses. The campaign's priority has been to highlight the experiences of families across the UK whose children have been in hospital long term when their care could have been more effectively managed at home.

With a changing political landscape and a renewed interest in children with serious and complex health conditions, all opportunities to influence government and decision makers continue to be explored.

Campaigning together with other organisations gives a stronger voice to highlight children's health issues. WellChild continues to actively support important campaigns, working with ACT and Children's Hospices UK for example, to highlight the need for improvements in the provision of palliative care for children and young people with life-threatening and life-limiting conditions.

WellChild also supports the 121 Nursing Campaign which highlights the lack of neonatal nurses available to care for babies born too soon, too small or too sick. This campaign is being run jointly by the charity BLISS, The Neonatal Nurses Association, The British Association of Perinatal Medicine, The Royal College of Nursing and The Royal College of Paediatrics and Child Health. WellChild also supports the Make Child Poverty History campaign.



The Mail on Sunday's You magazine supported the annual WellChild Awards with a feature. Sponsorship support was received from Next, GlaxoSmithKline, and the InterContinental Park Lane. We would also like to thank the following whose gifts in kind allowed the WellChild Awards ceremony costs to be as low as possible:

- Next** – goody bags
- Beautiful Creases** – linen
- Boxsmart** – gift boxes
- Eurowines** – wine
- La tour Melas** – wine
- John Lewis** – furniture
- Moyses Stevens** – table decorations
- Party gems** – children's entertainers
- Shopping bags direct** – trophy goody bags
- Spreadshirt** – t-shirts
- The Welsh Chair Cover Company** – chair covers

WellChild

AWARDS 2009



The fifth annual WellChild Awards, held at the InterContinental Hotel on London's Park Lane in September 2009, were the biggest and most high profile to date – helping to achieve the combined aims of raising the profile of our work, celebrating the bravery of children and young people dealing with serious illness, and honouring the health professionals who care for them.

Our Patron Prince Harry joined a host of celebrities at the event and spent private time with all the winners before presenting a Bravest Child Award and making a speech to round-off an emotional and uplifting ceremony.

Media coverage of the Awards reached an exceptional level during the past 12 months, helping to bring the WellChild brand, awareness of the need for our charitable activities and fundraising calls to action to millions of people.

There were a record number of nominations for the 2009 WellChild Awards which meant a tough job for the judging panel, which included MPs, leading health professionals, parents and key supporters who had the very difficult task of finally deciding the winners.

Following the ceremony, WellChild Ambassador Duncan Bannatyne, who has recently funded a WellChild Nurse for Barrow-in-Furness, made a fundraising appeal and music at the event was provided by all female electric string quartet Escala who shot to fame in the final of Britain's Got Talent.

 We will never ever experience anything like this again, and I know Kelsey will treasure this night forever and we will remind him of everyone that won an Award whenever he feels life is just too tough! 

Family of Kelsey, winner of the 2009 Best Brave Child Award aged 6-8.



This year's Award winners, pictured with WellChild Patron, Prince Harry, centre.

Fundraising



WellChild has worked hard to overcome the challenges created by the current financial climate. Donations from our core activity remained stable and we continued to benefit from some outstanding partnerships.

Hundreds of people chose to spend their time and effort raising much-needed cash for WellChild during the year – with donations from individuals increasing and challenge events, such as the London Marathon and the Great North Run, continuing to be very successful.

Our own annual fundraising events, such as the WellChild Summer and Christmas Fairs, and the Energy Dinner (which once again benefitted from invaluable and generous backing from Platts) were also well supported and raised more money than they had in the previous 12 months.

In addition, the annual WellChild Awards generated its highest ever level of

sponsorship donations. Our thanks go to GlaxoSmithKline, Next and the InterContinental Park Lane for their support of that event.

We are delighted to have been able to build on our strong partnership with the Team England Footballers Charity, and we became official partners with the Association of Corporate Treasurers for their high profile annual dinner.

A particular mention must also be made of the incredible support from the Aveyard family, in memory of their daughter Bryony, who raised more than £50,000 this year.

Fundraising initiatives planned for 2010/11 include a new multi-participation initiative – Walk for WellChild – and the launch of our WellChild Children's Nurse Appeal.

Fundraising highlights of the year

- A great team of 202 runners took part in the London Marathon 2009 for WellChild.
- Our partnership with the Team England footballers' charity provided much needed funding and a boost to our profile
- The Aveyard family's 'For the Love of Bryony' appeal
- David Lloyd health and fitness club at Narborough held a spinathon in aid of WellChild which involved 100 bikes and participants
- Businessman and celebrity Duncan Bannatyne joined us to raise funds for the first time at our annual Awards ceremony
- The Energy Dinner 2009, sponsored by Platts, supported WellChild for the sixth year running, and raised over £170,000
- Important donations were made by St James' Place, Mothercare, Next, the Association of Corporate Treasurers, Barbara Ward Children's Foundation, 29th May 1961 Charitable Trust and the Eveson Charitable Trust
- We were charity partner for WH Smith Xmas cards
- There was a surge in support from schools including The German School and Hornsby House School in London and North Glasgow College
- Support came in from churches including Dorchester Abbey and St Mary's Church, Stroud
- Our total income from individuals increased, as did our number of regular donors.



Pictured above during a visit to Alder Hey Children's Hospital is England star Joleon Lescott with WellChild Nurse Elaine O'Brien and one of the children she has helped, Madison.

Top inset pic:

England player Gary Neville with 2009 WellChild Most Caring Child Award winner Ashley and his brothers Leo and Nathan.

Bottom inset pic:

England footballer Emile Heskey with Adam during a visit to Wilson Stuart School in Erdington, Birmingham.



TEAM ENGLAND FOOTBALLERS CHARITY

WellChild became one of the official charity partners of the England football players, who set up their own charitable trust, the Team England Footballers Charity, to help good causes. Players committed to donate international match fees to WellChild and spend time helping to raise awareness of our work and vital services.

Among the projects the players were involved in during the year was our WellChild Christmas cards. Chelsea captain John Terry, his club-mate Ashley Cole, Aston Villa pair Gabriel Agbonlahor and Ashley Young, and Manchester City's Wayne Bridge lined up to paint their hands and make their mark so that seriously ill children could decorate the prints with Christmas designs to make the novel and unique cards.

England defender John Terry said of the cards: "I know the children have worked really hard on them and the finished results look fantastic. These are cards which do more than just send a greeting – they show you care about vulnerable kids who need your help."

The hand designs were chosen to reflect WellChild's logo which is an adult hand holding a child's hand. The finished cards are colourful and unusual – unique designs each featuring a personal touch from an England football star. The cards sold well, raising thousands of pounds for WellChild.



Left: Three members of a team of WellChild marathon runners who all dyed their hair pink for the occasion!

Middle: Our distinctive mascot Nessa the Nurse, one of the largest costumes ever to take part in the London Marathon.

Right: WellChild runners Eleanor and Katherine proudly displaying their commemorative medals.

CHALLENGE EVENTS ROUND-UP

Our top London Marathon fundraisers were Richard Bowser, Grant Budge, Stephen Fennell and Anna-Kathryn Margree who each individually raised over £5,000. Lisa Walter and Lisa Barrow raised over £6,000 between them and the team from YCO continued their brilliant support for WellChild, raising a further £17,000.

Two teams took part in the gruelling 125 mile Devizes to Westminster Canoe Marathon to raise money for WellChild. Richard Carlisle and David Snell and a team of 18 from Kelly College, Tavistock led by Anastasia Steed and Roseanna Perry all completed the gruelling course.

Our fantastic Flora London Marathon 2009 runners did themselves and WellChild proud battling round the course on a hot sunny day, raising more than £350,000 for sick children and their families in the process.

Every one of the 202 WellChild runners put in a brilliant display and our enthusiastic team of staff and volunteers made sure that they were cheered loudly round the course. Our runners were well looked after at the end of the race with a reception at the Guards Museum including food along with massages for tired legs.

Special mention must go to Robert Schooling of Warrington who ran the marathon in our massive Nessa the Nurse costume, achieving the incredible time of five hours and attracting a huge amount of media and public support on the way.



Bryony Aveyard, left, pictured with mum Kath.

For the love of Bryony

The Aveyard family from York, who are fundraising for WellChild in memory of their daughter Bryony, raised an incredible £50,000 during the year – with more to come.

Bryony Aveyard was only 11 years old when she was struck down with a brain haemorrhage and died in October 2008. Since then her mum and dad have been determined to raise as much money as possible for WellChild in her memory. Her mum Kath said: "Losing Bryony has been unbearable, but it has certainly made us appreciate what wonderful people there are in the world."

The 'For the Love of Bryony' appeal has seen Kath, her husband Rob, the family and many friends and supporters from the York area and beyond take part in a whole range of fundraising events. One key event was the Great North Run in which a large team of 'For the Love of Bryony' runners completed the race.

Supporter thanks

Our supporters make WellChild's work possible.

We would like to thank everyone who made a contribution, large or small this year.

▶ Corporate partners

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▶ Trusts

29th May 1961 Charitable Trust
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 Felicity Wilde Charitable Trust
 Miss J B Albright's Grimley Charity
 Mr & Mrs J A Pye's Charitable Settlement
 Multithon Trust
 Oglesby Charitable Trust
 Rosetrees Trust
 Simon Gibson Charitable Trust
 Sir Samuel Scott of Yews Trust
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 The Austin & Hope Pilkington Trust
 The Barbara Ward Children's Foundation
 The B-CH 1971 Charitable Trust
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 The G M Morrison Charitable Trust
 The Gleams Trust
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 The Hospital Saturday Fund Charitable Trust
 The J K Stirrup Deceased Charitable Trust
 The Joan Marsland Charitable Trust
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 The Lynn Foundation
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 The Michael & Anna Wix Charitable Trust
 The Muriel Edith Rickman Trust
 The Oak Foundation 1996
 The Oakdale Trust
 The Pilkington Charities Fund
 The Proven Family Trust
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 The Sir Cliff Richard Charitable Trust
 The Sobell Foundation
 The Summerfield Charitable Trust
 The Warwickshire Masonic Charitable Association Ltd
 Toy Trust

PATRON

Prince Harry

CHARITY MANAGEMENT

Chief Executive:
Mr Colin Dyer

Director of Programmes:
Mrs Linda Partridge

Director of Fundraising:
Mrs Miranda Chalk

Head of Operations and Finance:
Ms Pauline Astbury

TRUSTEES

Mr John Evans (Chairman)
Mr Anthony Vick (Treasurer)
Mr Trevor Jones
Ms Penny Webb
Professor Carol Dezateux (ex officio)
Mr Martin Kitcatt (resigned 17.6.2009)

Who's who

Members of Grant Review Panel

Professor Carol Dezateux (Chair)

MBBS, MSc, MD, FRCP, FRCPCH, FFPHM, FMedSci, Director, MRC Centre of Epidemiology for Child Health, UCL Institute of Child Health, London

Sue Banton (Parent Representative)

Founder and Director, Steps Charity Worldwide

Dr Margaret Fletcher

BSc, RN, RSCN, PhD, FRCPCH, Reader in Children's Nursing, Faculty of Health and Social Care, University of the West of England, Glenside Campus, Bristol

Sara Godward

PhD, Deputy Director, National Cancer Registry and Statistical Advisor, University of Cambridge

Dr Elina Hyppönen

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Dr Huw R Jenkins

MB BChir, MA, MD, FRCP, FRCPCH, Consultant Paediatric Gastroenterologist, Dept of Child Health, University Hospital of Wales, Cardiff and Director of Health Care Services for Children & Young People, Wales

Members of Child Health Advisory Committee

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DCH, MRCP, FRCPCH, Consultant Paediatrician, Community Child Health, NHS Lothian Universities Hospital Trust

Dr Huw R Jenkins

MB BChir, MA, MD, FRCP, FRCPCH, Consultant Paediatric Gastroenterologist, Dept of Child Health, University Hospital of Wales, Cardiff and Director of Health Care Services for Children & Young People, Wales

Trevor Jones

WellChild Trustee

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Beverly Searle

BSc (HonsP), PhD, Cobol, MIBiol (Parent Representative), Chief Executive Officer, Unique – Rare Chromosome Disorder Support Group

Fiona Smith

RGN/RSCN Diploma in Professional Nursing Studies, BA(Hons) Health Studies, MBA (Health), Health Adviser in Children and Young People's Nursing, Royal College of Nursing

Dr Edward Wozniak

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Members of Nursing Advisory Panel

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Cathy Cairns

RGN, RSCN, Associate Nurse Director – Strategic Development, NHS Fife

Jane Coad

PhD; MSc (PG Research Methods); BSc; BA RGN; RSCN; PG Cert Ed; DipNurs, Senior Research Fellow, University of the West of England

Mary Lewis

MSc RGN RSCN, Chief Nurse, Director for Infection Prevention and Control, Assistant Director of Clinical Standards, Bath and North East Somerset PCT & Visiting Lecturer, University of the West of England

Janice McKenzie

RGN, RSCN, BSc, MSc Division, Chief Nurse, Children's Services NHS Lothian Universities Hospital Trust

Carol Williams

Compliance Manager, Care Quality Commission South East

Honorary Treasurer's statement

This financial information has been extracted from the full audited accounts prepared in accordance with the Companies Act 1985. The audited accounts on which the auditors gave an unqualified report were approved by the Trustees on 1 July 2010 and filed with the Registrar of Companies and the Charity Commission. Reference to the full accounts should be made for a full understanding of the financial affairs of the charity. Copies are available from the WellChild office: 16 Royal Crescent, Cheltenham, GL50 3DA or at www.wellchild.org.uk

Tony Vick
Honourary Treasurer

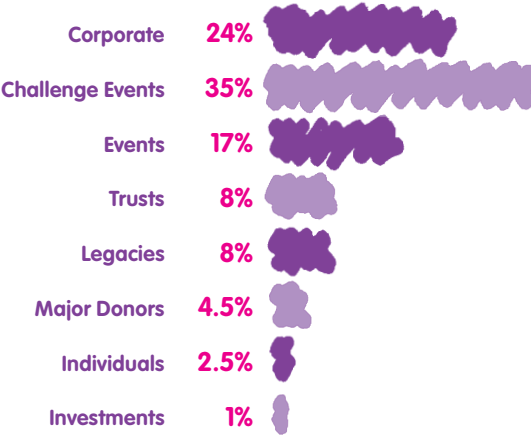
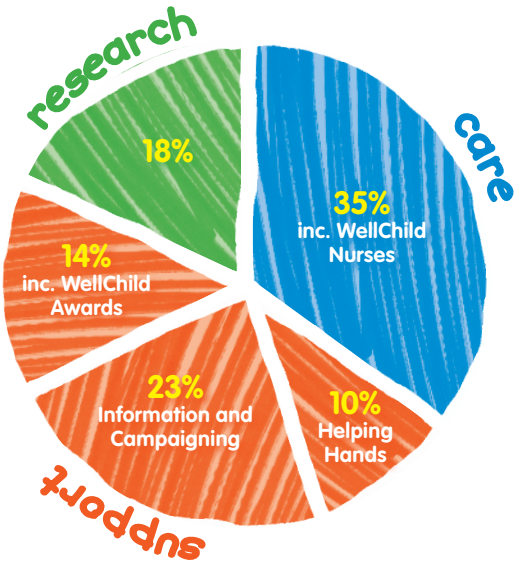
Financial Information

Our investment for sick children

WellChild's focus over the past 12 months has been on the development in all areas of our charitable service. Just over £1 million (£1,099,451) was spent across the areas of Care, Support and Research during the year. More than a third of that investment was made in the area of WellChild Children's Nurses, increasing the network by more than 20 per cent. Expenditure on our Helping Hands programme remained steady, and an increase in campaigning activity is shown as WellChild grows in this area. There was a slight decrease in the amount spent on the funding of research, however this did not result in a reduction in activity as WellChild was working more collaboratively with other charities in this area during the year.

Funding our work

WellChild raised £1,388,766 in the past 12 months. Income from challenge events (in particular the London Marathon) and corporate partnerships once again provided a large percentage of the charity's income – with a combined 59 per cent of funds raised in those areas which is an increase from the combined 52 per cent in the previous 12 month period. There was a slight fall in income from Trusts, while the largest reduction came in the area of Major Donors from 10.5 per cent of income to 4.5 per cent. The current financial climate also caused a drop in investment income from 4.5 per cent to 1 per cent.



Financial summary

WellChild had an income of £1,388,766 during the year and a total expenditure of £1,696,536 – of which £1,099,451 was spent on charitable activity.

As these figures demonstrate, we spent 79 per cent of our income on charitable activity, and allocated almost 65p of every £1 we spent to our programmes to care for and support sick children.

However, with a drop in income of approximately 32 per cent when compared with the previous year, the WellChild Board of Trustees decided to allocate some of the charity's healthy reserves for the funding of charitable activity.

WellChild continues to work to ensure that as much of the income we receive as possible is spent on the charitable

services we provide, and we successfully reduced the charity's combined expenditure on generating funds, administration and governance by more than 22% this year when compared with the previous 12 month period.



**For more
information
about WellChild:**

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