

Response of the Board of The Drinkaware Trust to the Drinkaware Audit Recommendations 2013

Having received the report of the independent audit of Drinkaware in April 2013, we were pleased to note that the report confirms the substantial progress made by the organisation in the last three years. We extend our thanks to the members of the Independent Review Panel, to its Chair, Sir Hugh Taylor, and to their selected auditors, 23red, who carried out this extensive review with diligence and sensitivity.

In the past six months, we have digested the findings of the audit and considered its many recommendations. Overall, we welcome its findings which come at a critical time in the evolution of the Trust as we consider how to take the organisation forward and to map a future strategy to 2020.

We recognise too that the context within which we operate has changed dramatically in this time, with the creation of Public Health England, the integration of public health into local authorities, and the evolution of the Government's Alcohol Strategy, and this changing context has an impact on our response.

Our response to the main findings and recommendations of the audit is given below, with a detailed response to each recommended action given in Appendix 1.

Main findings and recommendations

1. Develop a robust evidence base

- 1.1 The audit acknowledges that the evidence that interventions via information, campaigning and other marketing activity change alcohol-related behaviour is currently poor and that 'all organisations that seek to change behaviours via campaigning or marketing struggle with this issue'. This said, we accept the recommendation to aim for a robust evidence base, both to direct our resources to the most effective channels and to prove our impact.
- 1.2 In 2013, we have invested 12% of our income in evidence-gathering and evaluation, and have:
 - 1.2.1 At arm's length and through the provision of a grant to Alcohol Research UK (ARUK), commissioned a comprehensive and systematic review into the effectiveness of in-schools, life skills-based alcohol education in primary and secondary schools. This review was completed by the National Foundation for Educational Research (NFER)

and was published on our website in September 2013. This work complements the randomised controlled trial (RCT) of Intuition, Drinkaware's in-schools education programme, which takes place through the 2013 / 14 academic year and has also been commissioned at arms' length through ARUK. The results of the RCT will be published in Autumn 2014.

- 1.2.2 Begun a strategic, independent review into the harm caused by drunkenness in the night-time economy, in response to our own evaluation of the 'Why Let Good Times Go Bad' campaign and to its critical appraisal by the auditors. This review is being conducted by Dr. Simon Christmas, Visiting Senior Research Fellow in the Centre for Public Policy Research at King's College London, and included an open call for evidence. We have been grateful for the collaboration of the Association of Police Officers (ACPO), the Home Office and local police forces and Police and Crime Commissioners. Evidence submitted by interested bodies will be augmented by in-depth consumer research to understand the motivations and triggers for excessive binge drinking. The report of the research team will be published in Spring 2014.
- 1.2.3 Commissioned a systematic evidence review of the impact of alcohol on brain development in adolescence to provide robust claim support for the 2014 / 15 Parents Campaign. This review is being conducted by Professor Sarah-Jane Blakemore at the Institute of Neuroscience, University College, London and Professor Sarah Feldstein-Ewing at the University of New Mexico. It is being overseen by Professor Jonathan Chick, a member of our independent Medical Advisory Panel. This review will be subject to peer review, published on the Drinkaware website and submitted for publication to a scientific journal in 2014.
- 1.3 In addition we have adopted new ways of working with the Medical Advisory Panel to allow them to take a broader strategic perspective of Drinkaware's activities. Further, the Chief Medical Adviser now attends Drinkaware board meetings as an independent observer and his annual report for 2013 and subsequent years will be published on the Drinkaware website.
- 1.4 Looking ahead, the board has agreed to set up an independent Research and Programme Effectiveness Advisory Panel (working title), comprised of experts in marketing, behavioural psychology, impact assessment and evaluation to inform our work. This Panel will be the responsibility of the Director, Evidence and Impact, when appointed.
- 1.5 We acknowledge the recommendations of the audit, to augment self-reported measures of behaviour change with robust data, and that the reliance on claimed rather than actual behaviour change is a challenge shared by all with an interest in reducing alcohol-related harm. We are exploring ways to work with our funding partners in retail environments in particular (off and on-trade) to help us gather evidence of actual behaviour change over time. We have tested this approach in two local areas in 2013:
 - 1.5.1 Glasgow: As part of a wider collaboration with the Scottish Government Alcohol and Industry Partnership (SGAIP), we have tested the sales impact of consumer point-of-sales materials reminding shoppers of the benefits of switching to a lower-alcohol beverage. The results of the initiative will be published in early 2014. We commissioned evaluation agency Brain Juicer from project design through evaluation, to ensure a robust approach.

- 1.5.2 Northamptonshire: We are testing the impact of promoting free water in a small number of pilot pubs, where we will be able to compare sales and other data in test and control premises. The results of this test will be available in Spring 2014. We have commissioned evaluation agency Brain Juicer to ensure a robust evaluation design from the outset, and to complete the pre and post evaluation.

2. Recognition of independence

- 2.1 While acknowledging that there was no specific evidence of any inappropriate influence by the industry or the industry members of the board, the auditors recommended that trustees consider substantial changes to the governance arrangements of The Drinkaware Trust and in particular the composition of the board in order to address the perceptions that such inappropriate influence took place.
- 2.2 The board has consulted widely on options including, as suggested in the audit report, a move to a 3:3:7 composition of industry, non-industry alcohol and independent members and the creation of a 'blind trust'.
- 2.3 We recognise however measures to endure more rigorous governance, enhanced checks and balances, and greater transparency will help to reduce the perceptions in some quarters of excessive industry influence. The measures we have adopted will, we believe, be at the leading edge of good governance practice.
- 2.4 With respect to the core issue of board composition we believe that it is absolutely critical that the board is able to recruit to its membership the right mix of skills and experience and the best available talent in order to ensure that the organisation achieves the maximum possible impact in its mission of education and behaviour change to reduce alcohol harms. For this reason the former quotas requiring a set number of the trustees to come from the alcohol industry and from alcohol-related roles respectively have been abolished. Conversely the number of trustees who are employed within the alcohol industry or with a substantial professional role in relation to alcohol policy will be limited to a maximum of two in each case but there is no obligation to have any trustees who fall into either category. This goes well beyond the first of the auditors' suggestions and follows the spirit of the second option in seeking to ensure that all trustees are appointed solely for the value that they can bring to the work of Drinkaware. The elimination of the 'quotas' will permit a reduction in the size of the board from 13, which is large for an organisation the size of Drinkaware, to between nine and eleven depending on the needs at the time.
- 2.5 We have adopted the following additional governance rules:
- All trustees will be appointed according to merit based on the needs of the Trust and will be subject to rigorous standards of behaviour.
 - All trustee appointments will be subject to a rigorous and transparent recruitment process and all positions advertised.
 - Each trustee will update annually his or her register of interests, which should also include an undertaking to act only in the best interests of the Trust, with an item at the beginning of each agenda for trustees to notify any changes. A summary of the interests will be reviewed by the board following the completion of the register and published on the website.
 - All trustees will be supported by a formal induction process and an annual review conversation with the Chair.
 - The minutes of board meetings will be published on the website with the exception of confidential matters relating, for example to personnel issues.

- The Chief Medical Adviser (CMA) and chair of the Medical Advisory Panel (MAP) will attend board meetings in a non-voting capacity and the CMA's annual report to the board will be published on the website.
- There will be a further review in not more than five years.

2.6 At time of writing, trustee recruitment is ongoing as a number of trustees retire by rotation. This recruitment has been informed by a skills audit to assess the needs of the board and is expected to broaden the skills and experience of the board.

3. Promote collaboration

- 3.1 We agree with the conclusion of the Audit there is a need for Drinkaware to build more positive relationships with non-industry stakeholders, and to refocus our stakeholder engagement programme towards building collaborative, mutually beneficial relationships with Government, health NGOs and the public health communities at a national and grass roots level.
- 3.2 We have considered the recommendation of the auditors that ‘one way to do this might be to reinstate the grants programme or introduce a campaign-related bid fund’. However, our assessment of the 2007 – 2012 grants programme led us to conclude that the expenditure on a variety of a highly-localised projects delivered neither sufficient impact nor good value for money. We therefore have no plans to reinstate the grants programme at time of writing but are committed to working in partnership with other agencies to make our materials suitable for and available to local programmes.
- 3.3 In 2013 we have demonstrated our commitment to working with others by:
 - 3.3.1 Consulting with a number of charities and parenting organisations to inform the development of our Parents Campaign
 - 3.3.2 Supporting the Royal College of GPs to create a GP e-learning tool, to support the professional development of GPs in relation to alcohol. The tool launched in September 2013
 - 3.3.3 Entering into our first local partnership with local public health, in Berkshire, on a joint project to create, test and evaluate the impact of a new Resources Kit, ‘What’s In Your Glass?’. The initiative is collaboration between Drinkaware, Berkshire Public Health and the Berkshire Local Pharmaceutical Committee and will be evaluated by Shared Intelligence, given their considerable experience in evaluating pharmacy / public health initiatives. The ‘What’s In Your Glass?’ kit will help customers measure and track their drinking, leaving them better able to avoid long-term health risks, and equip community pharmacists to provide confidential advice and support to customers who want to reduce their alcohol consumption
 - 3.3.4 Collaborating with the Royal College of Obstetricians and Gynaecologists and Royal College of Pharmacists to engage parliamentarians and politicians in a debate around the role of ‘nudge’ tactics to promote public health, at each of the 2013 Party Conferences
 - 3.3.5 Offering the Drinkaware digital unit calculator and other digital content to a number of NGOs in alcohol-related harm and health sectors.
- 3.4 We recognise that collaboration can be resource-intensive and we have invested additional resources in this area with the appointment of a Stakeholder and Partnership Manager, Public Health from November 2013.

4. Resource appropriately to deliver

- 4.1 We accept the recommendation of the Auditors that Drinkaware should be appropriately and adequately resourced to deliver a demanding agenda. Since the publication of the Audit, we have:
- 4.2 Completed a skills and capability audit of both the board and staff, and agreed a revised organisational structure which is now being put into place. The new structure includes:
 - 4.2.1 Making permanent the focus in SMT on stakeholder relationships, with the replacement of a contracted SMT resource by a staff role with the title 'Director, Partnership and Business Development'.
 - 4.2.2 Creating two new posts: Director, Evaluation and Impact and Digital Assistant.
 - 4.2.3 A greater focus on strategic marketing skills and on the marketing process from consumer insight to the delivery and evaluation of marketing assets, which will require changes to structure, recruitment, processes and reporting.
- 4.3 Agreed with industry to continue funding at its present level, in 2014, which will allow us to develop a robust, evidence-based 2015 – 2020 strategy and funding model for presentation to funders in 2014.

Appendix 1

Audit ref.	1. Activity analysis	Drinkaware Response	Responsibility	Timing
9.207	Review vision and core purpose	The Drinkaware board has revised and restated the mission and vision for Drinkaware which is published on our website.	Chair and Board	Completed
9.207	Develop an overarching marketing strategy	We accept this recommendation and have added to the marketing skills of Drinkaware through recruitment. The 2014 Plans present an over-arching marketing approach which will be further developed in our 2015 - 2020 strategy.	CEO; Director, Marketing and Communications	April 14
9.207	Develop an evidence-based model for prioritising audiences and activities, which focuses on alcohol-related harm, not just consumption	The pre-audit work on strategy in 2012 was based on consideration of harms and further work on moving to a 'harm' based prioritisation model is in development. This work builds upon a number of existing segmentations of alcohol-related harm, and will be reviewed by, the Medical Advisory Panel, the new Research and Programme Effectiveness (working title) Panel, and the board.	CEO, Director, Evidence and Impact	Spring 2014
9.207	Involve academics and experts more in strategic development and evaluation	The Medical Advisory Panel have been asked to take a strategic overview of our work and in addition, the creation of a 'Research and Programme Effectiveness Advisory Panel' (working title) has been approved by the board to provide specific expertise relating to behaviour change and social marketing.	Director, Marketing and Communications; Director, Evidence and Impact; Head of Digital	2014/15
9.207	Develop more marketing skills in house	We accept this recommendation and have revised job descriptions to attract candidate with marketing skills and capability as we recruit into open positions. We are reviewing training needs for 2014.	Director, Marketing and Communications	2014
9.207	Review its behaviour change model	We accept the need for more sophisticated understanding of behaviour change theory and practice and that a range of frameworks and models of change might inform our thinking and improve our impact. This will be one of the initial tasks of the Research and Programme Effectiveness Advisory Panel.	Director, Evidence and Impact	2014
9.207	Pilot more activities	We accept this recommendation and have completed three regional pilots in 2013, with a fourth planned in-market in 2013/14.	Director, Evidence and Impact	Completed

Audit ref.	1. Activity analysis (cont.)	Drinkaware Response	Responsibility	Timing
9.207	Set up a work stream to isolate the effects of Drinkaware's activities and calculate ROMI	We accept that robust evaluation of our activities is essential and that piloting approaches and comparing activities to control situations is a way to estimate our unique impact. We must stress however that isolating our impact from other factors is challenging and not always possible. The randomised control trial for Intuition, Drinkaware's in-schools education programme, will seek to isolate the effects of this programme and may provide a model for some future evaluation. Our local pilot of promoting drinking water in on-premise environments similarly provides an opportunity to test the impact of activities against a control group. Such tests however, can be expensive to implement and take time to collect and analyse.	Director, Marketing and Communications and Director, Evidence and Impact	2014/ 15
9.207	Consider reinstating its grant programme with a rigorous evaluation programme (to allow for co-creation with local partners)	The Drinkaware Grants Programme was suspended in March 2012 and our internal evaluation has led us to conclude that it should not be reinstated.	CEO and Board	N/A
9.207	Instigate a peer review process	We have concluded that the added value of peer review should be provided through the use of two independent Advisory Panels, which will be rigorous and cost-effective, and through ad-hoc peer review as required.	CEO and Board	N/A
9.207	Develop an evidence-based model for budget setting	We accept the recommendations of the audit that the allocation of our financial resources should be evidence-based and have taken this approach in the setting of 2014 budgets, with a greater focus on evidence to inform the 2015 – 2020 budgets.	Finance & General Purposes Committee / Head of Finance and Admin.	Q2 2014
9.207	Commission independent valuation and evaluation of in-kind support	We are reviewing how in-kind support is valued and evaluated and have taken steps to ensure much greater alignment of our requests for in-kind support against our goals and targets for 2014. We will determine in 2014 whether it is appropriate or necessary to commission an independent valuation of in-kind support.	Finance & General Purposes Committee / Head of Finance and Admin.	2014
9.207	Implement changes to WLGTGB in light of recent research findings	We accept the audit findings, based on our own data, that changes need to be made to the WLGTGB campaign if we are to achieve impact with some audiences. We have commissioned a strategic review of binge drinking which will report in 2014 and inform our future strategy and actions.	Director, Marketing /Communications and CEO	Spring 2014

Audit ref.	1. Activity analysis (cont.)	Drinkaware Response	Responsibility	Timing
9.207	Leverage (brand) awareness better through a clearer articulation of the change it is seeking	This will be addressed through a revised brand proposition to be developed in Q4 2013, and revised KPIs as part of the 2020 Strategy.	Director, Marketing and Communications and CEO	Spring 2014
9.207	Review its KPIs with the board of trustees	The board has agreed a revised set of KPIs for 2014 which will be subject to further review as we develop the 2015 - 2020 Strategy.	CEO and SMT	Nov-13
9.207	Review the "For The Facts" call to action	'For The Facts' will be reviewed as part of our brand review in Q4 2013.	Director, Marketing and Communications and CEO	Spring 2014
Audit ref.	2. Stakeholder relations	Drinkaware Response	Responsibility	Timing
10.61	Bring stakeholder engagement in house and resource appropriately to support a key account management approach for key stakeholders across industry (based on sectors) and public health (based on regions)	The board has agreed to bring strategic stakeholder engagement in house, with the appointment of a Director, Partnerships and Business Development and a small stakeholder management team. Key posts in this team will be appointed by January 2014. To keep overheads to a minimum, however, some stakeholder engagement (specifically the negotiation of in-kind support) will continue to be outsourced.	CEO	Jan-14
10.62	Establish a single central contact management database	We accept this recommendation and appointed a provider after competitive tender. A new CRM system is in development and staff training will take place in December 2013.	Head of Finance and Admin / Stakeholder Officer	Dec-13

Audit ref.	2. Stakeholder relations (cont.)	Drinkaware Response	Responsibility	Timing
10.63	Develop and execute a clear strategy for engaging with government, health NGOs and the public health communities at a national and grass roots level with KPIs	We are developing a new strategy for engaging with all stakeholders, including NGOs and public health but also including industry and potential commercial partners. Implementation of this strategy will be the first priority of the Director, Partnership and Business Development, when appointed.	Director, Partnerships and Business Development	Spring 2014
10.63	Think not 'what they can do for us' but rather 'what can we do for them'	We agree on the value of taking this approach and have developed a set of organisational values which will shape recruitment, performance management and evaluation going forward.	Chair and Board	Completed.
10.64	Develop and execute a strategy for industry which recognises the different levels of engagement by sector and increases the focus on marketing stakeholders whilst ensuring relationship with CSR stakeholders is maintained	We agree and are implementing a new strategy for engaging with industry stakeholders. We are also beginning to broaden stakeholder relationships to include senior marketing stakeholders, through our first consultation on defining the Drinkaware brand. We will continue marketing consultation and engagement through 2014.	Director, Partnerships and Business Development	Spring 2014
10.65	Complete a stakeholder mapping exercise to identify other stakeholders and develop appropriate and systematic engagement strategies	An initial stakeholder mapping exercise has been completed which is informing the stakeholder engagement strategy; further work on stakeholder mapping will be completed in Q1 2014 to be informed by an external Stakeholder Survey.	Stakeholder & Partnerships Manager	Q1 2014.
10.66	Develop a digital engagement strategy for recruiting and managing stakeholders who are not part of the key account management programme	Our stakeholder contact strategy will include a review of the role and impact of digital engagement and include targets for digital engagement.	Director, Partnerships and Business Development and Head of Digital	Spring 2014

Audit ref.	2. Stakeholder relations (cont.)	Drinkaware Response	Responsibility	Timing
10.67	Systematically gather research and information from stakeholders which can be used to inform strategies and plans	We do gather information and research from stakeholders to inform our strategies and plans, but accept that such research information is ad hoc. Whilst accepting the recommendation in principle, it must be acknowledged that some of the most useful research and information - consumer insights, advertising development and so on - is commercially sensitive and unlikely to be shared.	Director, Partnerships and Business Development and Head of Digital	Spring 2014
10.68	Involve stakeholders (industry and public health) in the development of the overarching marketing strategy, ensure it is peer reviewed by representatives from these groups and publish.	The 2014 stakeholder engagement strategy will include consultation with stakeholders on our overarching marketing strategy. This process has begun in November 2013 with consultation in progress at time of writing on the Drinkaware brand proposition (including logo use and consumer call-to-action).	Director, Marketing and Communications and Director, Partnerships and Business Development	Spring 2014
10.69	Share campaign plans with all stakeholders at least 12 months in advance	Whilst we accept the importance of sharing campaign plans in advance, it may be impractical to share all campaign plans with all stakeholders at least 12 months in advance. We are now planning further in advance than previously and engaging industry and other stakeholders in campaign development.	Director, Marketing and Communications / Director, Partnerships and Business Development	Ongoing
10.70	Involve stakeholders (industry and public health) in the development of campaigns and products for example via co-creation workshops	We now seek to involve stakeholders in the development of campaigns and products, as evidenced by the Parents Campaign and 'What's In Your Glass?' initiatives in 2013 and will continue this approach.	Director, Marketing and Communications / Director, Partnerships and Business Development	Ongoing

Audit ref.	2. Stakeholder relations (cont.)	Drinkaware Response	Responsibility	Timing
10.71	Maintain a programme of communication with stakeholders using a combination of annual conference, website and newsletters. Consider more regional activity. Ensure the communications clearly communicate at every opportunity the evidence base around and progress in the organisation meeting its objectives	We agree with this recommendation and are committed to maintaining the existing programme of communications with stakeholders, with a focus on communicating the evidence base and progress against our key performance indicators. The ability to undertake extensive regional activity is constrained by funding.	Senior Communications Officer / Stakeholder Officer	Ongoing
10.72	Commission a robust, independent stakeholder survey to track levels of awareness, understanding and perception amongst stakeholder groups	Whilst we accept the recommendation in principle, the costs of such a survey must be commensurate with the size of our organisation and budgets. We have reviewed options to this end and are exploring affordable alternatives to assessing stakeholder perceptions.	Stakeholder and Partnerships Manager / Research Officer	Spring 2014
10.73	Adopt a systematic measurable evidence gathering on stakeholder engagement activities such as conferences and bulletins.	We already measure stakeholder response to our conferences and bulletins through direct feedback and through a number of KPIs such as open rates and interactions with content.	Stakeholder Officer / Head of Digital	Completed.
Audit ref.	3. Governance and management	Drinkaware Response	Responsibility	Timing
11.114	Adopt a consistent and rigorous approach to recruitment of trustees ahead of any further appointments	Such an approach has been adopted for trustee recruitment in progress at time of writing, made possible by the changes in the rules on board composition.	Chair and Board	Ongoing

Audit ref.	3. Governance and management (cont.)	Drinkaware Response	Responsibility	Timing
11.115	Introduce, as planned, an induction process for new trustees as well as training for all trustees on their role	An upgraded induction process is planned for new trustees	Chair and Board	Feb-14
11.116	Introduce 'light touch' appraisals for trustees both individually and as a group	Included in governance rules agreed by the board in 2013	Chair and Board	Ongoing
11.117	Consider additional skills that would be beneficial in future recruitment of trustees	A skills audit has been completed by the board and has informed the recruitment of new trustees in 2013.	Chair and Board	Completed
11.118	In recruitment of future trustees consider length of appointment to avoid en masse retirement on expiry of initial term at a later date	Flexibility to extend from six to seven years has been agreed. Combined with staggered appointment dates and a combination of single and two-term appointments, we believe these actions will avoid en masse retirements of trustees in future.	Chair and Board	Completed
11.119	Discuss and restate Drinkaware's vision, purpose and aims to provide a template for planning and extent of board discussions	As 9.207 above, the board has revised and restated the mission and vision for Drinkaware which is published on our website.	Chair and Board	Completed
11.120	Place a discussion of risks on forward board agendas and discuss at least once a year	A review of the risk register is already on the Forward Agenda for the Finance and General Purposes Committee and the board. SMT review the risk register on a quarterly basis.	Chair and CEO	Completed
11.121	Ensure that the issue of corporate reputation is more fully debated at the board and reflected in the risk register	The issue of reputational risk is already included on the risk register and forward agenda for the board and has featured regularly in board discussions.	Chair and CEO	Ongoing

Audit ref.	3. Governance and management (cont.)	Drinkaware Response	Responsibility	Timing
11.122	Discuss with the Medical Advisory Panel the need to widen membership to strengthen its input to the board at a strategic level	The Medical Advisory Panel (MAP) is considering widening membership at time of writing, and the attendance at board meetings of the Chief Medical Adviser as an observer, allows the MAP to provide a strategic input to the board.	Chief Medical Adviser	2014
11.123	Consider formalising the role of a Marketing Advisory Group to cover all aspects of Marketing	This has been agreed by the board and will be implemented in 2014	CEO/ Director, Marketing and Communications/ Director, Evidence and Impact	2014
11.124	Look to Marketing and Medical panels providing regular updates to the board with at minimum a joint annual discussion.	The Chief Medical Adviser presents an annual report to the board and attends board meetings in an observer capacity. A similar approach will be adopted for the Research and Programme Effectiveness Advisory Panel when established.	Chair and Director, Evidence and Impact	2014
11.125	Consider additional advisory panels to supplement board understanding of issues and provide independent view into board discussions	The board have agreed to create an additional advisory panel, the Research and Programme Effectiveness Advisory Panel (working title) to supplement our understanding of issues and to provide an additional, independent view into board discussions.	Director, Evidence and Impact	2014
11.126	Request that DH engage with the board at a more senior level on a regular basis	Whilst we have supportive relationships with DH and the Home Office, we agree that senior level participation with the board is important and will request that this be offered.	Chair and CEO	2014
11.127	Consider how to forge links with Public Health England and consider if this organisation should be either a representative or observer at the board meetings	We are seeking to develop greater links with PHE however we do not agree that PHE should be a formal representative or observer at board meetings at this time, given the observer status of DH.	Chair and CEO	Ongoing

Audit ref.	3. Governance and management (cont.)	Drinkaware Response	Responsibility	Timing
11.129	Consider the move to a 3x3x6 board structure (3 health, 3 industry, 6 lay, 1 independent chair) and the potential setting up of a 'blind trust' to raise funding	A revised governance structure has been agreed by the board, following consideration of a number of options including that of a 'blind trust'. The new governance structure removes previous 'quotas' from all parties and establishes a governance structured based up on the skills and experience necessary to deliver the future strategy of the Trust.	Chair and Board	Completed
11.130	Conduct a skills audit for the board of trustees to ensure appropriate experience and capability is represented at board level	Completed	Chair and Board	Completed
11.131	Adopt a new Memorandum of Understanding or other formalised agreement to address some of the challenges discussed throughout this report	A revised MoU will be executed on completion of the new strategic plan and new funding arrangements for 2015 - 2020.	Chair and Board	Completed
11.132	Conduct a full skills and capability audit to ensure the organisation has the right skills going forwards	The CEO has completed a skills audit and a revised organisational structure has been approved by the board.	CEO	Completed
11.133	Bring stakeholder engagement in-house and increase resource in this area	We have agreed to bring stakeholder engagement in-house and recruitment is in progress.	CEO	Dec-13
11.134	Review approach to using secondees in role as Finance Manager	We have reviewed the arrangement of secondments into the Head of Finance and Administration role and concluded that this arrangement (a) does not permit the seconding organisation to exercise any undue influence over Drinkaware's activities and (b) allows Drinkaware to attract highly skilled individuals into the organisation. We are continuing this arrangement in 2013 / 14.	CEO	Completed

Audit ref.	3. Governance and management (cont.)	Drinkaware Response	Responsibility	Timing
11.135	Engage management and staff in discussions about future planning and priorities of Drinkaware's activity in a timely manner	Planning for 2013 and 2014 has been inclusive and collaborative with staff, and planning for 2014, whilst not yet as far in advance as liked, has been completed earlier than in previous years.	CEO / Head of Finance and Admin.	Adopted

Audit ref.	4. Funding	Drinkaware Response	Responsibility	Timing
12.28	Development of an evidence based model to demonstrate that funding at current levels can be justified	We agree with the recommendation to create an evidence-based model to help justify current and future funding. It is likely however that evidence will only be able to provide pointers to the right level of funding	CEO/ Head of Finance and Admin / Director, Evidence and Impact	Q2 2014
12.28	Ensuring current levels of funding be retained after expiration of the current agreement at the end of 2013	Most funders (accounting for 90% of 2013 funding at time of writing) have agreed to a one year extension of the current funding formula in 2014, whilst the 2015-2020 funding model is in development.	CEO / Stakeholder Manager	Completed
12.28	Exploration of whether more funding could be obtained from industry, either more from existing funders, and /or more from additional industry funders	We agree with the recommendation and the board has agreed to seek funding additional industry funding.	CEO / Stakeholder Manager	Q2 2014
12.28	Exploration of alternative sources of funding	The board has agreed to seek alternative sources of funding. We will commission an analysis of potential non-industry funding sources in 2014.	CEO / Stakeholder Manager	2014
12.28	Ensuring future funding be inflation-proofed and put on a sustainable footing	We agree with the recommendation and have established a senior level Industry Leadership Group to support the commitment of industry to a revised 2015 -2020 funding model.	CEO / Head of Finance and Admin.	Feb-14