Let the Children Hear

Clinics for Children in Uganda

UK Charity No 1145080 Ugandan NGO No 10054



Annual Report 25







www.letthechildrenhear.com info@letthechildrenhear.com

UK Registered Charity No: 1145080
Ugandan Registered NGO No: 10054

Our vision

Improved hearing outcomes for children aged 0-16 years in Uganda.

Our Mission

To improve the hearing outcomes of children in Uganda by adopting strategies which focus on the prevention and early intervention of childhood hearing loss, to aid social integration, speech and language development and access to education. From its inception, LTCH has created a clear vision, mission, goals and set of objectives which underpin its strategy with the aim of providing a strong foundation on which the project can grow and become sustainable long term.

Our objectives

- To educate health care workers and the public about childhood hearing loss and the importance of prevention and early intervention.
- To increase the number of Health Care Workers trained in the field of Ear and Hearing Care.
- To provide an accessible ear and hearing care service for children and their families.
- To leave a legacy by integrating the service into the country's health care system to provide for sustainability.
- To strengthen maternal and child health care to reduce the incidence and prevalence of childhood hearing loss.

Contents

Welcome	3
Impact report	4
The numbers	14
Financial review	16
The Future	20
Our partners	22
Thanks, and get involved	23









WELCOME

Welcome to our annual report for 2025. During the year we focused on training and upskilling of our Ugandan team. This involved clinical training for our Audiology team. In addition, some of our staff availed themselves of the opportunity to upskill and expand their capabilities, taking on more responsibility and local ownership of the programme.

Let the Children Hear, (LTCH) continued to have a positive impact on the lives of many children and their communities in Uganda.

This was made possible through the support of our partners, Kampala Capital City Authority, Ministry of Health, and the health facilities in which we work. We are grateful for their continued support.

The commitment and dedication of the Ugandan team are pivotal to the operations of 'Let The Children Hear' and the impact of its work.

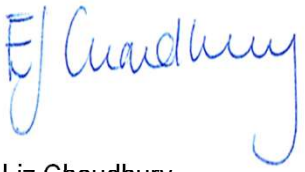
I would like to take this opportunity to congratulate the team who have excelled themselves in 2025 and risen to the challenge of taking on additional responsibilities as a cohesive team. This has resulted in greater job satisfaction, improved outputs and greater impact .

I would also like to take the opportunity to thank the ongoing support of our UK Volunteer Audiologists, clinical specialists in the field of Paediatric Audiology. They have continued to train and mentor the Audiologists and Audiology Assistant throughout the year, remotely via Zoom and in person.

Keri Abbott Clinical Audiology Scientist from Manchester visited the clinic in February for 2 weeks to provide a training programme for the clinical team.

The growth and success of project activities in 2025 would not have been possible without the support and commitment of the UK trustees', volunteers, supporters and donors.

On behalf of LTCH, I would like to thank everyone who has contributed to the success of 'Let The Children Hear ' in 2025.



Liz Choudhury
Let the Children Hear

IMPACT

Summary

Empowering, capacity building and local ownership are key words that reflect some of the notable achievements of 2025.These achievements had a positive impact on our work in Uganda and involved our indirect beneficiaries, the Ugandan team.

Let the Children Hear facilitated capacity building and upskilling of the administrative team who were keen to be empowered to take on more responsibility and local ownership of the service. This was in preparation for the drive towards future sustainability and local partners managing their own locally led service.

As a small grassroots charity, Let the Children Hear aims to ensure the best use of its resources, thereby offering value for money, the results of which, can be shared with our donors and supporters.

The administrative and clerical team were upskilled in various aspects of newborn hearing screening, data collection, financial reporting, and managerial responsibilities. The impact of this initiative can be demonstrated by the cost -effective use of resources and improved outputs. In addition, the team has now taken on greater ownership of the service, morale has improved and job satisfaction has increased.

Capacity building of the audiology team continued which strengthened the skills and expertise of the team. This has enabled them to provide a more efficient and effective service for children attending the Audiology Clinic at Kisenyi Health Centre. In the future, this service will expand to benefit more children in other areas of Uganda.

The project activities reached out to a total of 7,458 direct beneficiaries. This included the number of children who accessed screening, audiology and rehabilitation services. The total number was slightly lower, but on a par with the previous year, considering screening took place in 3 health facilities and not 4 as in 2024. During 2025, 6,260 children aged 0-6 years were screened from 3 health facilities. There was a 10% increase in the number of newborn babies screened. The biggest increase was seen at the clinic in Kisenyi Health Centre and was attributed to the availability of screeners. All staff based at the clinic are now qualified screeners and the service can be accessed by new mothers, 5 days a week .

The number of new patients seen in the Audiology Clinic at Kisenyi Health Centre was 337.

In 2025 as in the previous year, more than half of the new patients referred to the audiology clinic were from the screening sites. The partnership that LTCH has with the health facilities has given direct and indirect beneficiaries, of the screening programme, access to our audiology services. The second largest cohort of referrals comes from other health care professionals from all regions of Uganda from both the private and non private sectors.

168 children benefitted from being fitted with hearing aids.

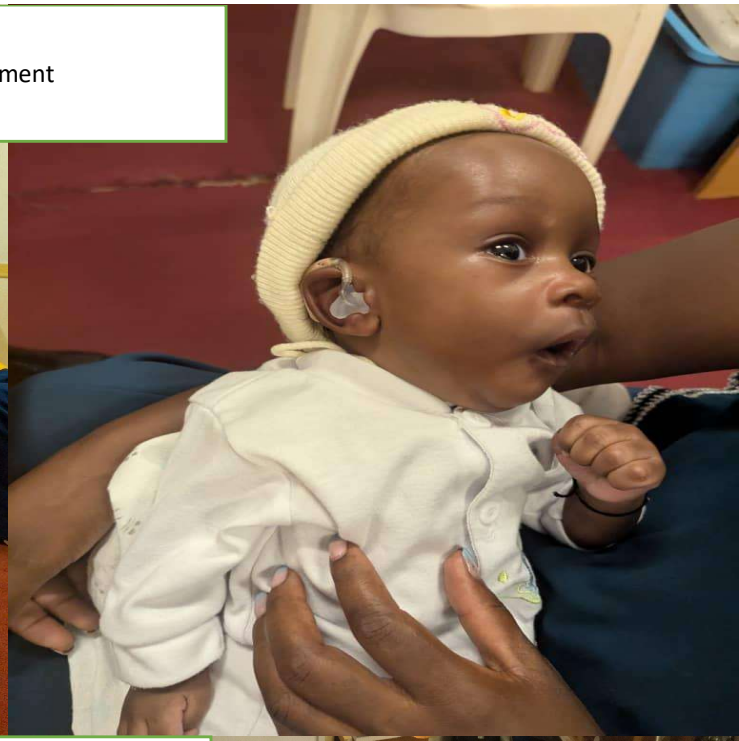
The Support Group continued to have a positive impact in terms of supporting parents and children on the hearing aid programme. The number of members who joined the WhatsApp group, increased, and the impact was clearly evidenced. Messages of thanks and support were sent to the group members for the knowledge that was shared in supporting parents to help their children with the development of their communication skills.. .

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Improving hearing outcomes for development of speech and language, social inclusion and educational achievement







Supporting families and children fitted with hearing aids to develop and practice self advocacy.







Joshua

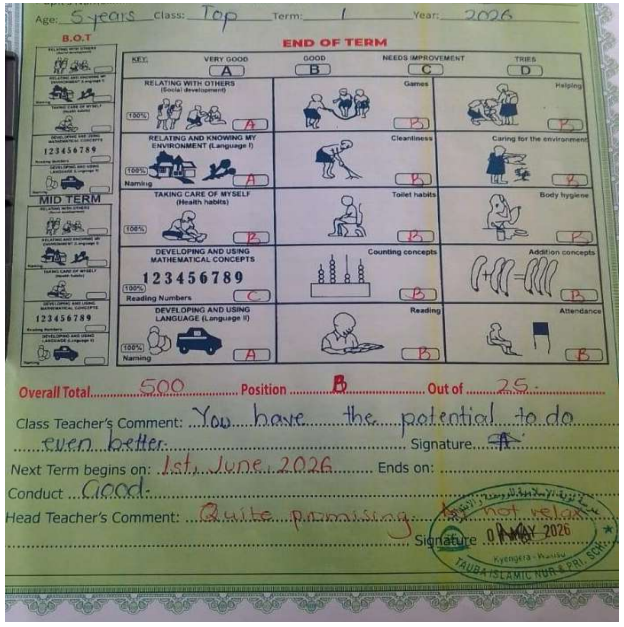
Is a 6-year-old boy who was seen in our Audiology Clinic in January 2025. He came to the clinic with his mother who had concerns regarding Joshua's lack of hearing and speech. He relied on using signs to communicate and could only say a few words.

After undergoing audiology assessment, Joshua was diagnosed with severe to profound hearing loss. His hearing levels were confirmed as being within the range to benefit from a hearing aid to assist with his speech development and communication, alongside sign language. His mother was. also keen for him to trial a hearing aid and promised commitment to the programme and brining Joshua back for follow up appointments.

Joshua was fitted with a hearing aid in March 2025 and immediately started vocalising a lot while in the clinic.

He has adjusted well to his hearing aid and likes it . He attends his follow up appointments, and his mother has reported that she is seeing a lot of improvement in his hearing. He can now communicate with his family and plays with his friends His vocabulary is increasing both at home and at school.

In school he is in top class and performing well as demonstrated in his recent school report. He is excelling in developing and using his language skills.


Age: 5 years Class: Top Term: 1 Year: 2026

B.O.T

END OF TERM

MID TERM

KEY: VERY GOOD A GOOD B NEEDS IMPROVEMENT C TRIES D

RELATING WITH OTHERS (Social development) — Games B — Helping B

RELATING AND KNOWING MY ENVIRONMENT (Language I) — Cleanliness B — Caring for the environment B

TAKING CARE OF MYSELF (Health habits) — Toilet habits B — Body hygiene B

DEVELOPING AND USING MATHEMATICAL CONCEPTS — 123456789 — Reading Numbers C — Counting concepts B — Addition concepts B

DEVELOPING AND USING LANGUAGE (Language II) — Naming A — Reading B — Attendance B

Overall Total 500 Position 8 Out of 25

Class Teacher's Comment: You have the potential to do even better. Signature

Next Term begins on: 1st June 2026 Ends on:

Conduct Good.

Head Teacher's Comment: Quite promising. Not relax. Signature 07 MAY 2026

TAUBA ISLAMIC NUR & PRI. SCH.



IMPACT

By Stories

Andrew

Is one of our youngest children on the rehabilitation programme He was fitted with a hearing aid at the age of 3 months.

Andrew's mother was directed to the LTCH clinic by a fellow mother that she had met at a local hospital. She had concerns about his lack of response to sounds. Andrew was born premature and had been exposed to maternal infection during pregnancy. His mother had contracted chicken pox (varicella) during pregnancy which resulted in Andrew being born with congenital varicella syndrome and its associated birth defects.

Andrew was diagnosed with bilateral moderate to severe hearing loss and based on these results he qualified for a hearing aid.

In September, Andrew was fitted with a hearing aid on his right ear.

At his follow up appointment, his mother reported that when he is wearing the hearing aid, he tries to turn his head towards the source of sound and to vocalise.

As Andrew has additional complex needs, such as poor muscle tone (cannot sit unaided), he is seen in a 'Joint Clinic' which is supported by two Audiologists working together to assess Andrew's progress and assist with his rehabilitation. Support is also provided to the mother by the Audiology Assistant who regularly follows up on Andrew's progress.

The direct impact of this support has been evidenced by his progress. He now babbles and tries to respond when spoken to. The wearing time of his hearing aid has also increased from the initial 1 hour a day to now 4 hours a day as confirmed by data logging of the hearing aid. The indirect impact has been evidenced by the engagement of the family who have been keen to alert the clinic regarding any issues with the hearing aid and to support Andrew's rehabilitation..

This case study demonstrates the benefit of early intervention to maximise the potential for good hearing outcomes.





TRAINING

The training programme continued in earnest in 2025 for the three Audiologists and one Audiology Assistant. It comprised of both online training via Zoom and in person training.

The online training and mentoring was provided throughout the year by UK Audiologists via Zoom . Children were seen and assessed jointly by the Ugandan Audiologists and UK Audiologists. This training and mentoring focused on assessing and managing complex cases and included children with additional disabilities. It has enabled the Ugandan Audiologists to better manage such cases and to develop their expertise and confidence. The Audiology Assistant continued to develop her skills in hearing aid fitting and programming. In addition, she learnt how to take impressions for ear molds so that she was able to offer the complete pathway of hearing aid preparation, fitting and aftercare.

Some of the training and mentoring was done online but the majority was in person in the clinic, due to the need for teaching and assessment of practical skills..

In February, Keri Abbott one of our UK Audiology volunteers visited the clinic in Kampala, to provide a three-week training programme.. This in person training supplemented and consolidated the online training and allowed for practical training to take place in the clinic. The impact of this training was twofold for both the direct and indirect beneficiaries. It has provided for a more effective and efficient quality assured service for the children and their families. In addition, the Audiology team have benefitted from increased knowledge, skills and expertise and been rewarded with a sense of achievement, confidence and greater job satisfaction. In the long term and for future sustainability, there will be capacity building of paediatric audiology services in Uganda as a direct result of the training programme.



IMPACT





TRAINING





IMPACT

NEWBORN HEARING SCREENING

NEWBORN HEARING SCREENING

Newborn hearing screening was conducted in 3 health facilities. A total of 4,658 babies were screened a 10% increase on 2024. In addition to screening, all mothers received a health education talk which increased awareness on the preventable causes of hearing loss and the importance of early intervention.

At Kisenyi Health Centre, LTCH continued to work in collaboration with the birth registration clinic, our referral point, from where 6-day old babies were referred for screening. A total of 4,104 babies were screened an increase of 14% on the previous year.

The upskilling and job sharing of our Uganda team increased the availability of screeners and had a direct impact on screening capacity this year. Follow up rates from screening for those babies who required further assessment was highest in Kisenyi Health Centre with more than 60% attending follow up appointments. This is one of the key performance indicators LTCH adopts to measure impact of the screening programme, and Kisenyi Health Centre performed well this year.

At Naguru China Friendship Hospital a total of 530 babies were screened in the paediatric outpatient's department a decrease of 13%. This reduction was due to the screeners working hours being reduced in 2025.

At the ENT Children's Outpatient Department at Mulago Hospital , newborn babies continued to be opportunistically screened. 24 babies were screened ,a negligible increase from the previous year. This number remains low as very few newborn babies attend the ENT department.

Nsambya Hospital screening programme continued its suspension. whilst fundraising for a screening machine continued. However, the partnership between LTCH and the hospital continued with referrals being made for hearing screening and assessment at Kisenyi Health Centre.





UK Registered Charity No: 1145080
Ugandan Registered NGO No: 10054

INFANT SCREENING AND ASSESSMENT

EARLY INFANT HEARING SCREENING

The early infant screening continued at two hospital sites, Mulago National Referral Hospital, Paediatric ENT Clinic and Naguru Hospital, Paediatric Outpatients Department. Children aged 6 weeks to 6 years were screened . The total number of children screened was 1,602 a decrease of 32% which was attributed to various factors.

In Mulago Hospital the working environment is not always favourable for screening, and the paediatric ENT clinic is only operating one day a week. Opportunities for screening are therefore limited. However, due to it being the National Referral Hospital it is important for LTCH to continue to provide a screening service. Working in partnership with the hospital continues to benefit many children who are directly referred by health care workers to the Audiology Clinic at Kisenyi Health Centre. In 2025, 62 children were referred from Mulago Hospital.

In Naguru Hospital as for newborn screening, the number of infants and young children screened was relative to the reduction in the screener's working days. Like Mulago Hospital, Naguru Hospital also had a good number of direct referrals to the audiology clinic. A total of 46 children were referred.

Follow up rates for further assessment for both direct and indirect beneficiaries of the screening programme were 50% and 40%, respectively.



ASSESSMENTS

In 2025 , 363 newly registered patients were given appointments at the Audiology Clinic in Kisenyi Health Centre.

337 children (93%) were seen, and 26 children (7%) did not attend their first appointment.

More than 40% of the new patients seen, were referred from the screening sites with the remainder being from other health care professionals and self –referrals i.e. friends/relatives who had recommended the service.

861 children attended follow up appointments at the audiology clinic and the hearing aid clinic. A total of 1,198 appointments were completed.

The number of children attending follow up appointments saw an increase of 7% from the previous year .

Overall, the total number of children lost to follow up in the audiology clinic in 2025 was 96 children a 23% reduction from the previous year.

This was mostly due to the excellent efforts of the Clinic Clerk who focused on improving attendance rates.

209 children were diagnosed with varying degrees of hearing loss in one or both ears.

133 of these children (63%) were diagnosed with permanent bilateral disabling hearing loss (> 35 decibels in the better ear) of which 75% were diagnosed with severe to profound hearing loss. In the absence of early intervention, this can severely impact on good hearing outcomes in terms of speech and language development, ,social integration and educational achievement.

The remaining 36% of children were diagnosed with unilateral hearing loss and conductive hearing loss which also require monitoring and in some cases remediation with hearing aids.

108 children had normal hearing and .

10 children were still awaiting diagnosis at the end of the year.

.**REMEDIATION**

168 children were fitted with hearing aids which included :

62 Children fitted with their first hearing aid

17 Children fitted with a second hearing aid

78 children had hearing aids replaced due to hearing aids being lost or faulty.

11 children had their hearing aid upgraded.

LTCH continues to offer a comprehensive hearing aid programme of remediation and long-term rehabilitation. Some children with severe to profound hearing loss will not benefit from hearing aids in terms of speech and language development. Sign language is encouraged and parents are supported to utilise the resources available to learn with their child as well as being directed to deaf schools or cochlear implant centres where appropriate.





REHABILITATION

Supporting Children & Families

SUPPORT GROUP

During 2025 the parental support group continued to provide support to parents of children on the hearing aid programme.

A greater emphasis this year was placed on team members and parents sharing information and advice remotely via the WhatsApp Support Group. This was in response to the various difficulties faced by parents in trying to attend meetings at the clinic in Kisenyi. Health Centre.

The parents of every child newly fitted with a hearing aid were given the opportunity to join the WhatsApp group. In addition, the Audiology Assistant identified some children and parents who needed the support of the group. The group saw an increase of 16% from 68 to 79 members in 2025.

Informative topics for discussion on the WhatsApp group included a shared document on techniques to develop children's speech, language and communication skills. Many parents responded on the group and expressed their appreciation for the sharing of knowledge. The WhatsApp group also provided a platform for sharing clinic notices and for sharing impact stories of children who have experienced good hearing outcomes since being fitted with hearing aids.

In- house sessions continued but were fewer in number.

3 sessions were organised this year for 32 attendees. Many new parents benefitted from the sessions and were encouraged to learn that other parents had similar challenges as themselves.





THE NUMBERS

4,658
New-born babies screened



1,602
infants and young children screened



168
children fitted with hearing aids



337 New cases seen in audiology clinic

861 Follow-up appts – in audiology clinic

THE NUMBERS

337
New children seen



63%
diagnosed with permanent bilateral hearing loss.







209
62% of children diagnosed with hearing loss



75% of children with permanent hearing loss diagnosed with severe –profound loss



Financial review

2025 FINANCIAL REVIEW

Incoming resources

LTCH's total income during the year was **£35,399.06** (2024: £21,522) a 64.48% increase on 2024. Income, except for interest on funds held on deposit, was split between, voluntary donations, the continuing initiative with a professional fundraiser and fund-raising activities as shown in the following table:

Funding remains our biggest challenge

	Year ended 31 December 2025			Year ended 31 December 2024		
	Total £	Unrestricted £	Restricted £	Total £	Unrestricted £	Restricted £
Income						
UK Grants	-	-	-	-	-	-
US GRANT	-	-	-	-	-	-
Donation – general	**12,956**	12,956	-	**3,395**	3,395	-
Donations – restricted	-	-	-	**2,654**	-	2,654
Donations - fundraiser	**22,232**	22,232	-	**11,190**	11,190	-
Fundraising activities	-	-	-	**4,061**	4,061	-
Interest	**211**	211	-	**222**	222	-
	35,399	**35,399**	-	**21,522**	**18,868**	**2,654**

A further breakdown of our general fundraising activities

	Year ended 31 December 2025			Year ended 31 December 2024		
Fundraising	Total £	Unrestricted £	Restricted £	Total £	Unrestricted £	Restricted £
Prof fundraiser	**22,232**	22,232	-	**11,190**	11,190	-
Charities Trust	**366**	366	-	**941**	941	-
Gift Aid	-	-	-	-	-	-
Fundraising events	-	-	-	**120**	120	-
Miscellaneous			-	-	-	-
	22,598	**22,598**	-	**11,211**	**11,211**	-

Our largest source of income, this year, was from the continuing professional fund-raising initiative which increased 98% from £11,190 to £22,232. There was no further grant from the US Church of Latter-Day Saints, organised by the Global Partnership for Hearing Health (GPHH) as this programme had come to an end. We are currently seeking further support from them for future programmes. General donations stayed similar to the previous year. Fund Raising Activities decreased from £4,061 to £0. Except for specific funding applications, we continue to seek to raise grant funding on an unrestricted basis, so that it may be applied where most needed.

Donations from individuals increased by 281% from £3,395 to £12,956.

We benefit from Gift Aid on most of the regular donations we receive via Just Giving.

2025 FINANCIAL REVIEW

Funding remains our biggest challenge

Resources expended

During the year, LTCH expended a total of **£37,002** (2024: £54,002) a decrease of 31% to the expenditure in 2024, as shown in the following table:

	Year ended 31 December 2025			Year ended 31 December 2024		
E1penditure	Total £	Unrestricted £	Restricted £	Total £	Unrestricted £	Restricted £
Ugandan Funding[1]	**29,876**	29,876	-	**42,778**	18,258	24,520
Fundraising costs	**1,777**	1,777	-	**1,256**	1,256	-
Administration costs	**1,866**	1,866	-	**1,375**	1,375	-
Trustee monitoring	**3,483**	3,483		**8,593**	8,593	-
	37,002	**37,002**	-	**54,002**	**29,482**	**24,520**

1.Including money transfer costs

As in most previous years, the bulk of expenditure is committed directly to the project in Kampala. Funding decreased by £17,00 (31%) this year. This was due to the completion of the programme funded by The Church of Latter-Day Saints in the previous year which was not renewed in 2025. We are negotiating to re-start this programme in 2026

Trustee visit costs decreased by £5,110 (59%) due the completion of The Church of Latter-Day Saints programme which meant that the requirement for site visits to Uganda were reduced.

Administration costs stayed broadly similar to the previous year with costs increasing for inflation.

As a small charity run entirely by volunteers, we strive to minimise our expenditure on items other than direct project costs. Our fundraising cost solely comprised service charges for Just Giving and the professional fund raiser.

Our administration costs were only £1,866 for insurances, website, internet, and bank charges.

Inspection of accounts

As our income for the year exceeded £25,000, our accounts were inspected by an independent examiner.

Reserves policy

LTCH's reserves policy is, subject to exceptional circumstances, to maintain a minimum reserve of £6,000 or three months anticipated committed expenditure, whichever is the lower. On 31 December 2025, we had unrestricted reserves of £16,821(2024: £16,610) held in a Virgin Money Interest Bearing Charity Account which is more than sufficient to cover six months of committed expenditure at current levels.

Surplus funds are held in the Virgin Charity Account and although interest rates are low, the Trustees do not consider it appropriate to invest funds where there is a risk of capital depreciation.

2025 FINANCIAL REVIEW

Fundraising

Fundraising has again remained a challenge but has improved from the previous year thanks to the efforts of our professional fundraiser. We are still concentrating on securing future grant funding to continue expanding the screening programme in Uganda.

General Fundraising and ring-fenced donations, throughout the year, raised £21,300.

Again, we would like to say a massive thank you to all these super humans and organisations who have donated and fundraised for us throughout the year as this really does make a huge difference to us.

Let the Children Hear
Receipts and Payments Account - Year Ended December 31 2025
Draft Accounts

	Year ended Dec 31 2025 £	Year ended Dec 31 2024 £	Variance In period £
Receipts			
Donations, Allocated	18.99	2,654.00	-2,635.01
CAF Grant	200.00	0.00	200.00
UK Online Giving	19.18	0.00	19.18
Paul Woodcock Fundraiser Donations	22,232.00	11,190.00	11,042.00
General Donations, Unallocated	9,130.00	3,395.00	5,735.00
General fundraising -Just Giving	2,060.98	2,962.82	-901.84
General fundraising - Benivity	0.00	37.50	-37.50
General fundraising - Uganda	1,141.00	0.00	1,141.00
Tax credits on donations (Gift Aid)	0.00	0.00	0.00
Charities Trust Donations	366.30	941.08	-574.78
Giving. Com	18.99	0.00	18.99
Shrap Sacks	0.00	70.00	
Christmas Cards	0.00	50.00	-50.00
Virgin Deposit Account Interest	211.62	222.46	-10.84
	35,399.06	**21,522.86**	**13,946.20**
Payments			
Website,computer, Office 365	1,675.86	1,197.40	478.46
Data Protection Registration	47.00	35.00	12.00
Insurance	142.80	142.80	0.00
Just Giving charges	0.00	0.00	0.00
Fund Raising Fees	1,776.89	1,255.98	520.91
Bank charges	0.00	0.00	0.00
Ugandan costs :			
Transfers to Uganda Operation	25,000.00	34,000.00	-9,000.00
Trustees/volunteers expenses	3,483.00	8,592.62	-5,109.62
Medical equipment & medicine	4,876.93	8,778.18	-3,901.25
	37,002.48	**40,105.97**	**-16,999.50**
Bank accounts as at December 31 2024	58,726.11	58,726.11	
Bank accounts as at December 31 2025	**57,122.69**		





The Future

Summary and Future Direction

2025 was pivotal in capacity building the skill set of the Ugandan clinical and non- clinical team to provide an effective ,efficient and quality assured hearing health care service for children. .

Looking ahead to the future, LTCH is planning for future capacity building and future sustainability of this invaluable service. This will be achieved by increasing access to the service in other areas of Uganda through collaboration with various stakeholders.

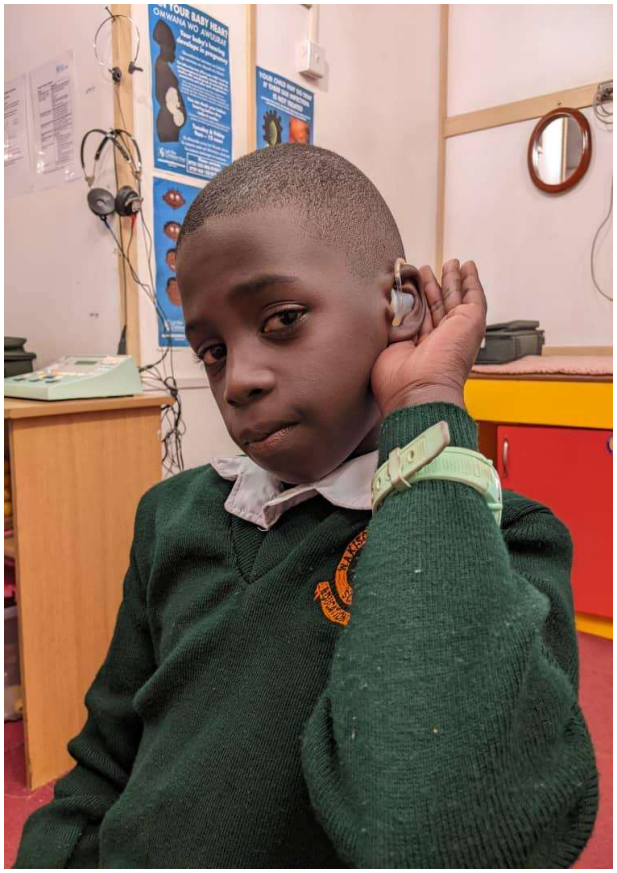
During 2025 , LTCH started the process of capacity building the paediatric audiology service by supporting one of the Audiologists it trained to set up another audiology clinic in Kampala.. Resources were provided and support and training is ongoing. This has the future potential to include options for integration and sustainability of the services we offer within a working model that incorporates the charitable sector , with the government and non- profit sectors of health care..

LTCH supported another audiologist in exploring the options for setting up another clinic outside Kampala.

2026 will see capacity building of the hearing screening service and it is hoped that Global Partners for Hearing Health will further support the project.

In addition, plans are in place to increase the charity's online marketing and communications .One of the Ugandan employees will take local ownership of the project in providing content and managing the online marketing and communications.

LTCH will continue to look at ways of capacity building its UK team of trustees and team members for future growth of the charity.



Our Partners

A big thank you to our partners

LTCH continued its partnership with the following key stakeholders, including the Ministry of Health, Kampala Capital City Authority (KCCA), Mulago Hospital , Kisenyi Health Centre, St Francis Hospital Nsambya and Naguru China Friendship Hospital, all of whom continued to support the project activities.

LTCH would like to thank our volunteer audiologists in the UK who have contributed to support our work in Uganda in terms of teaching and peer reviewing test results .Pam Layton, Keri Abbott , Anushri Patel. and Siobhan Brennan. Their input has been invaluable in providing the Ugandan Audiologists with the knowledge and skills to deliver a quality assured service for our patients and families.

We would also like to thank all our donors, fundraisers, and supporters in 2025. Without their continued support, it would not be possible to sustain this project, we thank them all.



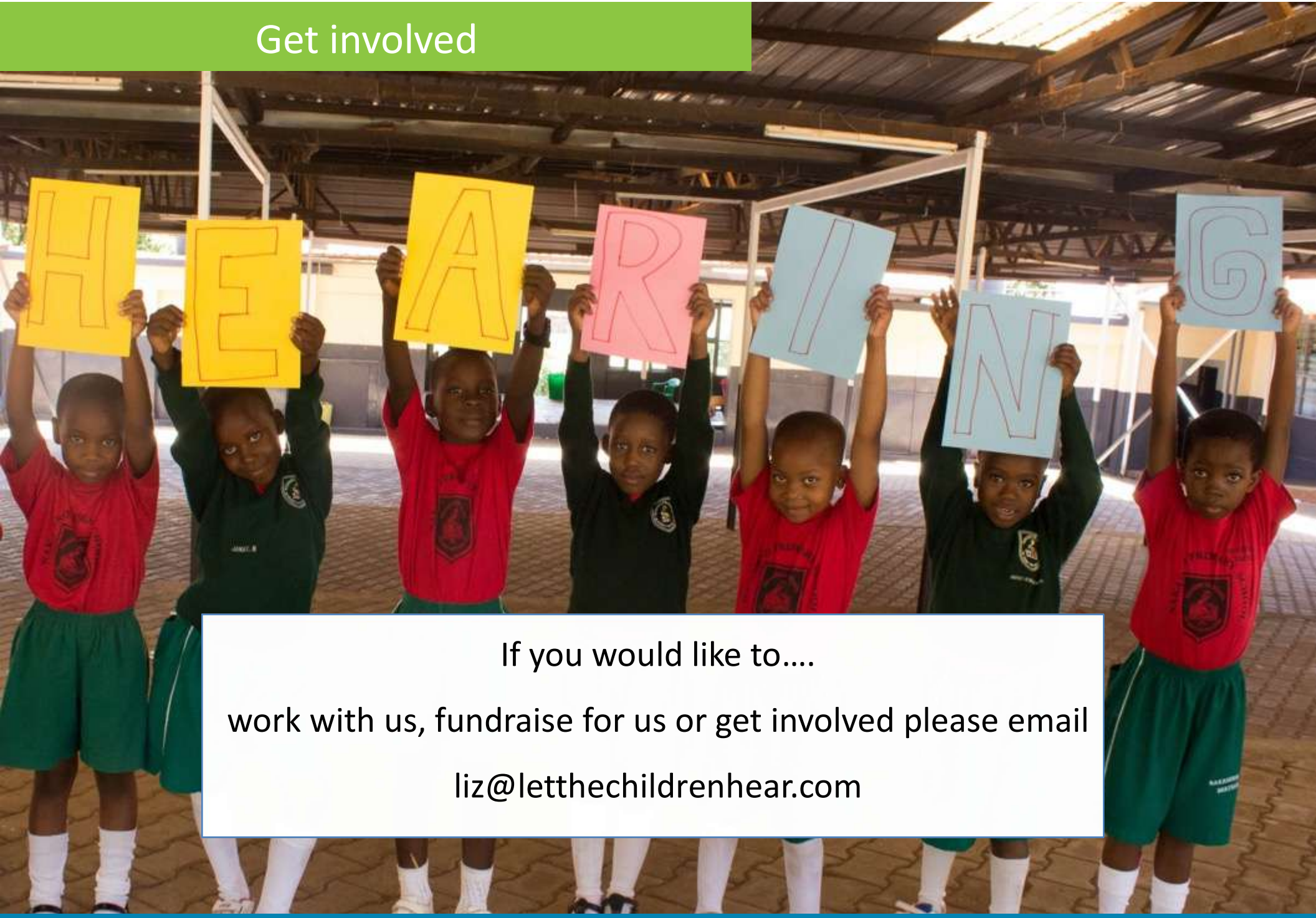
KCCA
KAMPALA CAPITAL CITY AUTHORITY
For a better City

THE REPUBLIC OF UGANDA
MINISTRY OF HEALTH

GLOBAL PARTNERSHIPS FOR HEARING HEALTH

THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS
www.ldscharities.org

Get involved



If you would like to….

work with us, fundraise for us or get involved please email

liz@letthechildrenhear.com

Let the Children Hear
Receipts and Payments Account - Year Ended December 31 2025
Draft Accounts

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Just Giving charges	0.00	0.00	0.00
Fund Raising Fees	1,776.89	1,255.98	520.91
Bank charges	0.00	0.00	0.00
Ugandan costs :			
Transfers to Uganda Operation	25,000.00	34,000.00	-9,000.00
Trustees/volunteers expenses	3,483.00	8,592.62	-5,109.62
Medical equipment & medicine	4,876.93	8,778.18	-3,901.25
	37,002.48	**40,105.97**	**-16,999.50**
Bank accounts as at December 31 2024	58,726.11	58,726.11	
Bank accounts as at December 31 2025	**57,122.69**		

CHARITY COMMISSION FOR ENGLAND AND WALES

Independent examiner's report on the accounts

Section A Independent Examiner's Report

Report to the trustees/ members of	Charity Name Let The Children Hear		
On accounts for the year ended	31 December 2025	**Charity no (if any)**	1145080
Set out on pages	1 (remember to include the page numbers of additional sheets)		

I report to the trustees on my examination of the accounts of the above charity ("the Trust") for the year ended **31 December 2025**.

Responsibilities and basis of report

As the charity trustees of the Trust, you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ("the Act").

I report in respect of my examination of the Trust's accounts carried out under section 145 of the 2011 Act and in carrying out my examination, I have followed the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination which gives me cause to believe that in, any material respect:

- accounting records were not kept in accordance with section 130 of the Act or
- the accounts do not accord with the accounting records

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in order to enable a proper understanding of the accounts to be reached.

Signed:		**Date:**	23 October 2026
Name:	Amy Thompson		
Relevant professional qualification(s) or body (if any):	ICAS		
Address:	34 Palestine Grove London SW19 2QN		

Section B Disclosure

Only complete if the examiner needs to highlight matters of concern (see CC32, Independent examination of charity accounts: directions and guidance for examiners).

Give here brief details of any items that the examiner wishes to disclose.	N/A