

Brainwave - The Irish Epilepsy Association  
T/A Epilepsy Ireland

Reports and Financial Statements  
for the financial year ended  
31 December 2025

**BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**REPORTS AND FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

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**BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**DIRECTORS AND COMPANY INFORMATION**

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**DIRECTORS**

Mr M. Mc Loughlin (Chairperson)  
Mr A. Chalke  
Mr M. Curran  
Mr P. Fahey  
Mr J. Gildea  
Mr P. Kehoe  
Prof M. King  
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Ms C. Neary  
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**AUDITORS**

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**BANKERS**

Allied Irish Banks plc  
Bank of Ireland  
Permanent TSB

**SOLICITORS**

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Dublin 2

**CHARITY NUMBER**

CRA (Charities Regulator): 20010553  
CHY (Revenue): 6170

**COMPANY REGISTRATION NUMBER**

77588

**DIRECTORS' REPORT**

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The directors present their annual report and the audited financial statements of Brainwave - The Irish Epilepsy Association CLG, trading as Epilepsy Ireland for the financial year ended 31 December 2025. The company is a registered charity and hence the report and results are presented in a form which complies both with the requirements of the Companies Act 2014, and also with the Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standards applicable in the UK and Republic of Ireland (FRS102) – (Charities SORP (FRS102)).

**OBJECTIVES AND ACTIVITIES**

Established in 1966, Brainwave - the Irish Epilepsy Association CLG, trading as Epilepsy Ireland, is the national organisation dedicated to supporting and representing people with epilepsy in Ireland, along with their families and carers.

About Epilepsy

Epilepsy refers to a group of neurological disorders characterised by a tendency to experience recurrent, unprovoked seizures involving abnormal, excessive electrical activity in the brain.

Globally, epilepsy affects an estimated 50 million people. In Ireland, over 45,000 people live with epilepsy and each year, up to an estimated 2,500 people are newly diagnosed. The condition can begin at any stage of life and is more prevalent in children, adolescents, older adults, and people with an intellectual disability.

In around half of all cases, no identifiable cause of epilepsy can be found. In others, causes include genetic factors, brain injury, stroke, birth-related injury, structural abnormalities, or brain infections. While some epilepsies are linked to single gene variants, most result from complex interactions between multiple genes and environmental factors.

Epilepsy is often a treatable condition. Up to 70% of people may achieve sustained seizure control with appropriate therapy, which can include anti-seizure medications, surgery, vagus nerve stimulation, or dietary therapies such as the ketogenic diet. However, an estimated 10,000–15,000 people in Ireland continue to live with uncontrolled seizures. For these individuals, epilepsy can be a significant and often hidden disability, affecting education, employment, driving, relationships, independent living, and psychological well-being. Many also contend with medication side-effects, public stigma, and the broader social and economic impact on families and carers.

Epilepsy places a substantial burden on health services in Ireland. It accounts for approximately 6,000 acute hospital admissions each year, mainly through emergency departments. The overall economic cost of epilepsy in Ireland is substantial. Including direct health care costs such as hospital stays, medications, diagnostics, and indirect costs related to lost productivity and informal care we estimate the cost is approximately €584 million per year, or nearly €15,000 per person with epilepsy.

People with epilepsy have a higher risk of premature mortality than the general population. In Ireland, there are an estimated 130 epilepsy-related deaths each year, including deaths due to underlying causes of seizures, accidents, prolonged seizures, and SUDEP (Sudden Unexpected Death in Epilepsy).

The role and strategy of Epilepsy Ireland

Epilepsy Ireland's vision is to achieve a society where no person's life is limited by epilepsy. In pursuing this vision, our mission is to empower all those affected by epilepsy to achieve their full

**DIRECTORS' REPORT**

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potential by providing high-quality community-based support and education, raising public awareness, conducting effective advocacy and supporting research.

For almost 60 years, the organisation has remained focused on reducing the burden of epilepsy for individuals and their families. This long-standing commitment continues to shape both our strategic direction and day-to-day activities.

Our current Strategic Plan (2022–2026) provides the overarching framework for this work. It outlines six key strategic aims which, together with our vision, mission and values, guide all organisational activity over the lifetime of the plan. A summary of these six strategic aims is set out below, as originally defined in 2022 and subsequently refined as part of the mid-term review conducted in 2024.

*Empowering people with epilepsy through support and education.*

We will continue to provide information, advice and support to people living with epilepsy, their families and carers. We will work to empower people in the self-management of their condition through one-to-one and group-based work, while also further developing our online service delivery. We will work to reduce or remove potential barriers for people with epilepsy in education and employment by working with and upskilling schools and employers. We will develop information resources appropriate to the needs of those living with epilepsy and professionals. We will seek to identify gaps in service delivery, including for those with specific or complex needs and work to develop supports to meet identified needs. We will also expand the provision of epilepsy aids & appliances and put new links and referral pathways in place with the medical community.

*Centring people with epilepsy and their families in the work of Epilepsy Ireland.*

Recognising that the success of the organisation is dependent on an active and engaged base of members and volunteers, we will increase the number of volunteers engaged with the organisation and harness the expertise of those living with epilepsy to support the delivery of work across the organisation. We will increase opportunities for people with lived experience to contribute to our work and we will develop mechanisms to consult with and seek feedback from our membership about our services and wider activities. We will also review our membership model; assess if and how greater value can be added and ultimately increase our membership base.

*Working collaboratively to improve the care of people with epilepsy and knowledge of the condition.*

We will work with relevant stakeholders to improve access to care and promote a greater focus on community-based care. We will work with the medical community to provide epilepsy training opportunities for health professionals and continue to deliver and grow our own training programmes. We will develop a research strategy to guide our investments in epilepsy research, expand our ability to collaborate as research partners and promote the increased involvement of people with epilepsy in epilepsy research. Finally, we will work with the medical community to promote improved knowledge and understanding of SUDEP and advance strategies to reduce the risk and incidence of epilepsy deaths.

*Transforming perceptions of epilepsy and public policy relevant to the condition*

Improving public understanding, knowledge and visibility of epilepsy remains a key priority. We will continue to use targeted awareness campaigns such as International Epilepsy Day, Brain Awareness Week and others to reduce stigma and discrimination and improve public awareness of and attitudes to epilepsy. We will design and implement advocacy campaigns on issues that reflect the needs of people with epilepsy to create positive change. We will also expand our social media reach and engagement, raise the profile of the organisation and ensure that all public communications are centred on a diverse range of personal experiences of epilepsy.

**DIRECTORS' REPORT**

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*Increasing and diversifying our income*

Implementing our strategic objectives requires successful income generation strategies. We will increase and diversify our fundraising streams including through corporate partnerships, regular and digital giving, and by embracing new techniques and technologies. We will review and where possible grow existing fundraising activities and aim to develop Purple Day® into a flagship annual fundraising event. We will also expand earned income activities e.g. our training services, and work with state funders, particularly the HSE, to secure increases in grant funding for the delivery and enhancement of our services.

*Demonstrating the highest standards of governance and ensure the structures are in place to meet objectives.*

Demonstrating the highest standards of governance, financial management and quality is vital to preserving our reputation and the confidence of our service users, members, funders, donors and other stakeholders. We will maintain compliance with the Charities Governance Code and preserve our Triple Lock Standard, as well as maintaining our quality assurance framework. We will ensure we are governed by a diverse, skilled Board and we will work to secure funding for additional staff posts needed to deliver on our strategic objectives. We will invest in the technology needed to effectively and efficiently deliver on our goals in service delivery, training, communications, fundraising and administration.

These strategic aims are underpinned by 13 key objectives, which inform our annual operational plans, budgeting processes, and performance monitoring. They also provide the structure for this Directors' Report.

The Strategic Plan outlines an ambitious and comprehensive roadmap for the continued development of our organisation, services, and activities. It is designed to respond to increasing demand for support services and the evolving needs of the epilepsy community, with a focus on delivering meaningful and positive outcomes for those we serve.

2025 represented the fourth year of implementation of this Plan. Further detail on progress during the year, including key activities, challenges, and achievements across the six strategic aims and 13 objectives, is set out in the Achievements & Performance section that follows.

## **ACHIEVEMENTS & PERFORMANCE**

### **Support and Education**

#### ***Strategic Aim 1:***

#### ***Empower people with epilepsy through support and education***

##### 1.1 Provide the highest quality support and education services.

The provision of support and education services to people with epilepsy, and to their families and carers, remains central to the work of Epilepsy Ireland. Access to accurate information and appropriate education is critical in addressing the fear, stigma and misunderstanding often associated with the condition.

Our services are designed to support individuals at all stages of their epilepsy journey, while also engaging healthcare professionals, educators, employers and the wider public. Our service offering includes one-to-one support, structured education programmes, self-management initiatives (delivered both individually and in groups), outreach services in community and hospital settings, support groups, seminars and workshops, publications and resources, and personal advocacy.

**DIRECTORS' REPORT**

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These services are delivered by a nationwide team of 12 part-time Community Resource Officers (CROs), supported by a Youth Resource Officer and National Information Officer, operating from our head office in Dublin and regional offices in Cork, Clare, Galway, Kerry, Kilkenny, Meath and Offaly.

Demand for services remained strong in 2025, with 21,884 contacts recorded (2024: 20,000). This included 10,840 individual engagements via phone, email, online platforms and in-person meetings (2024: 9,757), and 11,044 participants in group-based supports and training (2024: 10,243).

During the year, additional capacity was introduced within the CRO team through increased part-time hours and the creation of a new post serving the Dublin/East region, where demand is highest. These developments met an important strategic goal and were enabled by an improved financial position and the support of Peter Mark and Ulster Bank, whose funding will sustain these enhancements for up to three years. The full impact of this expansion is expected to be realised from 2026 onwards.

The *Living Well with Epilepsy* programme continues to be a key element of our service delivery. Aimed at adults and parents following a recent diagnosis, the programme equips participants with the knowledge and skills required for effective self-management. Participation increased to 389 individuals in 2025 (2024: 283).

Group-based supports remain an important component of our work, providing opportunities for peer connection in a structured and supportive environment. A total of 48 group sessions were delivered during the year (2024: 68), alongside ongoing supports through our Young Epilepsy Programme (see section 1.2).

Our National Conference took place in September, following the Irish Epilepsy League Expert Day for healthcare professionals. This joint approach continues to support high-quality national and international contributions, with 150 attendees at the 2025 event. Contributors included Prof Jacqueline French (*How do we select new drugs for people with epilepsy?*); Dr. Edmund Gilbert (*The Microbiome as a trigger for autoimmune epilepsy*); Dr Cormac Sheehan (*Is it time for Epilepsy to be added to the Chronic Disease Management Programme?*); Dr Yvonne Langan (*Epilepsy Mortality in Ireland*); Dr. Michael McKillop (*Seizing Control: Winning with Epilepsy*); and Professor Donncha O'Brien (*The Brain Doctor*). Planning is underway to host the conference outside Dublin in 2026, for the first time since 2019.

A range of additional educational and wellbeing initiatives were delivered throughout the year, including events on memory and study skills, and preconception planning for women with epilepsy. In total, 50 mindfulness sessions and 13 wellbeing-focused initiatives were delivered, with over 800 attendees.

Joint Epilepsy Education Sessions for adults and parents of newly diagnosed children continued to be delivered in partnership with HSE professionals. These sessions, facilitated by CROs and Advanced Nurse Practitioners, cover key topics including treatment, seizure management and available supports. Six adult sessions and four parent sessions were delivered in 2025, consistent with 2024.

Our resources for professionals include publications such as *Epilepsy in the Workplace* and the *Education Information Pack – An Epilepsy Resource for Pre-schools, Schools, and Colleges*. With the support of UCB Pharma, the *Education Information Pack* was redistributed to over 4,000 schools in 2025. In addition, 125 tailored awareness sessions were delivered to education settings, reaching 4,062 professionals.

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October 2025 marked the conclusion of a long-standing collaboration under which Epilepsy Ireland funded an Advanced Nurse Practitioner (ANP) post based in Beaumont Hospital. In addition to providing clinical care, the role contributed to Epilepsy Ireland's services through joint education initiatives, professional support, and input into resource development. A total of 762 individual contacts were recorded through this service in 2025 (2024: 1,127).

Since its establishment in 2002, the role was held by Sinéad Murphy, who progressed from Epilepsy Nurse Specialist to Registered Advanced Nurse Practitioner, with a particular focus on women with epilepsy. Over more than two decades, this role addressed a significant gap in specialist care, particularly in relation to preconception counselling and pregnancy-related epilepsy management. In recent years, the service extended beyond Beaumont Hospital to maternity settings including Holles Street, the Rotunda, the Coombe and Our Lady of Lourdes Hospital, Drogheda.

The impact of this work contributed to the recognition of the need for a more structured national approach to the care of women with epilepsy. This is now reflected in the implementation of the HSE's Maternity Model of Care for Women with Epilepsy, which includes the development of specialist nursing roles within all Irish maternity services. With these roles now integrated into HSE services, the original gap addressed by the EI-funded post is now being filled by the State.

We would like to thank Sinéad, who has recently taken up a new ANP position at St. Vincent's University Hospital, for her dedicated work and service over the past two decades. Her work has had a lasting and significant impact on the development of epilepsy care, particularly for women, and has been of immense value to both Epilepsy Ireland and the wider epilepsy community.

1.2 Identify and fill gaps in epilepsy service needs.

The Young Epilepsy Programme (YEP), coordinated by the Youth Resource Officer (YRO), delivers targeted supports for young people with epilepsy aged 8 to 24. 2025 represented the first full year of programme delivery following its introduction in 2024, supported by Angelini Pharma.

The YEP comprises a number of age-appropriate initiatives designed to provide peer support and encourage engagement:

- *Get ChARTy* (ages 8–12) offers online creative sessions, facilitated by a Creative Art Therapist, providing younger children with an opportunity to connect in an informal and supportive setting.
- *Teen Time* (ages 13–17) provides a structured online space for teenagers to share experiences and challenges with peers.
- *Young Adult Meetups* (ages 18–24) focus on issues associated with early adulthood, including education, employment and independence, and their interaction with epilepsy.

Participants are supported to transition through the programme as they age, fostering continuity of engagement and peer connection. The programme promotes self-management, builds confidence, and encourages openness about epilepsy, contributing to improved wellbeing and reduced stigma over time. At its core, the programme encourages young people to recognise that while epilepsy is a part of their life, it does not have to define it.

Support for siblings of children with epilepsy (aged 8–12) also forms part of the programme. These sessions provide an opportunity to engage in interactive activities while discussing any concerns, helping to reduce anxiety and feelings of isolation, while helping participants better understand their sibling's condition.

Supporting teens transitioning from paediatric to adult epilepsy services is another established unmet need, and in 2025, four group sessions were organised in partnership with HSE to support

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this transition. Further opportunities to improve transition services were also being actively explored at year end.

In 2025, a total of 42 YEP sessions were delivered, with 354 attendances. The YRO also responded to 224 individual contacts during the year.

A key event within the programme was the annual Family Fun Day, held at Dublin Zoo in July, which provided an opportunity for children, young people and families to meet in person in an informal setting. Attendance at the event was 147 (2024: 156). Additional in-person engagement was facilitated through a dedicated Teen Time event at Head Office during the October mid-term break which saw the teens come together for a fun and vibrant day in our Head Office, including engaging with EI staff in a variety of roles across the organisation.

During 2025, the organisation also expanded a pilot initiative aimed at addressing the barriers associated with accessing seizure detection devices. For many living with epilepsy and their families, the alarms can be unattainable due to the costs involved. Now formally established as the *Louise Young Seizure Alarm Fund*, the programme honours the memory of Louise Young, a committed volunteer and supporter of Epilepsy Ireland who died from SUDEP in 2021.

The scheme, initially introduced in 2024 on a limited basis, was extended in September 2025 to include both adult and paediatric patients across all hospital sites with epilepsy services. Access is provided through referral by a neurologist or epilepsy specialist nurse, with reimbursement funded through funds raised by the Young family and Louise's friends and colleagues.

Two device types are currently supported under the scheme: the *Epimonitor*, a wrist-worn device for individuals aged six years and over, and the *Nightwatch+*, a sensor-based device used primarily during sleep to detect tonic-clonic, tonic (clustered/ prolonged), hyperkinetic, and clustered myoclonic seizures. Both devices are designed to alert caregivers in the event of a seizure.

By year-end, 43 referrals had been received, with over €20,000 provided in reimbursements.

**Membership and Engagement**

***Strategic Aim 2:***

***Centre people with epilepsy and their families in the work of Epilepsy Ireland***

**2.1 Develop a new volunteering and engagement approach that is centred on lived experience.**

Ensuring that the lived experience of people with epilepsy and their families informs all aspects of our work remains a key strategic priority. This approach supports the Board, management and staff in maintaining a clear focus on the needs of the epilepsy community and in shaping services and activities accordingly.

Epilepsy Ireland is a member-led organisation, and it is important that we provide everyone in the epilepsy community with the opportunity to join and to shape and be part of our work. In recent years, a drop in membership numbers prompted a comprehensive review of our membership model, which was completed in 2025. As part of this process, we engaged with members, volunteers, service users, and peer organisations to better understand expectations and identify opportunities for improvement.

Following this review, a new, simplified membership structure was agreed. This introduces a single annual membership fee of €10 and was formally launched in January 2026. It is anticipated that this more accessible approach will encourage greater participation from across the epilepsy community.

**DIRECTORS' REPORT**

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The Service User Consultation Group continued to play an important role in ensuring that lived experience informs organisational decision-making. The group, established in 2023 and comprising 11 individuals with experience of our services and activities, met twice during 2025. In addition to contributing to the membership review, group members provided input on research priorities, website development, and International Epilepsy Day plans. We extend our sincere thanks to the group for their ongoing engagement and valuable insights.

The annual Service User Satisfaction Survey was also conducted in late 2025, providing an opportunity for service users and volunteers to share feedback on all areas of our work, including support services, education and training, awareness campaigns, and research-related activities.

A total of 162 responses were received (2024: 106). Feedback remained consistently positive, with 98% of respondents indicating that they would recommend Epilepsy Ireland to others with similar needs, and 96% rating their experience as either very positive or positive. These findings are in line with previous years and provide important validation of our approach. The survey will be repeated in late 2026.

*Volunteering*

While service delivery is undertaken by paid staff, volunteers continue to play a vital role in supporting the organisation's work. This includes contributing to awareness-raising initiatives, participating in advocacy activities, sharing lived experiences, and supporting research.

Volunteer-led fundraising remains particularly significant, with individuals and communities organising events, participating in campaigns, and representing Epilepsy Ireland in a wide range of challenges and initiatives. We are grateful for the continued support of hundreds of our fundraising volunteers each year (see section 5.1).

The *Volunteer of the Year Award* recognises individuals or groups who have made an outstanding contribution to the organisation. It also highlights the important role volunteers play in advancing our mission.

In 2025, two awards were presented - to Melissa Ryan and Rebecca Reid, along with their families, in recognition of their exceptional commitment. Tipperary woman Melissa, who was diagnosed with epilepsy at the age of 10, has been actively involved in supporting Epilepsy Ireland over many years, including through fundraising and awareness initiatives. Notably, she and her family shared their experience publicly as part of International Epilepsy Day 2023.

Longford teenager Rebecca, who was diagnosed at the age of five and lives with a severe form of epilepsy, has demonstrated remarkable resilience and commitment to raising awareness. Alongside her sister Emma, she has contributed to educational initiatives and led on several fundraisers in support of Epilepsy Ireland, involving her entire local community.

We were honoured to recognise Melissa, Rebecca, and their families at our 2025 National Conference and thank them for their significant contributions to Epilepsy Ireland and the wider epilepsy community.

### **Collaboration, Care and Knowledge**

#### ***Strategic Aim 3:***

***Work collaboratively to improve the care of people with epilepsy and knowledge of the condition.***

Epilepsy Ireland engages with a broad range of stakeholders, including statutory bodies, healthcare and education professionals, and the medical and scientific community to support improvements in epilepsy care and to increase understanding of the condition. The following outlines key developments during 2025 across the four objectives associated with this Strategic Aim.

#### **3.1 Advance a community-based, patient-centred and collaborative epilepsy model of care in conjunction with HSE and other stakeholders**

Epilepsy Ireland continues to play an active role in supporting the development of epilepsy services nationally, building on a long history of collaboration with the HSE and other partners to strengthen service provision.

This objective aligns closely with the HSE's *Sláintecare* strategy, which emphasises integrated, person-centred care delivered as close to home as possible. Within this context, our community-based supports form an important part of the overall care pathway for people with epilepsy.

Joint Epilepsy Education Sessions, referenced in Section 1.1, remain a key example of this collaborative approach. Originally supported through the *Sláintecare* Integration Fund, these sessions continue to be delivered in partnership with HSE services. Co-facilitated by epilepsy specialist nurses and Epilepsy Ireland CROs, they provide early-stage education and support to adults and parents following diagnosis. A total of 10 sessions were delivered in 2025 (2024: 10).

Building on this model, additional collaborative initiatives were introduced during the year. These included targeted information sessions focused on the transition from paediatric to adult epilepsy services. This transition can present challenges for both young people and their families, particularly as independence and responsibility for self-management increases. Delivered by the Youth Resource Officer and an Advanced Nurse Practitioner, four sessions were held in 2025, addressing key topics such as preparing for attending adult services, managing seizure triggers and lifestyle factors, and navigating changes in care. These sessions will continue in 2026.

Following the mid-point review of the Strategic Plan in 2024, efforts under this objective have been prioritised in two areas: strengthening the role of primary care in epilepsy management, and advocating for the inclusion of epilepsy in the HSE's Chronic Disease Management Programme (CDMP).

In support of these priorities, a collaborative event was held in May 2025 with the Department of General Practice at University College Cork. The symposium, titled *Epilepsy – Who Cares?*, brought together clinicians, researchers, policymakers and people with lived experience to examine the case for inclusion of epilepsy in the CDMP. Speakers included Dr Ged O'Connor, Sinead Murphy ANP, Sandra Moloney ANP, Dr Sharon McDonald, Dr Cormac Sheehan, Eoghan Kenny TD and Niamh Jones, Epilepsy Ireland CRO. Chaired by Professor Henry Smithson, contributions highlighted current care pathways, gaps in service provision, and the potential benefits of a more structured approach within primary care. There was clear support among attendees for the inclusion of epilepsy within the programme, given the potential benefits for patients and HCPs alike. This was the latest in a series of collaborations with UCC, having published a special GP checklist in 2024 to aid discussions around epilepsy in a primary care setting.

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Advocacy efforts in this area continued throughout the year, including the preparation of Parliamentary Questions to better understand the scope, costs and implementation of the CDMP. Responses to date have not ruled out the future inclusion of epilepsy, and this will remain a focus of activity in 2026.

While funding for the Registered Advanced Nurse Practitioner post concluded in late 2025 (see Section 1.1), strong working relationships with epilepsy specialist services have been maintained. Collaborative engagement with clinicians has also been supported through initiatives such as the expansion of the *Louise Young Seizure Alarm Fund* (see Section 1.2), which has facilitated ongoing interaction with specialist services. In addition, we continued to engage with the National Epilepsy Clinical Care Programme, the PREVENT Programme, and a range of professional networks.

Other collaborative activities during 2025 included:

- Ongoing work with a variety of stakeholders on the health information and education needs of women with epilepsy, concluding in November 2025 (see Section 3.3).
- Presentations at the Irish Epilepsy League Annual Expert Day and participation in the Epilepsy Journal Club, including input on the *Seizure Alarm Fund*.
- Collaboration with international organisations such as SUDEP Action, the Infantile Spasms Awareness Network and the International Bureau for Epilepsy, alongside national partners including the Disability Federation of Ireland and the Neurological Alliance of Ireland.
- Partnered on the *My Moving Brain* initiative led by FutureNeuro and participated in regional events in Kildare, Cork and Galway. See also section 3.3 below.
- Participation in events hosted by organisations including Dravet Syndrome Ireland and TSC Ireland.
- Ongoing communication with healthcare professionals through regular e-newsletter updates.
- Joint work with research institutions including RCSI (FutureNeuro) and Dublin City University (see Section 3.4).
- Continued involvement in the HPRA Patient Forum and the Department of Health Valproate Stakeholder Group.
- Attendance at the International Epilepsy Congress in Lisbon, supporting engagement with international partners.

**3.2 Provide relevant and appropriate training and education services for professionals and others involved in the care and welfare of PWE.**

Since 2009, Epilepsy Ireland has delivered a structured training programme in *Epilepsy Awareness and the Administration of Buccal Midazolam (BM)* for a wide range of professionals. Participants include healthcare and allied health staff, educators such as teachers and SNAs, bus escorts, employers and colleagues of people with epilepsy, community workers, and those involved in extracurricular and support services.

Buccal Midazolam is an emergency rescue medication administered in community settings to stop a seizure once it has begun. Its timely and appropriate use is critical in preventing seizure escalation, reducing hospital admissions, and limiting disruption to daily life. The training programme provides participants with a clear understanding of epilepsy, the role of rescue medication, and the correct procedures for administering BM.

Training is delivered by Epilepsy Ireland's training team and Community Resource Officers, in accordance with the guidelines of the Joint Epilepsy Council of the UK and Ireland and the Epilepsy Specialist Nurses Association (ESNA) 2019 guidance. All trainers complete accredited "train the trainer" instruction and undertake refresher training on a biannual basis through Quarriers, the Scottish Epilepsy Centre.

## **DIRECTORS' REPORT**

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Participants receive certification valid for two years upon completion. Training is offered through both live online and in-person formats, with tailored in-house sessions also available.

This programme continues to represent a core element of our service delivery. In 2025, 2,861 professionals participated across 199 sessions (2024: 3,114 professionals; 215 sessions).

During the year, we engaged with ESNA on the ongoing review of their guidelines on training professional carers. An updated version of the guidelines was in preparation at year end. Epilepsy Ireland trainers were also upskilled to facilitate additional training on vagal nerve stimulation, and on the administration of rectal diazepam and rectal paraldehyde.

In addition to formal training, our CRO team delivered Buccal Midazolam information sessions for parents and family carers nationwide. These sessions are designed to support safe and effective administration of the medication in home settings. A total of 59 sessions were delivered to 227 parents and carers in 2025 (2024: 52 sessions; 209 attendees).

Epilepsy awareness sessions were also provided across schools, community organisations and workplaces, delivered both online and in-person. In total, 193 sessions were held, reaching 5,539 participants (2024: 130 sessions; 2,896 attendees).

Tailored training and awareness sessions were delivered to a number of organisations during the year, including Google, Government Departments, the National Rehabilitation Hospital, and several third-level institutions.

### 3.3 Commission, fund and collaborate with research partners to increase knowledge about Epilepsy, its causes, effects and management.

Since establishing our research funding scheme in 2009, Epilepsy Ireland has invested over €1.5 million in epilepsy research, supporting 25 projects across basic science, clinical, psychosocial, genetic and health services research. This level of investment reflects a significant commitment for an organisation of our size and is made possible through the continued support of our donors and fundraisers.

Most funding is delivered through co-funding arrangements with national agencies, primarily the Health Research Board (HRB) and The Irish Research Council (now Research Ireland).

In 2025, we launched our 9th funding call under the HRB - Health Research Charities Ireland (HRCI) Joint Funding Scheme (JFS). Under this scheme, successful applications are funded 50% by the HRB and 50% by participating charities, including Epilepsy Ireland.

Prior to launching the call, we consulted with our members and service-users to identify priority research themes, drawing on previous priority-setting work led by the UK's Epilepsy Research Institute in 2022. The top priorities from ERI's top 10 identified in Ireland were:

- The impact of epilepsy, seizures and anti-seizure medications on brain health;
- The causes and prevention of epilepsy-related deaths, including SUDEP;
- The impact of hormonal changes across the lifespan for women with epilepsy.

Applications on these themes were particularly welcomed in our 2025 call, which invited proposals of up to three years' duration. The funding limit was increased from €50,000 per annum to €80,000 per annum for this call. A total of 13 applications were received and assessed by our independent Research Review Committee, chaired by Professor Gus Baker. Six projects were shortlisted for full applications. At year end, full applications had been received from all six and were about to undergo international peer review. The outcome of the call will be known in mid-2026.

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In parallel, we continued our collaboration with Research Ireland through participation in the Enterprise Partnership Scheme (EPS), which supports postgraduate and postdoctoral research. Following the 2025 round of the scheme, two new projects supported by Epilepsy Ireland were successfully funded.

The *EpiBreak Project* at the Dublin City University School of Chemical Sciences aims to improve the delivery of emergency seizure medication through the development of intranasal nano-carrier systems, enabling faster and more targeted emergency treatment with potentially fewer side effects.

A University College Cork study called *Seizure Prediction Using Open Access EEG Data* will explore whether measurable changes in brain activity can be identified prior to seizure onset, with the aim of informing the development of future early-warning systems (e.g. wearable devices) to tackle the unpredictability of seizures and the risks that their unexpected nature entail.

Each project will receive €45,200 from Epilepsy Ireland over four years, approximately one-third of the overall cost of the studies, with the balance funded by Research Ireland. Both projects incorporate significant Public and Patient Involvement (PPI) elements to ensure alignment with the needs of people living with epilepsy and their families. We thank our supporters whose contributions make these investments possible.

2025 also marked the completion of the HRB-funded EpiKNOW project, led by Dr Aisling Walsh and Dr Jade Parnell from RCSI, which focused on identifying health information needs and improving health information for women with epilepsy from preconception to postpartum. Epilepsy Ireland were partners on this important project, alongside the National Women & Infants Health Programme, and contributed €15,000 in funding between 2023 and 2025.

Research findings highlighted significant variability in the quality of online information available to women with epilepsy. Of 240 resources identified, 43 met inclusion criteria and these were assessed using recognised evaluation tools. The study rated overall quality as "fair". Notably, 28% of resources were deemed poor, while only 40% were rated good or excellent. Content was heavily focused on pregnancy, with limited information addressing the postpartum period.

These findings highlight the importance of accessible, reliable information for women with epilepsy and the professionals supporting them across all stages of reproductive health. They also underscore the role of trusted organisations in providing evidence-based guidance, with the Epilepsy Ireland website ranked as the leading English-language resource in this area.

In response, the project developed a suite of evidence-based resources to support women and healthcare professionals. These materials, now available on our website, are designed to guide discussions with primary care teams, epilepsy specialist teams, and maternity care teams on key topics including medication, contraception, pregnancy planning and seizure safety. The resources were launched at an event in RCSI in November 2025.

We congratulate the full EpiKNOW research team on the successful completion of the study, and we thank all the women with epilepsy who contributed their time and experiences to support the work. This project highlights the importance of supporting impactful, practical research that delivers tangible benefits for people living with epilepsy and those involved in their care.

Throughout 2025, we also supported several research efforts in non-financial ways, for example, by facilitating connections to people with epilepsy through our communication channels. We also provided advice and insights to researchers developing project proposals, helping to ensure that upcoming studies reflect the real-life experiences and needs of those affected by epilepsy.

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Collaboration with FutureNeuro continued through the *My Moving Brain* initiative, which promotes brain health and wellness, while encouraging inclusive participation in sport. Regional events in 2025 were held in Cork, Galway, and Kildare, supported by Epilepsy Ireland ambassador Michael McKillop and several staff and volunteers. A central message throughout each event from the contributions of our volunteers was that epilepsy should not be a barrier to participation in sport. The project was shortlisted for a Chambers Ireland Sustainable Business Impact Award. A final event is planned for 2026, after which a series of recommendations will be drawn up.

We also engaged internationally, including attendance at the International Epilepsy Congress in Lisbon where Irish research, including EI-funded projects, was showcased. At the Congress, Professor David Henshall (FutureNeuro) was recognised with an Ambassador for Epilepsy Award, following a joint nomination by Epilepsy Ireland and the Irish Epilepsy League. This prestigious honour recognises individuals who have made exceptional international contributions to advancing the cause of epilepsy.

Communicating research is another important part of our work. In collaboration with FutureNeuro, we hosted an in-person research-focused event during Brain Awareness Week in March, attended by over 80 participants. The event showcased a range of Irish research projects including those funded by Epilepsy Ireland and provided a platform for researchers to engage directly with the epilepsy community. Speakers included Prof Norman Delanty, Dr Aisling Walsh & Dr Jade Parnell, Jordan Higgins, Dr Julian Larkin, Dr Ifeolutembi Fashina, Prof Mark Cunningham, Dr Albert Kelly, Meghma Mitra and Dr Radharani Benvenuti.

At year-end, four previously funded research projects remained ongoing:

- *Predicting and monitoring outcomes in Autoimmune Encephalitis*  
Prof. Norman Delanty, RCSI (through HRB/ HRCI JFS)
- *Long non-coding RNAs: regulators of epileptogenesis and potential targets for therapy*  
Dr Gary Brennan, UCD (through HRB/ HRCI JFS)
- *Molecular mechanisms, therapeutic targets and biomarkers for CDKL5 Deficiency Disorder (CDD)*  
Dr Omar Mamad & Erva Ghani, RCSI (through Research Ireland EPS)
- *Epilepsy Mortality in Ireland*  
Dr Yvonne Langan, St James's Hospital/ Trinity College Dublin

Unfortunately, the EPIVIEWS project at RCSI, examining the value and impact of epilepsy wearables was discontinued during 2025 due to unforeseen project-level challenges. While this was disappointing, we remain committed to supporting high-quality research in this area and to working with partners to advance knowledge of seizure monitoring.

We were delighted to establish a new Research Officer role during 2025, made possible through a significant philanthropic donation in 2024. This role will strengthen our capacity to manage and support our growing research activities, enhance collaboration with research partners, and facilitate greater engagement between people with epilepsy and the research community. It represents an important step in further embedding research within the organisation and advancing our strategic objectives in this area.

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3.4 Promote improved awareness, knowledge and understanding of SUDEP and advance strategies to reduce the risk and incidence of epilepsy deaths.

SUDEP (Sudden Unexpected Death in Epilepsy) refers to the sudden and unexplained death of a person with epilepsy, where no other cause can be identified. It often occurs during sleep and, while not fully understood, is associated with risk factors such as uncontrolled or frequent seizures (particularly generalised tonic-clonic seizures) as well as factors including medication adherence, alcohol use and exposure to seizure triggers.

Reducing SUDEP risk remains a key focus of our education and self-management programmes, including *Living Well with Epilepsy* and our Joint Education Sessions (see Section 1.1). We also provide information resources, including our *Seizures and Safety* booklet and dedicated online content.

The publication of the *Epilepsy Mortality in Ireland* study in 2024, led by Dr Yvonne Langan and supported by Epilepsy Ireland, established the incidence of SUDEP in Ireland for the first time (1:1,400). During 2025, we continued to use these findings to advocate for a national strategy to reduce epilepsy-related deaths and to raise awareness within both the epilepsy community and policy environment.

Joined by Dr Langan, we met with the Department of Health in August to discuss the need for a national strategy. This was an important development to highlight how we believe co-ordinated state action could lead to a reduction in deaths. We look forward to continuing our work with the Department in 2026.

SUDEP Action Day in October remained a central focus for awareness-raising. Supported by Jazz Pharmaceuticals, we produced and promoted a video featuring Dr Langan outlining key SUDEP risks and prevention measures. The campaign generated significant national media coverage, including features on RTÉ's *Six One News* and in the *Irish Independent*, alongside contributions from bereaved families who shared their experiences to highlight the importance of this issue. We are sincerely grateful to all families who continue to support this work.

Political engagement also increased around SUDEP Action Day, with all TDs and Senators contacted ahead of the day regarding our call for a national strategy. This resulted in several Parliamentary Questions being raised and a discussion under commencement matters in Seanad Éireann, further amplifying the need for action. These efforts contributed to increased public engagement, with 34,880 visits to our website recorded in October (2024: 24,000).

Research into epilepsy-related deaths also progressed during the year. The ongoing incidence study on epilepsy mortality led by Dr Langan continued work on identifying epilepsy-related deaths resulting from injury, drowning and status epilepticus. The study concluded in late 2025, with publication expected in 2026. This will be an important milestone for continuing our advocacy work in this area.

Our collaboration with UK charity, SUDEP Action continued across a number of initiatives. Work progressed on the redevelopment of the Epilepsy Deaths Register for Ireland (EDRI), which will be integrated into a new international platform. The Register allows families and professionals to record details of epilepsy-related deaths in support of international research efforts. While temporarily offline during redevelopment, the updated register is expected to relaunch in 2026.

We also continued work on adapting the SUDEP and Seizure Safety Checklist for use in Ireland. Following an update of the UK version, an Irish development group, consisting of key clinicians, was established and began reviewing the tool to ensure suitability for clinical practice. The Irish

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checklist will be launched on our website in 2026 and will support improved communication between clinicians and patients regarding SUDEP risk.

In addition, the SUDEP section of our website was fully reviewed and updated during the year in collaboration with SUDEP Action.

**Advocacy, Campaigns and Communications**

***Strategic Aim 4:***

***Transform perceptions of epilepsy and public policy relevant to the condition.***

**4.1 Use awareness and advocacy campaigns to create positive change for people with epilepsy.**

Epilepsy Ireland works to transform perceptions of epilepsy through targeted awareness and advocacy campaigns aimed at delivering meaningful change for people living with the condition.

International Epilepsy Day in February remains our primary awareness campaign. In 2025, we continued to promote the seizure first aid message *Time, Safe, Stay* through a coordinated national campaign across broadcast, digital and out-of-home media, including TV, radio, digital advertising and shopping centre billboards. This was supported by strong national and regional media coverage, as well as political engagement, with a number of elected representatives publicly supporting the campaign. This included Eoghan Kenny TD – a person living with epilepsy – prominently supporting our campaign for *Seizure Safe Schools* on RTÉ Drivetime. As always, our media volunteers were central to its success, and we are grateful to Emma Beamish and Gareth O'Neill who were the faces of the campaign in 2025 and to all who shared their stories, as well as to Connelly Partners for their ongoing support on the execution of the campaign.

Later in the year, additional funding from UCB Pharma enabled a further phase of the campaign through national TV and digital video and audio advertising in November and December, extending its reach and helping to build momentum towards International Epilepsy Day 2026.

National Epilepsy Week (May) again focused on lived experience and peer support, alongside the launch of new resources. These included *Amelia's Guide to Brain Hiccups*, developed in collaboration with EI volunteer Nicole McCarthy to support parents in explaining the parent's epilepsy to young children. The book is based on Nicole's own personal experience of explaining seizures to her daughter Amelia as 'brain hiccups' and we thank them both for their wonderful support. We also launched a new EpiLearn module based on our popular "Epilepsy Degree" resource, designed to provide accessible and engaging education aimed at the general public through our online learning platform.

Other awareness campaigns included SUDEP Action Day (October, see section 3.4 above) and Infantile Spasms Awareness Week (December). The latter marked our fifth year of participation and included volunteer-led content highlighting early recognition of infantile spasms using the STOP message, supported by national and regional media coverage. STOP stands for:

- **S**ee the Signs
- **T**ake a Video
- **O**btain Diagnosis
- **P**rioritise Treatment

These combined activities generated significant engagement, including over 36,000 website visits during the campaign period. A huge thank you to Bernadette and Sean who shared their stories to support public awareness. Infantile spasms are a rare but serious seizure disorder in babies that can cause lasting damage if not identified and treated early.

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Following the introduction of new advocacy priorities in 2024, 2025 focused on progressing each of these key objectives.

- *Improving epilepsy services and infrastructure to enhance access to specialist care and treatments.*  
Throughout the year, we engaged directly with clinicians, the National Clinical Programme for Epilepsy, and with elected representatives. Several Dáil questions were raised during the year on service levels and infrastructure, including Dáil plans for investment. We also undertook work to gather data on service capacity at each hospital site, including staffing levels, waiting lists and staffing vacancies. This data will provide a national picture of the current challenges and gaps, which will help strengthen our advocacy for improved infrastructure and care.
- *Expanding the HSE's Chronic Disease Management Programme to include epilepsy.*  
See section 3.1 above.
- *Developing a national strategy to reduce epilepsy-related deaths.*  
See section 3.4 above.
- *Making Ireland's schools seizure-safe by ensuring all teachers receive epilepsy awareness and seizure first aid training as part of their initial teacher training.*  
Thanks to the support of UCB Pharma, we wrote to over 4,000 schools in late 2025 providing them with a hard copy of our *Education Information pack: A Resource for pre-schools, schools and colleges*. We also provided copies of our seizure first aid posters and details of how we can support educators in managing epilepsy in the classroom. This significant undertaking was a proactive step to emphasise the need for a new approach to supporting children with epilepsy in the classroom. At year end, plans were in place to engage with elected representatives and the Minister for Education to seek that epilepsy education forms part of initial teacher training.
- *Ensuring Ireland's 2022 commitment to implementing the WHO Intersectoral Global Action Plan on Epilepsy and other Neurological conditions (IGAP) is met.*  
Throughout all the campaigns above, Ireland's commitment to implementing the WHO IGAP has underpinned our advocacy messaging. Planning also began for a joint stakeholder event in 2026 alongside the International Bureau for Epilepsy and the Irish Epilepsy League linked to Ireland's EU Presidency.

Advocacy on Sodium Valproate remained an important, though less visible, priority in 2025. Following sustained campaigning alongside OACS Ireland over the past decade, key developments include the establishment of a non-statutory inquiry into the historical licencing and use of the drug (which commenced in July 2025), the creation of a Department of Health Stakeholder Group on risk minimisation, and the allocation of additional specialist nursing resources. During 2025, we engaged with the inquiry process, including supporting communications to encourage participation of those who may have been affected. Work also commenced on a formal submission to the inquiry, which will be completed in early 2026, and we look forward to engaging further with the inquiry in the year ahead.

Other advocacy activities in 2025 included contributions to public consultation on priorities for Ireland's presidency of the EU, engagement with the HSE on public health information, participation in the HPR-led Med Safety Week, and ongoing involvement in the Valproate Stakeholder Group.

We extend our sincere thanks to all volunteers, partners and public representatives who supported our campaigns throughout 2025.

#### 4.2 Increase the visibility of epilepsy and the work of Epilepsy Ireland

Epilepsy Ireland maintained a strong public profile throughout 2025, supported by the awareness and advocacy campaigns outlined in section 4.1. This visibility extended across both traditional and digital media.

Our website, [epilepsy.ie](http://epilepsy.ie), remains a key information and support resource for the epilepsy community. In 2025, the site recorded just over 250,000 visits (2024: just over 220,000). Ongoing improvements were made to enhance user experience and accessibility, including a redesigned email sign-up feature, a new glossary of research terms to support understanding of medical/scientific publications, and new functionality to strengthen our position as a trusted source of epilepsy information, particularly within emerging AI-driven platforms.

Social media continues to play a central role in our communications, helping to raise awareness and direct audiences to our website. By year-end, we had nearly 26,000 Facebook followers, almost 8,000 on Instagram, and over 2,000 on LinkedIn. We also continued to grow our presence on newer platforms, including TikTok, Threads and Bluesky. Our following on X (formerly Twitter) declined in 2025, reflecting a wider shift away from the platform, and we will no longer actively use it for key communications from 2026.

Our core communications activity continued throughout the year, including four editions of member newsletter *Epilepsy News*, regular monthly e-zines (including special editions for key awareness events), quarterly healthcare professional updates, and our Research Bulletin.

A significant development in 2025 was the appointment of our first Epilepsy Ireland Ambassador. This voluntary role was established to enhance the visibility of epilepsy and the organisation, and to help reach new audiences. Ambassadors will have a positive public profile and/or be acknowledged as leaders in their respective field, which may include those in sport, entertainment, arts, business, social or traditional media. Dr Michael McKillop MBE was formally announced as our first Ambassador at our National Conference in September.

Michael is one of Ireland's most decorated athletes, a nine-time world champion and four-time Paralympic gold medallist, who has lived with epilepsy since childhood. His longstanding involvement with Epilepsy Ireland includes fundraising, public advocacy and participation in awareness campaigns such as *My Moving Brain*. Through his public profile and personal experience, he will play an important role in promoting key messages and supporting our work. We are delighted to work with Michael and look forward to continuing this partnership, as well as to appointing additional Ambassadors in the years ahead. RTÉ broadcaster Rick O'Shea remains our long-standing Patron, and 2026 will mark 20 years in that role, an anniversary we will acknowledge in the coming year.

Finally, 2026 will mark the 60th anniversary of Epilepsy Ireland. We will explore opportunities to use this milestone to further enhance the visibility of our work and impact.

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**Fundraising & Funding**

***Strategic Aim 5:  
Increase and diversify income***

**5.1 Raise the funds needed to implement strategic objectives through existing streams and by embracing new techniques and technologies.**

Epilepsy Ireland's primary source of income continues to be Section 39 Healthcare Provider Specific Requirements (HPSR – formerly known as Service Level Agreements) with seven HSE Community Healthcare Organisations (CHOs). In 2025, these agreements totalled €839,710 (2024: €822,867) and contribute to staffing and operational costs across our support and education services. Amounts include increased funding provided in 2024 and 2025 to meet obligations under the 2023 and 2025 WRC pay agreements for Section 39 organisations.

While these increased are welcomed, they deal only with pay costs, and rising non-pay costs, inflation, and increasing demand for services still mean that current funding levels continue to fall short of the true cost of service delivery. In 2025, we recorded a HSE funding shortfall of €76,606 (2024: €58,282), covered using unrestricted income generated during the year.

Over the past 15 years, we have worked to address this gap through cost control, securing alternative sources of funding, and growing non-grant income streams. We continue to advocate, alongside organisations such as the Disability Federation of Ireland, for a more sustainable funding model that reflects both pay and non-pay costs for Section 39 organisations, while also engaging directly with CHOs where funding shortfalls were identified, supported by appropriate business cases.

Another key source of core funding is the Scheme to Support National Organisations (SSNO). Originally awarded in 2019 and renewed in 2022 at €84,993 annually, an application for renewal was submitted in late 2025, with a decision expected in mid-2026.

Total non-grant income in 2025 was €1,400,204 (2024: €1,056,878), comprising donations, fundraising, training income, subscriptions, interest received, and other miscellaneous income. Fundraising performance remained strong, supported by significant contributions from corporate and philanthropic partners.

Income from Donations & Legacies (including donations in-kind) increased from €619,091 in 2024 to €935,455 in 2025. Major contributions in 2025 included a once-off donation of €293,367 from Ulster Bank, and €93,209 from Peter Mark, the proceeds of the 2024 PeterMarkathon event. Other significant partnerships in 2025 included continued support from Angelini Pharma (€58,902), UCB (€50,000), Neuraxpharm (€10,000) and Jazz Pharmaceuticals (€4,983). We thank all our partners for their support of our work in 2025. Recognising the importance of corporate partnerships, a new Partnerships & Philanthropy Officer role, approved by the Board in 2024, was filled in 2025.

Income from legacies in 2025 totalled €123,388 (2024: €157,500), while there were also in-kind donations of €11,242, received in the form of donated services from Connelly Partners for their work on the International Epilepsy Day campaign.

Income from Other Trading Activities includes raffles & lotteries, campaigns & appeals, and fundraising events. This increased from €145,615 in 2024 to €194,453 in 2025, supported by initiatives such as the annual raffle, the *45 for Epilepsy* challenge and the *24-Hour Squat Challenge*. The introduction of a new fundraising platform on epilepsy.ie in 2025 helped build a stronger fundraising community, with plans underway for further development, including a new challenge in March 2026.

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Training income from our Epilepsy Awareness and the administration of Buccal Midazolam programme (see Section 3.2) remains an important source of unrestricted income, generating €216,775 in 2025 (€228,765 in 2024).

Our work would not be possible without the commitment, generosity, and enthusiasm of the many individuals across the country who give their time and energy to support the charity. We are deeply grateful to everyone who contributed in 2025, whether through a personal challenge, a community initiative, or a simple act of support. As highlighted throughout this report, your support is helping to transform the experience of epilepsy in Ireland, by enabling us to provide essential support services, increase awareness, support research, and advocate for meaningful change.

While we cannot acknowledge all supporters individually, some notable efforts included:

- €94,000 raised by volunteers participating in events such as the Dublin City Marathon and VHI Mini-Marathon.
- €16,500 raised by the Borris-in-Ossory Women's Walking Group.
- €12,016 raised by John Nolan, Colin Gayer, Elliot Defina, and Dónal Hegarty through their Kilimanjaro climb.
- €9,750 raised by Eamonn Goold on a 700km cycle from Paris to Nice.
- €6,760 raised by Susan Pearson, Jamie Pearson, and Patrick Mullin through a head shave in memory of Leah Tochel Hone.
- €3,876 raised by Rhona McCarton's annual coffee morning.
- €2,630 raised by Beth Dempsey through a swimming challenge.
- €1,370 raised by Daniel Morris and colleagues at Liberty Living Homecare.

Thank you to all who contributed to making 2025 a record-breaking year for income generation. This strong fundraising performance has enabled the organisation to progress a range of strategic developments outlined elsewhere in this report, including:

- Expanding Community Resource Officer services across the country.
- Sustaining the Young Epilepsy Programme and establishing the new Research Officer role.
- Investing further in epilepsy awareness campaigns, including #EpilepsyDay and *Time Safe Stay*.
- Strengthening our capacity to support Irish epilepsy research through increased and larger grant funding.
- Increasing human resource capacity to support the delivery of our advocacy priorities.

### **Capacity and Governance**

#### ***Strategic Aim 6:***

***Demonstrate highest standards of governance & ensure structures are in place to meet objectives.***

##### **6.1 Demonstrate the highest standards of governance, financial management and quality.**

The Board is firmly committed to maintaining the highest standards of corporate governance. This commitment underpins the organisation's ability to deliver on its mission and is central to sustaining the trust and confidence of members, service users, volunteers, funders and donors.

Epilepsy Ireland has retained the Charities Institute Ireland 'Triple Lock' best-practice standard since 2017. This accreditation reflects our continued compliance with three key requirements:

- Full adherence to the Charities Regulator's *Charities Governance Code*.
- Compliance with the *Guidelines for Charitable Organisations on Fundraising from the Public*.
- Preparation of annual financial statements in line with the Charities SORP (Statement of

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Recommended Practice under FRS102) accounting framework.

The Board confirmed the organisation's full compliance with the Governance Code in 2021. Compliance is reviewed annually through the completion of the Charities Governance Code Compliance Record, which was most recently considered and approved by the Board in September 2025.

In addition, the organisation has maintained an externally recognised non-profit quality standard since 2015. After initially holding the PQASSO/ Trusted Charity accreditation (2015–2021), Epilepsy Ireland achieved accreditation under the Improving Quality (IQ) system at Foundation level in 2021. This UK-based framework assesses organisational performance across key areas including accountability, effectiveness, welcoming approach, and sustainability. Following a successful reassessment in 2024, this accreditation has been extended through to 2027.

A formal schedule for the review of operational and governance policies is in place, as agreed by the Board in 2024. Under this framework, core policies including financial controls and procedures, risk management, and directors' interests are reviewed on an annual basis, while all other policies are subject to review at least every three years.

As part of our ongoing commitment to good governance and regulatory compliance, the Board undertook a comprehensive review of the organisation's Constitution during 2025, supported by external legal advisors, AMOSS Solicitors. The Constitution had last been fully reviewed in 2017, with a minor amendment in 2020.

The 2025 review was designed to ensure that the governing document remains aligned with current legal requirements, reflects evolving organisational practice, and continues to support transparency, accountability, and effective decision-making.

The review resulted in a number of updates and clarifications to both the Memorandum and Articles of Association. Key changes included broadening the organisation's powers to reflect its current and future activities, including advocacy, use of digital platforms and collaboration with other organisations. Enhancements were also made to governance structures, including the introduction of provisions to facilitate hybrid and virtual general meetings, clearer procedures for member engagement and rights, and strengthened arrangements for Board composition, size, and term limits in line with best practice and the Charities Governance Code. The revised Constitution was presented to members for approval and was formally adopted at the Annual General Meeting held in September 2025.

*Activities of the Board of Directors in 2025*

The Board operates in accordance with the organisation's Constitution, its governance policies and procedures, and with reference to the agreed strategic and operational plans.

Eight Board meetings were held in 2025 (2024: eight). Seven of these meetings were conducted remotely, while one was held in person. During the year, the Board:

- Monitored progress at each meeting against the 2025 operational plan and budget.
- Received departmental updates from the management team across support services, training and fundraising.
- Conducted an assessment of the charity's Constitution, recommending proposed changes for adoption at the 2025 AGM.
- Reviewed and reconfirmed the organisation's full compliance with the Charities Regulator Governance Code.
- Co-opted four new directors during the year. Liam Woulfe and Caoimhe Neary joined the board in February, and both were appointed to a three-year term at the 2025 AGM.

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- Michael McLoughlin and John Gildea were co-opted to the Board in September.
- Elected a new chairperson (Michael McLoughlin) and company secretary (Aaron Chalke) to replace the outgoing chair, Cathy Grieve and secretary, Clare O'Dea, whose terms had ended.
  - Reviewed and approved the organisation's risk register twice during the year and agreed actions to mitigate identified risks.
  - Reviewed and approved updates to 19 operational and governance policies and procedures in line with the agreed review schedule.
  - Approved the 2024 Annual Financial Statements for presentation to the AGM.
  - Reviewed and agreed changes and movements in the organisation's designated reserves (see Reserves & Investments section).
  - Made decisions on the effective use of the organisation's deposits.
  - Reviewed the organisation's insurance policies.
  - Reviewed and approved staff salary proposals, including implementation of the 2025 WRC pay agreement for Section 39 organisations.
  - Agreed changes to the EI pension scheme to align with the requirements of incoming auto-enrolment legislation.
  - Approved the creation of a new Research Officer role to develop and manage EI's role in supporting epilepsy research.
  - Agreed expansions in the capacity of our service deliver team by approving a new CRO role as well as the option of additional hours for existing CRO staff.
  - Reviewed results of a scoping exercise on the organisation's CRM needs and approved a new project to implement a new organisation-wide CRM system.
  - Agreed a new simplified membership structure.
  - Appointed Michael McKillop as the first Epilepsy Ireland Ambassador.
  - Appointed Prof Gus Baker as the new Chair of the Epilepsy Ireland Research Review Panel.
  - Approved updates to the Board Development Plan.
  - Approved the operational plan and budget for 2026.

**6.2 Strengthen our organisational structure and capacity.**

Delivering the objectives set out in our strategic plan requires a continued focus on strengthening organisational capacity, both in terms of staffing and at Board and sub-committee level.

Progress in developing our staffing structure, as envisaged in the strategic plan, is dependent on securing sustainable income streams. As in 2024, there were a number of important developments in 2025.

New roles introduced during the year included a Research Officer and a Partnerships & Philanthropy Officer. The Research Officer will lead the coordination and expansion of Epilepsy Ireland's research activities and is funded through a generous unrestricted donation received in late 2024. The Partnerships & Philanthropy Officer represents a strategic investment in growing our fundraising capacity.

In July, a new Community Resource Officer (CRO) post was created, and existing CROs were offered the opportunity to increase their working hours from 25 hours per week, supported by funding from Ulster Bank and Peter Mark, as referenced in Section 5. A Project Manager role was also approved to oversee the implementation of a new CRM system (see Section 6.3). In addition, Angelini Pharma committed to extending its support for the Youth Resource Officer role for a further year, to March 2027.

Strengthening organisational capacity also requires maintaining an appropriate and competitive pay policy, which is essential to attracting and retaining the skilled and motivated staff needed to

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deliver high-quality services and achieve our strategic goals. In 2025, the organisation implemented the second Workplace Relations Commission (WRC) pay agreement for Section 39-funded staff, resulting in a further 5.25% increase for all HSE-funded staff, supported by additional HSE funding. The Board also considered the position of non-HSE-funded staff, approving a 2.5% increase in 2025, bringing these staff in line with the first WRC agreement implemented in 2024. Pay for non-HSE-funded staff will continue to be reviewed annually.

There were a number of changes at Board level during the year. Chairperson Cathy Grieve retired at the AGM in September, having completed her maximum term of service. Appointed in 2019 as the first person with epilepsy to serve as Chairperson, Cathy led the organisation through the challenges of the COVID-19 pandemic and oversaw the development of the current strategic plan. Clare O'Dea also retired on reaching her term limit, while Anne Kilroy, Ann Maguire, Helen Behan and Ambrose Kealy stepped down after a combined 17 years of service. The Board extends its sincere thanks to all retiring directors for their significant voluntary contributions.

Four new directors joined the Board during the year. Liam Woulfe and Caoimhe Neary, both of whom had previously served on the Finance & Audit sub-committee, joined in February and were formally appointed to three-year terms at the 2025 AGM. Michael McLoughlin and John Gildea were co-opted to the Board in September. Michael had previously served on the Board from 2013 to 2019, including as Treasurer, while John brings extensive expertise in marketing and communications. In October, Michael McLoughlin was elected Chairperson and Aaron Chalke was appointed Company Secretary.

Succession planning remains a key priority to ensure continuity and maintain a skilled, diverse and representative Board. The Board Development Plan was updated during the year to support effective rotation and renewal. Changes to Board membership in the latter part of the year also necessitated a reorganisation of Board sub-committees, a process that was ongoing at year end.

### 6.3 Invest in our technology needs.

This strategic goal is a key enabler of the organisation's plans to build capacity and deliver on the wider objectives set out in the Strategic Plan. Its importance became particularly evident during 2025.

Following the completion of a scoping exercise of the organisation's Customer Relationship Management (CRM) requirements, approved by the Board in 2024, a competitive tendering process was undertaken in 2025. This process sought to identify a solution capable of meeting the needs of all areas of the organisation, including services, training, fundraising, and communications.

In July, the Board approved the appointment of Enclude to lead the implementation of a new Salesforce-based CRM system. This project represents a key strategic priority under the 2022–2026 Strategic Plan. It is intended to enhance operational efficiency, streamline workflows and internal communications, and strengthen the organisation's ability to manage relationships. It will also support membership growth and engagement, improve service user experience, enhance impact reporting and outcomes measurement, and enable a more data-driven approach to fundraising and organisational decision-making.

A Project Manager was recruited by year end (to begin in March 2026) to oversee delivery of the project, which is expected to be completed by the end of 2026. At year end, a provisional funding agreement was in place with a foundation to support the project, subject to finalisation in early 2026.

In addition, 2025 saw the successful implementation of a new finance system, AccountsIQ. This transition to a modern, cloud-based platform has strengthened financial management through

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enhanced functionality, improved operational efficiency, and more detailed real-time reporting. It supports more timely and informed decision-making, while also providing scalability and ensuring continued alignment with best practice in financial management as the organisation grows.

**STRUCTURE, GOVERNANCE AND MANAGEMENT**

Legal Status

The Company was incorporated on 16 September 1980 under the Companies Acts, was established under a Memorandum of Association which established its objects and powers and is governed under its Articles of Association. It is a Company Limited by Guarantee and does not have a share capital. Accordingly, neither the Directors nor the Secretary have shares or any other financial interests in the company. The objects of the Company are charitable in nature, and it has established charitable status (CHY NO. 6170) and is registered with the Charities Regulatory Authority (Registration No. 20010553).

Board of Directors

The Board of Directors of Epilepsy Ireland is responsible for setting the organisation's strategic direction and ensuring that it is governed effectively, transparently, and responsibly.

As of 31 December 2025, the Board consists of 11 volunteer members, drawn from a range of backgrounds, skills, and experiences. In recent years, the Board has placed particular emphasis on achieving a balanced composition in terms of expertise, lived experience of epilepsy, and demographic representation across factors such as age, gender, geography, and ethnicity.

Progress has been made in several areas, including improvements in age, gender, and skills diversity. However, the Board acknowledges that further work is required to strengthen ethnic diversity and to broaden regional representation.

Of the current Board members, five have a direct personal connection to epilepsy (either living with the condition themselves or as close family members), two are healthcare professionals, and three contribute specialist knowledge and expertise essential to the Board's governance responsibilities.

Operations of the Board

The Board governs the organisation in accordance with its Constitution and an agreed governance framework. This framework includes clearly defined role specifications for Board members and officers; terms of reference for all sub-committees; a schedule of matters reserved for Board decision; and an agreed division of responsibilities between the Chairperson and the CEO.

The Board also operates under a suite of governance policies and procedures covering key areas such as confidentiality, conduct, and conflicts of interest.

Conflicts of interest are recognised as an occasional and natural occurrence in any Board setting. Epilepsy Ireland's Conflict of Interest Policy outlines the procedures for effectively identifying, recording, and managing such conflicts when they arise. A formal Register of Interests is maintained and reviewed annually. Additionally, potential conflicts are addressed as a standing agenda item at the beginning of each Board meeting, ensuring transparency in relation to the matters under discussion or decision.

**DIRECTORS' REPORT**

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Recruitment & appointment of directors

Epilepsy Ireland's Constitution outlines the rules governing the appointment of directors. The Constitution was reviewed in 2025, and a range of updates were approved by members at the AGM in September, including clauses relating to the appointment of directors. Under the previous Constitution, directors could ordinarily serve up to two four-year terms, with options to extend this in certain circumstances.

From September 2025, board terms are three years, with a maximum of three terms allowed (nine years in total). All options for additional tenure have been removed. This ensures that there is no possibility that terms served exceed the Charities Regulator recommended maximum of nine years.

The Constitution also sets out a minimum board size of five and a maximum of 16 members (20 prior to September 2025), with a requirement that at least 25% of the board must have a direct personal connection to epilepsy. It also details the procedures for appointing (including via co-option) and removing directors.

Oversight of board recruitment and development rests with the Governance & Nominations Sub-Committee. This sub-committee manages the recruitment process, including reviewing applications, conducting interviews, vetting candidates, and making appointment recommendations to the full board.

Recruitment strategies in recent years have included open calls to Epilepsy Ireland members, outreach to existing volunteers, utilising networks, and engagement with Boardmatch Ireland to source candidates with specific skills.

A structured induction process is in place for all new directors. Each new appointee receives a comprehensive information pack covering the organisation's operations, finances, governance structures, key policies and procedures, and recent board documentation. This is followed by one or more induction meetings with the CEO to ensure the new director is fully briefed ahead of their first board meeting.

Board Evaluation and Training

The Board of Directors is committed to ensuring continuous improvement in governance and effectiveness. Regular evaluations are conducted to assess the Board's performance and overall functioning. These evaluations help identify strengths, areas for development, and opportunities for enhanced collaboration. In addition, ongoing training and development opportunities are provided to Board members, including opportunities for individual learning and full-board development sessions. An external board effectiveness review was undertaken in 2024, yielding a very positive overall result, with a small number of minor improvements that were implemented across 2024 and 2025. The next board evaluation will be undertaken in 2026.

Board composition.

As of 31<sup>st</sup> December 2025, the Epilepsy Ireland board members were:

*Michael McLoughlin (Chairperson)*

Michael has served as CEO of Amárach Research for 25 years. He holds an MBA and MA from University College Dublin, is a qualified Chartered Director, and is currently completing a Level 9 qualification in Financial Planning. He previously served on Epilepsy Ireland's Finance & Audit Sub-Committee (2011-2018) and on the Board from 2013-2019. Michael was re-elected to the Board in 2025 and elected Chair in October. Over the past 25 years, he has also served on several other

**DIRECTORS' REPORT**

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voluntary and charity boards. He is currently Chair of the Irish Youth Foundation and the Social Finance Foundation and is Vice-Chair of the Heritage Credit Union.

*Paul Kehoe (Hon. Treasurer)*

Paul joined the Epilepsy Ireland Finance & Audit sub-committee in 2017 and was elected to the Board in 2018. He currently serves as Treasurer. He is an experienced accounting and finance professional who has worked for over 40 years in the Financial Services sector including many years at AIB Global Treasury. A close family member lives with epilepsy.

*Aaron Chalke (Co. Secretary)*

Aaron is the founder and Managing Director of Foe, a film production and advertising creative studio. A DCU graduate in Multimedia, he also holds a Postgraduate Diploma in Advanced Producing for Film and TV from TUD. He has worked in the marketing and advertising sector since 2010, developing a number of award-winning campaigns with a range of international and domestic brands. Aaron joined the board in 2023.

*Mark Curran*

Mark joined the Board of Directors in 2023. He is a practising barrister and accredited mediator engaged in civil litigation with a particular focus on financial services & pensions law, regulatory law, judicial review, personal injuries law and employment law. Mark is a member of the Bar of Ireland and the New York State Bar and holds degrees from University College Dublin and the University of Cambridge.

*Paul Fahey*

Paul is a Chartered Director and member of the Institute of Directors Ireland. He is a Director of Glenough Consulting Limited which provides consultancy services to the health sector. Paul is a pharmacist who previously owned and operated a pharmacy business for over 25 years. He served as the President of the Pharmaceutical Society of Ireland from 2011-2013, and is actively involved in the International Pharmaceutical Federation (FIP).

*John Gildea*

John joined the Board of Directors in 2025 having previously been involved in a local community advocacy group for autism. John was diagnosed with epilepsy in 1998 and is an experienced communications professional. He is currently Head of Marketing & Communications for John Paul Construction.

*Prof Mary King*

Prof. King is a retired Consultant Paediatric Neurologist from Children's Health Ireland (CHI) at Temple St., Rotunda Hospital and Beaumont Hospital. She is a Professor in Paediatrics at University College Dublin, School of Medicine & Medical Science and has many publications in the field of Paediatric Neurology including "A Handbook of Neurological Investigations in Children". Prof. King has collaborated in several genomic projects which have led to definite diagnoses, genetic counselling and personalised treatments for many Irish families affected by epilepsy.

*Nicola Nagle*

Nicola joined the Board of Directors in 2023. She has a BSc in Accounting from UCC and is a member of the Institute of Chartered Accountants in Ireland. She is a Director in KPMG's technical accounting department with over 13 years' experience working with listed companies, private Irish family-owned business as was all not-for-profit organisations. She brings invaluable experience to the charity in financial reporting, legal and corporate governance requirements.

*Caoimhe Neary*

Caoimhe joined the Board of Directors in 2025 having previously served on the Finance & Audit sub-committee since 2024. Working as a Tax Director in EY, she has over 13 years' experience

**BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**DIRECTORS' REPORT**

advising in employment tax with a particular focus on tax technology and transformation and Revenue Audit remediation programmes. Caoimhe is a member of Chartered Accountants Ireland and the Irish Tax Institute, and holds degrees from University College Dublin and Michael Smurfit Graduate Business School.

*Nicola Saarsteiner*

Nicola joined the Board of Directors in 2023. She was diagnosed with epilepsy in 2003 and subsequently volunteered for Epilepsy Ireland as a media volunteer, speaking at several conferences and events. She became a barrister in 2012 and practices in a number of areas in civil litigation, including personal injury, professional negligence and employment law.

*Liam Woulfe*

Liam has an undergraduate degree in Production Management from the University of Limerick. He has 20 years' experience working with Fortune 500 Medtech organisations in roles of increasing responsibility. In that period, he has completed an MSc in Project and Programme Management in UL and an Executive MBA from the UCD Smurfit Business School. He is currently a Senior Strategic Director in Medtronic's Global Operations and Supply Chain organisation. Liam was diagnosed with Epilepsy at the age of 16.

Board Meeting attendance 2025

	Feb	Mar	May	July	Sept (1)	Sept (2)	Oct	Dec	Total
Cathy Grieve	Y	N	N	N	Y				2/5
Michael McLoughlin							Y	Y	2/2
John Gildea							N	Y	1/2
Paul Kehoe	Y	Y	Y	Y	Y	Y	Y	Y	8/8
Helen Behan	Y	Y	Y	Y	Y				5/5
Aaron Chalke	Y	Y	Y	Y	Y	Y	Y	Y	8/8
Mark Curran	Y	N	N	Y	N	N	Y	Y	4/8
Paul Fahey	Y	Y	Y	Y	Y	Y	Y	Y	8/8
Ambrose Kealy	N	Y	Y	Y	N				3/5
Anne Kilroy	Y	Y	Y	Y	Y				5/5
Mary King	Y	Y	Y	Y	Y	Y	N	Y	7/8
Anne Maguire	N	Y	N						1/3
Nicola Nagle	Y	Y	N	Y	N	Y	Y	Y	6/8
Caoimhe Neary		Y	Y	Y	Y	Y	Y	Y	7/7
Clare O'Dea	Y	Y	N	Y	Y				4/5
Nicola Saarsteiner	Y	N	Y	Y	N	N	Y	Y	5/8
Liam Woulfe		Y	Y	Y	Y	Y	Y	Y	7/7

Y	Present
N	Apologies
-	Not director

Role and activities of sub-committees

The Board has established several sub-committees to consider specific matters and make recommendations to the Board in line with their terms of reference. With a total of 10 changes to board composition during the year (retirements and new appointments), the operation of some sub-committees experienced disruption, particularly in the second half of the year. Sub-committees were reconstituted in the first quarter of 2026. The current sub-committees are:

**DIRECTORS' REPORT**

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*Finance & Audit sub-committee:*

This sub-committee assists and advises the Board on matters related to finance, risk, investments and reserves, general business activities, and strategic direction. It includes both Board members and independent external experts. In 2025, the committee met seven times and made recommendations on annual budgeting, risk management, pay policy, the organisation's response to auto-enrolment, investments in CRM and finance systems, new fundraising approaches, and the use of reserves and deposits. It also received regular updates on fundraising and funding activities and oversaw the annual audit process.

*Governance & Nominations sub-committee:*

This sub-committee provides support to the Board on all governance matters, including Board composition, development, and recruitment. It met twice in 2025, focusing on Board recruitment, updating the Board development plan, reviewing internal policy updates, and overseeing the review of the organisation's Constitution.

*Quality & Safety sub-committee:*

This sub-committee oversees quality, safety, and risk management across the organisation's services. It met twice in 2025 and addressed issues such as the organisational risk register and risk management policy, health and safety management, complaints, safeguarding and the Garda vetting process.

*Remuneration sub-committee:*

Comprising the Chairperson, Company Secretary, and Treasurer, this sub-committee did not meet in 2025.

*Communications & Fundraising sub-committee:*

This sub-committee provides strategic advice and supports operational goals in the areas of external communications (including awareness and advocacy) and income generation. It met three times in 2025, focusing on key awareness and fundraising activities, the development of a new membership structure, a new policy on the organisation's use of social media, and communications/fundraising planning for 2026.

*Research sub-committee:*

This sub-committee provides expert advice to the Board on matters relating to epilepsy research and furthering our strategic objective of funding and collaborating with research partners to increase knowledge of epilepsy, its causes, effects and management. The sub-committee met once in 2025 to review expressions of interest received from potential PhD candidates under the Research Ireland Enterprise Partnership Scheme, and to review plans for the recruitment of a new Research Officer staff post.

Role of Management

The Board delegates operational leadership, management and strategic implementation to the Chief Executive who oversees the wider management team and staff and reports to the Board regularly on all services and activities, as well as administrative and financial matters.

The senior management team consists of the Director of Services, Finance Manager, Training & Quality Manager, Advocacy & Communications Manager and Fundraising & Development Manager.

**DIRECTORS' REPORT**

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**FINANCIAL REVIEW**

Results for the Financial Year

	<b>2025</b>	2024
	<b>€</b>	€
Net (expenditure)/income for the financial year	<b><u>259,750</u></b>	<u>186,597</u>

Epilepsy Ireland's principal sources of funding are described above under Strategic Aim 5.1.

In 2025, Epilepsy Ireland recorded a surplus of €259,750, significantly exceeding the projection outlined in the 2025 budget. This marks the organisation's third consecutive year of surplus (2024: €186,597).

The positive outcome was primarily driven by significant donations of €293,367 from Ulster Bank and €93,209 from Peter Mark, the proceeds of the 2024 PeterMarkathon event, by significantly increased industry support, and by legacy income of €123,388.

Several other fundraising streams, including community fundraising, individual giving, and events/marathons performed above expectations, while other areas performed below expectation, such as trusts and foundations and Purple Day. Income from training services also exceeded expectations.

As a result of these factors, income exceeded the €2m threshold for only the second time, recording its highest ever annual turnover of €2.324m (2024: €1.969m).

Overall expenditure also increased slightly to €2.064m (2024: €1.783m), exceeding the forecasted level by €71,545. Staff costs increased from €1.167m in 2024 to €1.231m in 2025, reflecting both the continued implementation of the WRC pay agreements and an increase of 2.5 in the average number of employees over the year. Overall, staff costs remained closely aligned with the approved annual budget.

While staff costs accounted for the majority of the year-on-year increase in expenditure, other contributing factors included higher programme costs (primarily due to the UCB-funded *Time Safe Stay* awareness campaign in late 2025), increased fundraising and recruitment expenditure and costs incurred in connection with the implementation of the new AccountsIQ finance system and the ongoing maintenance of the head office.

Management continues to maintain a strong focus on cost control across all areas of the organisation's operations.

**Reserves and Investments**

Total funds held at the end of 2025 are €2,056,071 (2024: €1,796,321). This comprises restricted funds of €351,278, designated funds of €678,424 and an unrestricted operational reserve of €1,026,369.

Restricted funds include €14,875 in HSE-related funds (including National Lottery funding) and €70,575 raised by the Young family between 2021 and 2025, which will support the reimbursement scheme for seizure detection devices (as described in section 2.1 of the Achievements and Performance section above). Restricted funds also include €257,388 in legacy income, received in two instalments in 2024 (€137,500) and 2025 (€119,888). The amount received in 2024 was originally recognised as unrestricted income, as the donor's restriction, specifying that the funds be used to support research, was only communicated to Epilepsy Ireland in 2025. In addition, a further €8,440 in other grant income is held as restricted funds.

**DIRECTORS' REPORT**

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Designated reserves are set aside by the Board for specific strategic purposes, including undertaking epilepsy awareness campaigns; providing funding for current and future research projects; funding the Research Officer role; and for upgrading/relocating the charity's head office in Crumlin. The Board also maintains a reserve to facilitate implementation of the organisation's Strategic Plans.

In 2025, the Research reserve was reduced by €12,624 to meet part of the cost of research grants provided in the year. In its annual review of designated reserves, the Board agreed to un-designate the remaining €137,376 in this reserve, recognising that the restricted reserve for research was sufficient to meet anticipated research investments in the next 2-3 years.

A designated reserve of €90,000, created in 2024 to support the employment of a new Research Officer staff position from 2025, was reduced by the amount of staff cost incurred during the year (€19,683). An amount of €31,130 was added to this reserve from income received from corporate donations in 2025 to sustain the role for a further two years.

The Awareness reserve was reduced by €34,879 to €65,121, representing costs associated with the 2025 International Epilepsy Day campaign in February. The Strategic Plan implementation reserve was reduced by €40,715 to €99,503, representing one staff role as well as costs associated with scoping the organisation's CRM needs. The Premises reserve was reduced by €14,666 to €85,334, representing expenditure incurred on minor improvements to the head office premises during the year.

As described in sections 1.1 and 5.1 of the Achievements & Performance report, donations from Ulster Bank and Peter Mark in 2025 were designated for the purposes of creating a new CRO post, expanding CRO service hours and sustaining the Youth Resource Officer post in the longer-term. This new designation of €355,446 (year-end balance of €327,019) will ensure the sustainability of these developments until the end of 2028.

As a result of these movements, total designated funds at year-end stood at €678,424 (2024: €580,218).

At the end of 2025, unrestricted operational reserves stood at €1,026,369 (2024: €1,097,165). In line with our reserves policy, these reserves are held to safeguard the financial stability of the organisation, enabling it to deliver on its mission and strategic objectives while maintaining continuity of operations. The policy requires that a minimum of six months' operational expenditure be retained to provide financial security and cover unforeseen contingencies, and that the combined total of unrestricted operational reserves and designated funds is at least €1 million. The reserves position at year end remained in compliance with these requirements, noting that the organisation's recent growth has resulted in an annual budget of approximately €2 million.

The organisation's investment policy (last updated in 2024) details our approach to investing/depositing available funds. The policy details targets for liquidity, short term deposits ( $\leq 3$  years) and medium-term deposits (3-5 years).

Liquid funds consist of current accounts held at Bank of Ireland and AIB, intended to meet day to day expenditure.

Short-term deposits include term deposit accounts held with Bank of Ireland, AIB, Permanent TSB, and in State Savings Bonds. These deposits prioritise capital protection while also ensuring readily accessible liquidity.

Medium-term investments are intended to preserve the purchasing power of the organisation's reserves over time, while adhering to a low-risk investment strategy. A cap is applied to such

**DIRECTORS' REPORT**

investments, limited to the lower of €250,000 or 20% of Epilepsy Ireland's total balance sheet funds at the time of investment.

The table below summarises the current investment structure and allocations as of 31st December 2025:

	<b>Liquidity</b>	<b>Short Term Deposits</b>	<b>Medium Term Reserves</b>
<b>Objective</b>	Access	Capital Protection	Capital Growth (negate inflationary pressures)
<b>Target Funds</b>	>€250,000	>€1,000,000	<€250,000 (<20%)
<b>Actual Funds</b>	€670,345	€1,345,295	€0

Risks and uncertainties

The Board has approved a risk management policy and maintains a comprehensive risk register that outlines all organisational risks, corresponding mitigation measures, and actions required to minimise them. The register is reviewed twice annually by the Board, as well as by the Finance & Audit and Quality & Safety sub-committees.

Risks are categorised across a number of areas, including human resources, information technology, fundraising, finance, services, governance, communications/advocacy, strategy, and other risks. Each risk is assessed based on its likelihood and potential impact and is rated as high, medium, or low on both an inherent and residual basis. A risk appetite is also agreed for each risk area. Based on the most recent review of the risk register by the Board (February 2026), the most significant risks currently facing the organisation are summarised below, along with a summary of mitigation actions:

Drop in Fundraising Income/ Poorly performing fundraising activities.

*Actions: Review Fundraising Plan and progress further developments/ investments to be agreed by Board; recruit fundraising experience to board and/or sub-committees; complete CRM implementation project in 2026; ongoing review/ reporting on current fundraising activities including those which are under-performing; introduce the new March Challenge planned for 2026; review additional staffing needs; implement actions in 2026 operational plan.*

Inadequate HSE funding; overdependence on HSE income

*Actions: Review Fundraising Plan and progress further developments/ investments to be agreed by Board including staffing needs; monitor and apply for alternative funding opportunities; secure SSNO funding for 2026-2028 period; meet income generation targets in 2026 budget/ operational plan; secure additional HSE funding to support core services from under-funded areas (outside of WRC pay agreement increases); continue to review and monitor reserves.*

External Factors (i.e. public health crises, economic and political environment)

*Actions: Ensure Business Continuity Plan and Crisis Communications plans are kept up to date; develop environmental & social policy; ensure reserves and deposits are regularly monitored and utilised as per the reserves policy and investment policy.*

Among the medium level risks facing the organisation, we have identified and agreed the following:

- Recruitment and retention challenges; skills shortage; high staff turnover.
- Insufficient capacity to meet changes in service demand; compliance requirements; stakeholder expectations; strategic plan aims.
- System failure/ security breach.
- Failure to deliver new CRM system on time, within budget and to agreed scope.

**DIRECTORS' REPORT**

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- Risks associated with emergence of AI.
- Cost of fundraising increases.
- Relationship with key funders.
- Payroll cost increases
- Services discontinued, become obsolete or do not develop in line with service user needs.
- External changes impacting the provision of training programme.
- Board succession planning, ensuring appropriate skills and experience are retained.
- Failure to fully comply with data protection legislation.
- Declining public trust in charity sector as a whole.
- Declining membership of the organisation.
- HSE structural changes

Mitigation controls and actions are agreed for all identified risks.

Financial risks continue to represent the most significant area of concern. The Board acknowledges Epilepsy Ireland's reliance on HSE Section 39 funding for the delivery of core services and recognises the importance of growing unrestricted income over the medium to long term. In doing so, the Board is mindful of the need to balance investment in delivering the organisation's mission and strategic objectives with the requirement to maintain long-term financial sustainability.

The Board is confident that the assumptions underpinning the 2026 budget and operational plan are sound and believes that the organisation is well-positioned to respond to emerging financial challenges through the appropriate use of reserves; ongoing implementation of fundraising strategies; and cost management measures. It is also recognised that the planned and appropriate use of restricted and designated funds to deliver strategic priorities (as described under Activities and Performance above) may result in budgeted deficits in future periods. However, this approach is considered both necessary and sustainable within the context of the organisation's overall financial position.

Going Concern

Taking into account the analysis of financial performance, the current funding and fundraising environment, identified risks and uncertainties, future forecasts and projections, and the reserves held by the organisation, the Board has a reasonable expectation that there are adequate resources to continue operating within existing cash flows and reserves for the foreseeable future. As such, the Board continues to adopt the going concern basis of accounting in preparing the annual financial statements.

Accordingly, these financial statements do not include any adjustments to the carrying amounts or classification of assets and liabilities that may arise should the company be unable to continue as a going concern. Further information is provided in Note 3 to the financial statements.

Internal controls

The board has established procedures to address the board's responsibility to maintain, review and report on internal financial controls and procedures, including in relation to the receipt, recording and control of all income received. These controls are reviewed and updated annually, based on the recommendation of the Finance & Audit sub-committee. The most recent review of the organisation's Financial Controls and Procedures took place in October 2024. The review scheduled for October 2025 was deferred to March 2026, due to the implementation of the new Accounts IQ finance system in late 2024 which required a number of system-specific updates to the Financial Controls and Procedures to be made.

## **DIRECTORS' REPORT**

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The Finance and Audit sub-committee reports directly to the board through the Treasurer on financial controls and risks. A detailed annual budget is prepared, reviewed and approved annually by the sub-committee and board. The budgeted income and expenditure are monitored throughout the year to ensure alignment with plans and with financial resources available. Forecasts are updated ahead of sub-committee and board meetings.

### **FUTURE PLANS**

Epilepsy Ireland remains committed to delivering for the epilepsy community across Ireland through our support services, advocacy, training, awareness-raising activities, and research. The organisation's work in 2025 was strengthened by the dedication of staff and volunteers, alongside the continued support of donors, funders, and the Board.

The organisation is in a strong position to deliver on its strategic objectives and respond to emerging needs. We are proud of the progress achieved over the past year and across the current Strategic Plan period since 2022. As we move into the final year of the Plan, we remain focused on building on the strong momentum established to date to continue working towards a society where no person's life is limited by epilepsy.

The priorities for the final year of the current Strategic Plan are set out in the 2026 Operational Plan, which was approved by the Board in December 2025.

#### **2026 Operational Plan**

Each year, the Board of Epilepsy Ireland approves an Operational Plan and budget aligned to the Strategic Plan, setting out the organisation's priorities for the year ahead. Delivery against the plan is actively monitored and reviewed at each Board meeting to ensure effective implementation and accountability.

Key goals set out in the 2026 Operational Plan include:

- Provide a high-quality one-to-one support service with a target of at least 16,000 contacts.
- Facilitate 4 x 'Transitioning to Adult Services' events for teenagers/ families with epilepsy.
- Continue Aids & Appliances scheme, providing at least 40 reimbursed units. Gather user feedback.
- Develop and grow the Young Epilepsy Programme.
- Roll out new membership model
- Collaborate with UCC/ HSE to host pilot epilepsy education event for staff in Primary Care Hubs in South region.
- Provide face-to-face and online training for 2,800 professionals in epilepsy awareness and the administration of Buccal Midazolam.
- Complete the 2025/2026 HRB/HRCI Joint Funding Scheme research process aiming to submit three applications for co-funding
- Partner on at least two institution-led research funding applications as a collaborator.
- Launch study on incidence of overall epilepsy-related deaths and utilise study to support advocacy campaigns.
- Launch and promote the SUDEP Checklist in Ireland.
- Organise and deliver awareness programmes including the #EpilepsyDay campaign in February; National Epilepsy Week in May; SUDEP Action Day in October; and Infantile Spasms Awareness Week in December.
- Host event with the International Bureau for Epilepsy and the Irish Epilepsy League to link with Ireland's EU Presidency and advance IGAP implementation in Ireland.
- Continue to engage with Sodium Valproate Inquiry.

**DIRECTORS' REPORT**

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- Deliver the full suite of communications activities, including *Epilepsy News* magazine, e-newsletters, research bulletins, and ongoing management of epilepsy.ie and social media.
- Progress the four key advocacy campaigns - Epilepsy Infrastructure & Services; Seizure Safe Schools; inclusion of epilepsy on the Chronic Disease Management Programme; and a National Epilepsy Deaths Strategy.
- Launch new March Challenge fundraising campaign.
- Develop and finalise new Strategic Plan (2027 - 2031)
- Undertake organisational review including HR resources & structures and premises as part of strategic planning process.
- Design, develop and implement new CRM system.
- Maintain full compliance with the Governance Code and retain the Charities Institute Ireland Triple Lock status.

With the current Strategic Plan concluding at the end of 2026, planning for the next strategic cycle will be a key organisational priority during the year. The process to develop a new Strategic Plan for the subsequent five-year period has commenced in Q1 2026. This process will involve a structured programme of engagement and consultation throughout the year, with a view to finalising and approving the new Strategic Plan by year end.

Consistent with previous planning processes, a strong emphasis will be placed on consultation with service users, members, staff, volunteers and key external stakeholders. This inclusive approach has been central to shaping the organisation's current strategy and ensuring that it reflects the lived experience and evolving needs of people with epilepsy and their families. The process will also take account of the policy, funding and wider environmental landscape in which the organisation operates. The Board and management believe that this engagement will be critical in ensuring that the next Strategic Plan is responsive and aligned with both stakeholder needs and the organisation's long-term sustainability.

**DIRECTORS AND SECRETARY**

A list of current directors is shown on page 2. The directors, and secretary, who served at any time during the financial year except as noted, were as follows:

**Directors:**

Ms H Behan (resigned 8<sup>th</sup> September 2025)  
Mr A. Chalke  
Mr M. Curran  
Mr P. Fahey  
Mr J. Gildea (appointed 16<sup>th</sup> September 2025)  
Ms C. Grieve (resigned 8<sup>th</sup> September 2025)  
Mr A. Kealy (resigned 8<sup>th</sup> September 2025)  
Mr P. Kehoe  
Ms A. Kilroy (resigned 8<sup>th</sup> September 2025)  
Prof M. King  
Ms A. Maguire (resigned 14<sup>th</sup> July 2025)  
Mr M. McLoughlin (appointed 16<sup>th</sup> September 2025)  
Ms N. Nagle  
Ms C. Neary (appointed 25<sup>th</sup> March 2025)  
Ms C. O'Dea (resigned 8<sup>th</sup> September 2025)  
Ms N. Saarsteiner  
Mr L. Woulfe (appointed 25<sup>th</sup> March 2025)

**Secretary:**

Ms C. O'Dea (1/1/2025 – 16/9/2025)

**DIRECTORS' REPORT**

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Mr L. Woulfe (16/9/2025 – 21/10/2025)  
Mr A. Chalke (21/10/2025 – 31/12/2025)

**POLITICAL DONATIONS**

The company did not made any political donations in the financial year (2024 - €nil).

**POST BALANCE SHEET EVENTS**

There have been no significant events affecting the company since the financial year end.

**ACCOUNTING RECORDS**

The measures that the directors have taken to secure compliance with the requirements of sections 281 to 285 of the Companies Act 2014 with regard to the keeping of accounting records, are the employment of appropriately qualified accounting personnel and the maintenance of computerised accounting systems. The company's accounting records are maintained at the company's registered office at 249 Crumlin Road, Dublin 12.

**DISCLOSURE OF INFORMATION TO AUDITORS**

In the case of each of the persons who are directors at the time the directors' report and financial statements are approved:


- A) So far as the director is aware, there is no relevant audit information of which the company's auditors are unaware; and
- B) Each director has taken all steps that ought to have been taken by the director in order to make himself/herself aware of any relevant audit information and to establish that the company's auditors are aware of that information.

**AUDITORS**

The auditors, Forvis Mazars, Chartered Accountants and Statutory Audit Firm, continue in office in accordance with Section 383(2) of the Companies Act 2014.

Approved by the Board and signed on its behalf by:

  
Michael McLoughlin  
Director

  
Paul Kehoe  
Director

Date: 19th May 2026

**DIRECTORS' RESPONSIBILITIES STATEMENT**

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The directors are responsible for preparing the directors' report and the financial statements in accordance with Irish law and regulations.

Irish company law requires the directors to prepare financial statements for each financial year. Under that law, the directors have elected to prepare the financial statements in accordance with FRS 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* issued by the Financial Reporting Council and Statement of Recommended Practice (Charities SORP (FRS 102)), issued by the Charity Commission for England and Wales, the Charity Commission for Northern Ireland and the Office of the Scottish Charity Regulator.

Under company law, the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the company as at the financial year end date and of the surplus or deficit of the company for the financial year and otherwise comply with the Companies Act 2014.

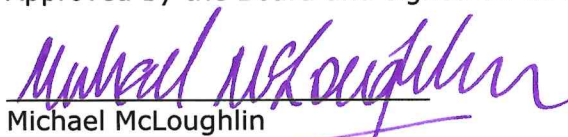
In preparing those financial statements, the directors are required to:

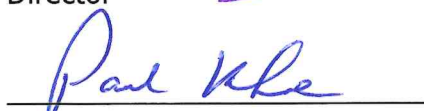
- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether the financial statements have been prepared in accordance with the applicable accounting standards, identify those standards, and note the effect and the reasons for any material departure from those standards; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

The directors are responsible for ensuring that the company keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the company, enable at any time the assets, liabilities, financial position and surplus or deficit of the company to be determined with reasonable accuracy, enable them to ensure that the financial statements and directors' report comply with the Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The directors are responsible for the maintenance and integrity of the corporate and financial information included on the company's website. Legislation in Ireland governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Approved by the Board and signed on its behalf by:

  
Michael McLoughlin  
Director

  
Paul Kehoe  
Director

Date: 19<sup>th</sup> May 2026

**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF  
BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**Report on the audit of the financial statements**

***Opinion***

We have audited the financial statements of Brainwave-The Irish Epilepsy Association T/A Epilepsy Ireland for the year ended 31 December 2025, which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and the related notes, including the summary of significant accounting policies set out in note 3. The financial reporting framework that has been applied in their preparation is Irish Law and FRS 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland issued in the United Kingdom by the Financial Reporting Council (FRS 102)*.

In our opinion the financial statements:

- give a true and fair view of the assets, liabilities and financial position of the company as at 31 December 2025 and of its results for the year then ended;
- have been properly prepared in accordance with FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland; and
- have been properly prepared in accordance with the requirements of the Companies Act 2014.

***Basis for opinion***

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report.

We are independent of the Company in accordance with the ethical requirements that are relevant to our audit of financial statements in Ireland, including the Ethical Standard for Auditors (Ireland) issued by the Irish Auditing and Accounting Supervisory Authority (IAASA), and we have fulfilled our other ethical responsibilities in accordance with these requirements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

***Conclusions relating to going concern***

In auditing the financial statements, we have concluded that the directors' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Company's ability to continue as a going concern for a period of at least twelve months from the date when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the directors with respect to going concern are described in the relevant sections of this report.

**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF  
BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

***Other information***

The directors are responsible for the other information. The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

***Opinions on other matters prescribed by the Companies Act 2014***

In our opinion, based on the work undertaken in the course of the audit, we report that:

- the information given in the directors' report for the financial year for which the financial statements are prepared is consistent with the financial statements;
- the directors' report has been prepared in accordance with applicable legal requirements;
- the accounting records of the Company were sufficient to permit the financial statements to be readily and properly audited; and
- the financial statements are in agreement with the accounting records.

We have obtained all the information and explanations which, to the best of our knowledge and belief, are necessary for the purposes of our audit.

***Matters on which we are required to report by exception***

Based on the knowledge and understanding of the Company and its environment obtained in the course of the audit, we have not identified any material misstatements in the directors' report.

The Companies Act 2014 requires us to report to you if, in our opinion, the requirements of any of Sections 305 to 312 of the Act, which relate to disclosures of directors' remuneration and transactions are not complied with by the Company. We have nothing to report in this regard.

**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF  
BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**Respective responsibilities**

***Responsibilities of directors for the financial statements***

As explained more fully in the directors' responsibilities statement set out on page 36, the directors are responsible for the preparation of the financial statements in accordance with the applicable financial reporting framework that give a true and fair view, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

***Auditor's responsibilities for the audit of the financial statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (Ireland) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Irish Auditing and Accounting Supervisory Authority's website at: [http://www.iaasa.ie/getmedia/b2389013-1cf6-458b-9b8f-a98202dc9c3a/Description\\_of\\_auditors\\_responsibilities\\_for\\_audit.pdf](http://www.iaasa.ie/getmedia/b2389013-1cf6-458b-9b8f-a98202dc9c3a/Description_of_auditors_responsibilities_for_audit.pdf). This description forms part of our auditor's report.

**The purpose of our audit work and to whom we owe our responsibilities**

Our report is made solely to the Company's members, as a body, in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the Company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Company and the Company's members, as a body, for our audit work, for this report, or for the opinions we have formed.



**Aedin Morkan**

**for and on behalf of Forvis Mazars**

**Chartered Accountants & Statutory Audit Firm**

**Harcourt Centre**

**Block 3**

**Harcourt Road**

**Dublin 2**

**Date: 28 May 2026**

**BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**STATEMENT OF FINANCIAL ACTIVITIES  
(INCORPORATING INCOME AND EXPENDITURE ACCOUNT)  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

	<i>Note</i>	<b>Restricted Funds 2025 €</b>	<b>Unrestricted Funds 2025 €</b>	<b>Total Funds 2025 €</b>	<b>Restricted Funds 2024 €</b>	<b>Unrestricted Funds 2024 €</b>	<b>Total Funds 2024 €</b>
<b>INCOME FROM:</b>							
Donations and Legacies	4	255,395	680,060	935,455	74,381	544,710	619,091
Charitable Activities	5	924,336	220,745	1,145,081	917,860	241,532	1,159,392
Other Trading Activities	6	17,336	177,117	194,453	30,403	115,212	145,615
Interest Income	7	-	23,469	23,469	-	20,768	20,768
Other Income	8	-	26,082	26,082	-	24,872	24,872
<b>Total</b>		<b>1,197,067</b>	<b>1,127,473</b>	<b>2,324,540</b>	<b>1,022,644</b>	<b>947,094</b>	<b>1,969,738</b>
<b>EXPENDITURE ON:</b>							
Charitable activities	9(a)	1,169,173	524,143	1,693,316	1,071,091	404,350	1,475,441
Raising funds	10	9,660	361,814	371,474	16,004	291,696	307,700
<b>Total</b>		<b>1,178,833</b>	<b>885,957</b>	<b>2,064,790</b>	<b>1,087,095</b>	<b>696,046</b>	<b>1,783,141</b>
<b>NET (EXPENDITURE)/ INCOME</b>							
Taxation	11	-	-	-	-	-	-
Transfer between funds	21	214,106	(214,106)	-	58,282	(58,282)	-
<b>Net movement in funds for financial year</b>	21	<b>232,340</b>	<b>27,410</b>	<b>259,750</b>	<b>(6,169)</b>	<b>192,766</b>	<b>186,597</b>
<b>Total funds brought forward</b>	21	<b>118,938</b>	<b>1,677,383</b>	<b>1,796,321</b>	<b>125,107</b>	<b>1,484,617</b>	<b>1,609,724</b>
<b>Total funds carried forward</b>	21	<b>351,278</b>	<b>1,704,793</b>	<b>2,056,071</b>	<b>118,938</b>	<b>1,677,383</b>	<b>1,796,321</b>

There are no recognised gains or losses other than the income and expenditure as stated above for the two financial years.

All income and expenditure derive from continuing activities.

The notes on pages 43 to 59 form part of these financial statements.

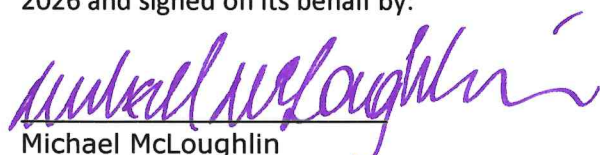
**BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

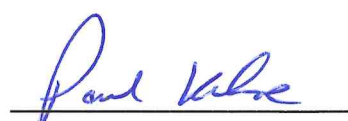
**STATEMENT OF CASH FLOWS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

	<i>Note</i>	<b>2025</b> €	2024 €
<b>Fixed Assets</b>			
Tangible assets	14	<b>121,818</b>	115,955
<b>Non-current Assets</b>			
Investments maturing in more than one year	15	<b>122,400</b>	344,559
<b>Current Assets</b>			
Short-term investments	15	<b>1,222,895</b>	770,424
Debtors	16	<b>149,479</b>	174,579
Cash at bank and in hand	17	<b>670,345</b>	658,447
		<b>2,042,719</b>	1,603,450
<b>Current Liabilities</b>			
Creditors: Amounts falling due within one year	18	<b>(230,866)</b>	(267,643)
<b>Net Current Assets</b>		<b>1,811,853</b>	1,335,807
<b>TOTAL NET ASSETS</b>		<b>2,056,071</b>	1,796,321
<b>FUNDS OF THE CHARITY:</b>			
Restricted funds	21	<b>351,278</b>	118,938
Unrestricted funds			
- Operational Reserve	21	<b>1,026,369</b>	1,097,165
- Designated funds	21	<b>678,424</b>	580,218
<b>TOTAL FUNDS</b>		<b>2,056,071</b>	1,796,321

The notes on pages 43 to 59 form part of these financial statements.

The financial statements were approved and authorised for issue by the Board of Directors on the 19th May 2026 and signed on its behalf by:

  
Michael McLoughlin  
Director

  
Paul Kehoe  
Director

**BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**BALANCE SHEET  
AS AT 31 DECEMBER 2025**

**RECONCILIATION OF NET INCOME TO CASH USED IN ALL ACTIVITIES**

	<i>Note</i>	<b>2025</b> €	2024 €
Net income for the year		<b>259,750</b>	186,597
<i>Adjustments for:</i>			
Depreciation	14	<b>15,385</b>	13,601
Decrease in debtors		<b>25,100</b>	72,288
(Decrease)/increase in creditors		<b>(36,776)</b>	24,985
<b>Net cash flows from operating activities</b>		<b>263,459</b>	297,471
<b>Cash flows from investing activities</b>			
Purchase of tangible assets	14	<b>(21,248)</b>	(7,010)
Interest gains from short-term investments			(2,029)
Proceeds from matured short-term investments		<b>222,158</b>	120,000
Purchase of short-term investments		<b>(452,471)</b>	(121,200)
<b>Cash used in investing activities</b>		<b>(251,561)</b>	(10,239)
<b>Change in cash at bank and in hand during the year</b>		<b>11,898</b>	287,232
Cash at bank or in hand at the beginning of the year		<b>658,447</b>	371,215
<b>Cash and cash equivalents at end of year</b>		<b>670,345</b>	658,447
<b>Reconciliation to cash at bank and in hand:</b>			
Cash at bank and in hand		<b>670,345</b>	658,447

**1. GENERAL INFORMATION**

Brainwave-The Irish Epilepsy Association T/A Epilepsy Ireland is a company incorporated in Ireland under the Companies Act 2014. The address of the registered office is 249 Crumlin Road, Dublin 12. The nature of the company's operations and its principal activities are set out in the Directors' Report on pages 3 to 35. In accordance with Section 1180(8) of the Companies Act, 2014, the company is exempt from including the word "Limited" in its name. The company is limited by guarantee and has no share capital. Accordingly, neither the Directors nor the Secretary have shares or any other financial interests in the company. The company is a public benefit entity. In prior years companies not trading for gain for the members were not within the scope of company law requirements with regard to formats and content of financial statements which applied to for profit companies thus permitting the adoption of a format appropriate to a charity. Accordingly, the company adopted and reported its performance in accordance with the format provided for in the Charities SORP and in particular reports its performance for the financial year in the format of the SORP's Statement of Financial Activities (SOFA).

The principal activities of the company are disclosed on page 3 of the Directors' report.

**2. STATEMENT OF COMPLIANCE**

The financial statements have been prepared in accordance with FRS102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" (FRS102).

**3. ACCOUNTING POLICIES**

The following accounting policies are applied consistently in dealing with items which are considered material in relation to the company's financial statements:

*3.1 Basis of Preparation*

The financial statements have been prepared under the historical cost convention, modified to include certain items at fair value, and in accordance with the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" in accordance with the Financial Reporting Standard applicable in the UK (which has been recognised as best practice for financial reporting by charities in Ireland) and Republic of Ireland (FRS 102), issued by the Financial Reporting Council, and the Companies Act 2014.

The functional currency of Brainwave-The Irish Epilepsy Association T/A Epilepsy Ireland is considered to be euro because that is the currency of the primary economic environment in which the company operates.

*3.2 Income*

Income is recognised when the Company has entitlement to the funds, any performance conditions attached to the item(s) of income have been met, it is probable that the income will be received, and the amount can be measured reliably. Income is deferred where the charity is limited by specific performance related conditions that are evident in the funding agreement, where there is a specification of a time period that limits the charity's ability to recognise the income until it has performed an activity and when there are specific terms or conditions within an agreement that have not been met and are not within the control of the charity at year end.

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

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**3. ACCOUNTING POLICIES (continued)**

*3.2 Income (continued)*

*(a) Grants*

Income from government and other grants, whether capital grants or revenue grants, is recognised when the Company has entitlement to the funds, any performance conditions attached have been met, it is probable that the income will be received, and the amount can be measured reliably.

*(b) Legacies*

For legacies, entitlement is taken as the earlier of the date on which either the Company is aware that probate has been granted, the estate has been finalised, and notification has been made by the executor(s) to the Company that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Company or the company is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

*(c) Donations*

Funds from public donations and other income generated through fundraising events are recorded upon receipt into our account or fundraising platforms.

As with many similar charitable organisations, independent groups from time to time organise fundraising activities. However, as amounts collected this way are outside the control of the company, they are not included in the financial statements until received by the company. Donations in kind represent goods or services provided to the charity free of charge. Where valuation can be measured with reasonable certainty, donations in kind are recognised in full as income in the year of receipt. Donations are valued at the cost to the donor or the amount normally chargeable by the donor for the goods or services provided. If such a valuation is not available, reasonable prevailing market rates are used. A matching expenditure is recognised when the goods or services are received.

*(d) Training income*

Training Income is recognised when the Company has entitlement to the funds once the service has been provided.

*(e) Interest Income*

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the Company. This is normally upon notification of the interest paid or payable by the bank.

*(f) Deferred Income*

Income is deferred where the charity is limited by specific performance related conditions that are evident in the funding agreement, where there is a specification of a time period that limits the charity's ability to recognise the income until it has performed an activity and when there are specific terms or conditions within an agreement that have not been met and are not within the control of the charity at year end.

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

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**3. ACCOUNTING POLICIES (continued)**

*3.3 Fund Accounting*

The following funds are operated by the Charity:

*General Funds - Operational Reserve*

General Funds represent amounts which are expendable at the discretion of the Board of Directors in furtherance of the objective of the charity which have not been designated for other purposes. Such funds may be held to finance working capital or capital expenditure.

*Designated Funds*

Designated funds are unrestricted funds earmarked by the Board of Directors for particular purposes.

*Restricted Funds*

Restricted funds represent income, which has been received and recognised in the financial statements, which is subject to specific restrictions imposed by the donors or grant making institution.

*3.4 Expenditure*

Expenditure is recognised when a legal or constructive obligation exists as a result of a past event, a transfer of economic benefits is required in settlement and the amount of the obligation can be reliably measured.

*Charitable activities*

Resources expended on charitable activities comprise all the resources applied by the Company in undertaking the work to meet its charitable objectives. This includes the direct costs of undertaking these activities and the support costs incurred to enable these activities to be undertaken. All costs of charitable activities are recognised on an accruals basis.

*Fundraising activities*

The cost of fundraising activities comprises costs incurred in fundraising, including the cost of promotional materials, staff costs, administration costs, governance costs and an allocation of support costs. All costs of fundraising are recognised on an accruals basis.

*Allocation of support costs*

Support costs are incurred on those functions that assist the work of the Company but do not directly undertake charitable activities. Support costs are analysed between cost of raising funds and expenditure on charitable activities. Where costs cannot be directly attributed, they are allocated in proportion to the benefit received.

*3.5 Tangible Fixed Assets and Depreciation*

Tangible Fixed assets are stated at cost less accumulated depreciation. Depreciation is calculated to write off the cost of the fixed assets over their useful lives at the following annual rates.

Premises	:	1% straight line
Fixtures and fittings	:	20% straight line
Computer and office equipment	:	33.33% straight line

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

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**3. ACCOUNTING POLICIES (continued)**

The carrying values of tangible assets are reviewed annually for impairment if events or changes in circumstances indicate the carrying amount may not be recoverable.

*3.6 Short-term investments*

Short-term investments are included on the Balance Sheet at their fair value. Investments are classified as current assets on the Balance Sheet as they can be converted to cash within three months. The primary investment objectives are to:

- Provide a stable source of liquidity and financial support for Epilepsy Ireland so that it can achieve its mission into the future.
- Attempt to maintain the purchasing power of the reserves in real terms.
- Maintain a low risk profile by limiting investment to Fixed Income or Fixed income-like investments. All investment income is treated as unrestricted income.

*3.7 Debtors*

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discount.

*3.8 Cash at bank and in hand*

Cash at bank and in hand are basic financial assets and include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts.

*3.9 Creditors and Provisions*

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discount due.

*3.10 Retirement benefits*

Retirement benefits for certain employees are funded by contributions from the company and the employees. Payments are made to a pension trust which is financially separate from the company. These payments are included in expenditure in the year in which they are paid. The scheme is a defined contribution scheme.

*3.11 Critical Accounting judgements and key sources of estimation uncertainty*

In the application of the company's accounting policies, which are described above, the directors are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates. The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period or in the period of the revision and future periods if the revision affects both current and future periods.

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

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**3. ACCOUNTING POLICIES (continued)**

Judgements and estimates are continually evaluated and are based on historical experiences and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial are discussed below.

*(a) Going Concern*

The directors have prepared budgets and cash flows for a period of at least twelve months from the date of the approval of the financial statements which demonstrate that there is no material uncertainty regarding the company's ability to meet its liabilities as they fall due, and to continue as a going concern. The key judgement applied in the preparation of budgets and cash flows is that considering the analysis above of financial performance pg. 28, the funding and fundraising environment, current risks and uncertainties, our current forecasts and projections, and the reserves held by the charity, the Board has a reasonable expectation that there are adequate resources to operate within its current cash flows and reserves for the foreseeable future. Therefore, the Board continues to adopt the going concern basis of accounting in preparing the annual financial statements. Accordingly, these financial statements do not include any adjustments to the carrying amount and classification of assets and liabilities that may arise if the company was unable to continue as a going concern.

*(b) Establishing useful economic lives of tangible fixed assets*

The company reviews annually the estimated useful lives of tangible fixed assets based on the asset's expected utilisation, market demands and future technological development. It is possible that the factors mentioned may change in the future, which could cause a change in estimated useful lives.

There were no changes in the estimated useful lives of tangible assets during 2025.

**BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

**4. DONATIONS AND LEGACIES**

	Restricted funds €	Unrestricted funds €	Total 2025 €	Total 2024 €
Collections	-	111,475	<b>111,475</b>	116,847
Donations	124,265	556,764	<b>681,029</b>	321,139
Donations In Kind	11,242	-	<b>11,242</b>	17,112
Memberships	-	8,321	<b>8,321</b>	6,493
Legacies	119,888	3,500	<b>123,388</b>	157,500
	<b>255,395</b>	<b>680,060</b>	<b>935,455</b>	<b>619,091</b>

Income received is primarily from the Republic of Ireland.

Restricted In-Memory donations of €380 were received in 2025 to the Louise Young Memorial Fund. This restricted fund supports our scheme to reimburse the cost of seizure-monitoring devices for hospital-referred patients. See note 21 for further details.

In accordance with our policy on working with pharmaceutical & medical device industries, Epilepsy Ireland discloses all contributions from this sector. In 2025, we received the following contributions which are included in restricted donations:

- UCB Biopharma SRL; €50,000 to support seizure first-aid awareness campaign and seizure-safe schools campaign.
- Angelini Pharma; €58,902 grant to fund the Youth Resource Officer role.
- Neuraxpharm Ireland; €10,000 towards the cost of providing our training services.
- Jazz Pharmaceuticals UK Limited; €4,983 grant towards producing and editing an educational video for SUDEP Action Day.

A non-cash, in-kind donation of €11,242 received from Connelly Partners is included as restricted income, representing a donated service in relation to the development and promotion of the International Epilepsy Day awareness campaign.

**BRAINWAVE-THE IRISH EPILEPSY ASSOCIATION  
T/A EPILEPSY IRELAND**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

**5. INCOME FROM CHARITABLE ACTIVITIES**

<b>Grant Income</b>			<b>Restricted funds</b>	<b>Unrestricted funds</b>	<b>Total 2025</b>	<b>Total 2024</b>
<b>Grantor</b>	<b>Grant Name</b>	<b>Purpose</b>	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>
HSE	CHO 1	Service Agreement	49,403	-	<b>49,403</b>	47,288
HSE	CHO 2	Service Agreement	4,163	-	<b>4,163</b>	3,800
HSE	CHO 3	Service Agreement	22,045	-	<b>22,045</b>	20,423
HSE	CHO 4	Service Agreement	120,348	-	<b>120,348</b>	111,603
HSE	CHO 5	Service Agreement	51,095	-	<b>51,095</b>	45,813
HSE	CHO 7	Service Agreement	521,920	-	<b>521,920</b>	483,997
HSE	CHO 7	National Lottery	-	-	-	5,000
HSE	CHO 8	Service Agreement	40,193	-	<b>40,193</b>	37,224
HSE	WRC Funding	Service Agreement	30,543	-	<b>30,543</b>	72,719
Pobal	SSNO	Salaries and assoc. costs	84,626	-	<b>84,626</b>	84,993
			<b>924,336</b>	<b>-</b>	<b>924,336</b>	<b>912,860</b>
<b>Non-Grant Income</b>						
BM Training Programme			-	216,775	<b>216,775</b>	228,765
Other Income Generating Services			-	3,760	<b>3,760</b>	11,517
Other Grants			-	210	<b>210</b>	6,250
<b>Total Non-Grant Income</b>			<b>-</b>	<b>220,745</b>	<b>220,745</b>	<b>246,532</b>
<b>Total Income from Charitable Activities</b>			<b>924,336</b>	<b>220,745</b>	<b>1,145,081</b>	<b>1,159,392</b>

Epilepsy Ireland is compliant with relevant Circulars, including Circular 44/2006 "Tax Clearance Procedures Grants, Subsidies and Similar Type Payments".

**6. OTHER TRADING ACTIVITIES**

	<b>Restricted funds</b>	<b>Unrestricted funds</b>	<b>Total 2025</b>	<b>Total 2024</b>
	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>
Raffles and Lotteries	17,336	10,885	<b>28,221</b>	42,668
Campaigns and Appeals	-	20,226	<b>20,226</b>	2,567
Fundraising Events	-	146,006	<b>146,006</b>	100,380
	<b>17,336</b>	<b>177,117</b>	<b>194,453</b>	<b>145,615</b>

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**7. INTEREST INCOME**

	<b>Restricted funds</b>	<b>Unrestricted funds</b>	<b>Total 2025</b>	<b>Total 2024</b>
	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>
Interest Income	-	23,469	<b>23,469</b>	20,768
	-	23,469	<b>23,469</b>	20,768

**8. OTHER INCOME**

	<b>Restricted funds</b>	<b>Unrestricted funds</b>	<b>Total 2025</b>	<b>Total 2024</b>
	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>
Miscellaneous Income	-	26,082	<b>26,082</b>	24,872
	-	26,082	<b>26,082</b>	24,872

**9(a) EXPENDITURE ON CHARITABLE ACTIVITIES**

<b>Activity</b>	<b>Activities Undertaken Directly</b>	<b>Grant funding of activities</b>	<b>Support costs (Note 9(b))</b>	<b>Total 2025</b>	<b>Total 2024</b>
	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>
Information & support	195,118	-	684,727	<b>879,845</b>	729,511
Training & education	2,629	-	348,314	<b>350,943</b>	300,761
Awareness	103,999	-	178,567	<b>282,566</b>	235,877
Advocacy	-	-	127,106	<b>127,106</b>	112,621
Research	1,146	20,300	31,410	<b>52,856</b>	96,671
	<b>302,892</b>	<b>20,300</b>	<b>1,370,124</b>	<b>1,693,316</b>	<b>1,475,441</b>

<b>Activity</b>	<b>Restricted funds</b>	<b>Unrestricted funds</b>	<b>Total 2025</b>	<b>Total 2024</b>
	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>
Information & support	621,974	257,871	<b>879,845</b>	729,511
Training & education	252,741	98,202	<b>350,943</b>	300,761
Awareness	174,527	108,039	<b>282,566</b>	235,877
Advocacy	90,527	36,579	<b>127,106</b>	112,621
Research	29,404	23,452	<b>52,856</b>	96,671
	<b>1,169,173</b>	<b>524,143</b>	<b>1,693,316</b>	<b>1,475,441</b>

Awareness expenditure includes a non-cash donated service from Connolly Partners in relation to the development and promotion of the International Epilepsy Day awareness campaign (see Note 4).

**NOTES TO THE FINANCIAL STATEMENTS  
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**9(b) ANALYSIS OF SUPPORT COSTS AND GOVERNANCE COSTS**

<b>Charitable activities Charge for financial year</b>	<b>2025</b>	<b>2024</b>	<b>Basis of allocation</b>
	<b>€</b>	<b>€</b>	
Governance costs	<b>42,042</b>	40,522	No. Activities
Wages & Salaries	<b>1,110,159</b>	966,634	Direct costs
Information Technology	<b>25,626</b>	20,142	No. Activities
Recruitment/Training other staff costs	<b>16,263</b>	10,774	Direct costs
Travel & Subsistence	<b>28,263</b>	21,643	Direct costs
Rent and Building mgmt. services	<b>87,017</b>	69,563	Direct cost
Office Expenses	<b>45,369</b>	36,371	Direct cost
Depreciation	<b>15,385</b>	13,601	
<b>Total</b>	<b>1,370,124</b>	1,179,250	

**10(a) EXPENDITURE ON RAISING FUNDS**

	<b>Activities Undertaken Directly</b>	<b>Support costs (Note 10(b))</b>	<b>Total 2025</b>	<b>Total 2024</b>
	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>
Expenditure on raising funds	104,468	267,006	<b>371,474</b>	307,700
	<b>104,468</b>	<b>267,006</b>	<b>371,474</b>	<b>307,700</b>
	<b>Restricted funds</b>	<b>Unrestricted funds</b>	<b>Total 2025</b>	<b>Total 2024</b>
	<b>€</b>	<b>€</b>	<b>€</b>	<b>€</b>
Raising donations, legacies, corporate donations & regular giving	-	-	-	200
Fundraising activities – campaigns, appeals and events	9,370	95,098	<b>104,468</b>	82,992
Support costs (Note 10(b))	290	266,716	<b>267,006</b>	224,508
	<b>9,660</b>	<b>361,814</b>	<b>371,474</b>	<b>307,700</b>

**10(b) ANALYSIS OF SUPPORT COSTS AND GOVERNANCE COSTS**

<b>Fundraising activities Charge for financial year</b>	<b>2025</b>	<b>2024</b>	<b>Basis of allocation</b>
	<b>€</b>	<b>€</b>	
Governance costs	11,440	9,511	No. Activities
Wages & Salaries	221,429	200,732	Direct cost
Information Technology	7,543	4,740	No. Activities
Recruitment/Training and other staff costs	18,138	4,837	Direct cost
Travel & Subsistence	745	550	Direct cost
Office Expenses	7,711	4,138	Direct cost
<b>Total</b>	<b>267,006</b>	224,508	

**NOTES TO THE FINANCIAL STATEMENTS  
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**11. TAXATION**

No charge to taxation arises due to the charitable status of the company. The company is registered as a charity with the Revenue Commissioners under CHY No. 6170.

**12. EMPLOYEES AND REMUNERATION**

	<b>2025</b>	2024
Average number of persons employed	26	23
Service delivery	16	14
Fundraising	4	4
Administration	4	3
Training	2	2
	<u>26</u>	<u>23</u>
<b>The staff costs comprise:</b>	<b>€</b>	<b>€</b>
Information & Support	467,579	401,054
Training & Education	203,853	190,206
Awareness	124,510	101,517
Advocacy	108,828	93,841
Research	39,811	19,806
Administration	161,782	156,806
Fundraising	220,588	199,916
Other Compensation Costs	4,637	4,220
	<u>1,331,588</u>	<u>1,167,366</u>
<b>Included in the above are costs as follows:</b>		
Employer's PRSI	125,921	105,924
Contributions to pension scheme (Note 23)	<u>72,303</u>	<u>65,007</u>

The number of employees whose salaries (excluding employer pension contributions) were greater than €60,000 were as follows:

	<b>2025</b>	2024
€60,001 - €70,000	3	2
€70,001 - €80,000	1	1
€80,001 - €90,000	-	-
€90,001 - €100,000	1	1

The total remuneration for key management personnel for the financial year amounted to €212,000 (2024: €207,618). Remuneration includes salaries, employer PRSI and pension contributions. Key management personnel of the Company comprise the Chief Executive Officer and the Director of Services.

**NOTES TO THE FINANCIAL STATEMENTS  
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**12. EMPLOYEES AND REMUNERATION (continued)**

**Directors' remuneration and transactions:**

No remuneration or other benefits have been paid or are payable to any directors during the year. No Reimbursement for vouched expenditure was paid during the financial year (2024: €77).

**13. NET INCOME**

	<b>2025</b>	2024
	€	€
<b>The net income for the financial year is arrived at after charging/(crediting):</b>		
Directors' remuneration and emoluments	-	-
Operating Lease	21,786	24,131
Depreciation	15,385	13,601
Auditors' remuneration for external audit services	20,295	18,635
Bank deposit interest	(23,469)	(20,768)

**14. FIXED ASSETS**

	<b>Premises</b>	<b>Fixtures &amp; Fittings</b>	<b>Computers &amp; Equipment</b>	<b>Total</b>
	€	€	€	€
<b>Cost</b>				
At 1 January 2025	122,470	63,557	128,765	314,792
Additions	-	-	21,248	21,248
Disposals	-	-	-	-
<b>At 31 December 2025</b>	<b>122,470</b>	<b>63,557</b>	<b>150,013</b>	<b>336,040</b>
<b>Depreciation</b>				
At 1 January 2025	21,275	61,578	115,984	198,837
Charge for during the year	1,225	1,020	13,140	15,385
Disposals	-	-	-	-
<b>At 31 December 2025</b>	<b>22,500</b>	<b>62,598</b>	<b>129,124</b>	<b>214,222</b>
<b>Net book value</b>				
<b>At 31 December 2025</b>	<b>99,970</b>	<b>959</b>	<b>20,889</b>	<b>121,818</b>
At 31 December 2024	101,195	1,979	12,781	115,955

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**NOTES TO THE FINANCIAL STATEMENTS  
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**15. INVESTMENTS**

	<b>2025</b>	2024
	€	€
Investments maturing in more than one year	122,400	344,559
Short-term investments	1,222,895	770,424

The company holds both short-term investments and long-term investments. All funds are invested in interest-bearing deposits with financial institutions, with a notice period exceeding three months.

**16. DEBTORS: Amounts falling due within one year**

	<b>2025</b>	2024
	€	€
Trade Debtors	74,017	69,575
Prepayments	41,075	36,694
Other Debtors	34,387	68,310
	<u>149,479</u>	<u>174,579</u>

All debtors are due within 30 days from the issue date of the invoice.

**17. CASH AT BANK AND IN HAND**

	<b>2025</b>	2024
	€	€
Cash at bank and in hand	670,345	658,447
	<u>670,345</u>	<u>658,447</u>

**18. CREDITORS: Amounts falling due within one year**

	<b>2025</b>	2024
	€	€
Trade Creditors	56,916	72,870
Accruals	45,667	36,949
Deferred Income	67,044	121,910
PAYE/PRSI/USC/Pension	32,582	28,650
Other Creditors	28,657	7,264
	<u>230,866</u>	<u>267,643</u>

The terms of trade creditors vary between on demand and 30 days. No interest is payable on trade creditors.

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2025**

**19. DEFERRED INCOME**

	<b>2025</b>	2024
	€	€
Balance at beginning of year	121,910	157,634
Amount received during the year	53,938	48,901
Amount released to SOFA during the year	(108,804)	(84,625)
Balance at end of year	<u>67,044</u>	<u>121,910</u>

Total deferred income of €67,044 comprises €10,401 relating to a restricted grant from Angelini Pharma, which will be recognised as income as the related performance conditions are satisfied. It also includes HSE funding of €43,493 invoiced in advance, training income of €6,680 received in advance, and membership fee income of €6,470 relating to the second and third years of membership. The membership deferral is based on an estimate, assuming an average membership term of three years.

**20. FINANCIAL INSTRUMENTS**

The carrying value of the company's financial assets and liabilities are summarised by category below:

	<b>2025</b>	2024
	€	€
<b>Financial assets</b>		
<i>Measured at undiscounted amounts receivable</i>		
· Debtors (Note 16)	<u>149,479</u>	<u>174,579</u>
<b>Financial liabilities</b>		
<i>Measured at undiscounted amount payable</i>		
· Creditors (excluding deferred income and PAYE/PRSI/USC pension) (Note 18)	<u>131,241</u>	<u>117,083</u>

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**NOTES TO THE FINANCIAL STATEMENTS  
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**21. ANALYSIS OF FUNDS**

	Opening Balance 1 January 2025	Income	Expenditure	Transfers	Closing Balance 31 Dec 2025
<b>Restricted Funds</b>	€	€	€	€	€
Health Service Executive	14,875	839,710	(916,316)	76,606	<b>14,875</b>
SSNO Funding (Pobal)	-	84,626	(84,626)	-	-
Angelini Funding	-	58,902	(58,902)	-	-
Donated Services	-	11,242	(11,242)	-	-
Restricted Donations	2,960	64,983	(67,943)	-	-
Other Grants	18,527	-	(10,087)	-	<b>8,440</b>
Louise Young Memorial Fund	82,576	380	(12,381)	-	<b>70,575</b>
Research Funding Scheme	-	17,336	(17,336)	-	-
Restricted legacy - Epilepsy research	-	119,888	-	137,500	<b>257,388</b>
	<b>118,938</b>	<b>1,197,067</b>	<b>(1,178,833)</b>	<b>214,106</b>	<b>351,278</b>
<b>Unrestricted funds</b>	€	€	€	€	€
<b>Operational Reserve</b>	1,097,165	740,898	(734,964)	(76,730)	<b>1,026,369</b>
<b>Designated Funds</b>					
<i>Premises reserve</i>	100,000	-	(14,666)	-	<b>85,334</b>
<i>Research Provision</i>	150,000	-	(12,624)	(137,376)	-
<i>Research Officer</i>	90,000	31,130	(19,683)	-	<b>101,447</b>
<i>Awareness Campaigns</i>	100,000	-	(34,879)	-	<b>65,121</b>
<i>Strategic Plan Implementation</i>	140,218	-	(40,715)	-	<b>99,503</b>
<i>Expansion of Services</i>	-	355,446	(28,427)	-	<b>327,019</b>
	<b>580,218</b>	<b>386,576</b>	<b>(150,994)</b>	<b>(214,106)</b>	<b>678,424</b>
<b>Total Unrestricted Funds</b>	<b>1,677,383</b>	<b>1,127,474</b>	<b>(885,958)</b>	<b>-</b>	<b>1,704,793</b>
<b>Total Funds</b>	<b>1,796,321</b>	<b>2,324,541</b>	<b>(2,064,791)</b>	<b>-</b>	<b>2,056,071</b>

HSE-funded services are only partially funded and €76,606 (2024: €58,282) has been transferred from the unrestricted Operational Reserve to meet the full cost of providing the services.

€14,875 of HSE funds (2024: €14,875) is made up of National Lottery grants which are being carried forward for use in 2026.

Other restricted grants totalling €8,440 (2024: €18,527), including €5,000 from the Hospital Saturday fund are also carried forward to be utilised in 2026.

**NOTES TO THE FINANCIAL STATEMENTS  
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**21. ANALYSIS OF FUNDS (continued)**

The Louise Young Memorial Fund balance carried forward of €70,575 (2024: €82,576) relates to total funds raised between 2021 and 2025 specifically for the purpose of providing a new service to reimburse the cost of seizure-monitoring devices for hospital-referred patients. This service was launched in 2024.

The Board has designated reserves for utilisation in special strategic activities including undertaking epilepsy awareness campaigns; providing funding for current and future research projects; funding the Research Officer role; and for upgrading/relocating the charity's head office in Crumlin. The Board also maintains a reserve to facilitate implementation of the organisation's Strategic Plans.

In 2025, the Premises Reserve was reduced by €14,666, representing expenditure incurred on minor improvements to the head office premises during the year. The Research Reserve was reduced by €12,624 to meet part of the cost of research grants provided in the year. The remaining balance of €137,376 has been undesignated by the Board, and an additional restricted legacy of €119,888 was received to fund anticipated future research investments. The total remaining restricted legacy amounts to €257,388.

The Research Officer Reserve was reduced by €19,683 to support staff costs incurred in 2025. An amount of €31,130 was added to this reserve from income received from corporate donations in 2025 to sustain the role for a further two years.

The Awareness reserve was reduced by €34,879, representing costs associated with International Epilepsy Day campaign. The Strategic Plan implementation reserve was reduced by €40,715, representing the cost of a new staff role approved by the board in December 2023; costs associated with scoping the organisation's CRM needs; and costs associated with the implementation of a new finance system.

The Board also approved the creation of a new designated fund of €355,446 to support the expansion of community support services and for sustaining the Youth Resource Officer post until the end of 2028. This fund was reduced by €28,427 in 2025 to meet associated staff costs.

**NOTES TO THE FINANCIAL STATEMENTS  
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**22. ANALYSIS OF NET ASSETS BETWEEN FUNDS**

	<b>Restricted funds</b>	<b>Unrestricted funds</b>	<b>Closing Balance</b>
	€	€	€
Fixed Assets	-	121,818	121,818
Non-current assets	-	122,400	122,400
Current Assets	418,322	1,624,397	2,042,719
Liabilities	(67,044)	(163,822)	(230,866)
	<u>351,278</u>	<u>1,704,793</u>	<u>2,056,071</u>

**In respect of prior year**

	<b>Restricted funds</b>	<b>Unrestricted funds</b>	<b>Closing Balance</b>
	€	€	€
Fixed Assets	-	115,955	115,955
Non-current assets	-	344,559	344,559
Current Assets	240,848	1,362,602	1,603,450
Liabilities	(121,910)	(145,733)	(267,643)
	<u>118,938</u>	<u>1,677,383</u>	<u>1,796,321</u>

**23. RETIREMENT BENEFITS**

The company operates a defined contribution scheme. The assets of the scheme are held separately from those of the company in an independently administered fund. The pension cost, €72,303 (2024: €65,007) is charged to the Statement of Financial Activities in the financial year in which it arises. There was €11,716 payable at the financial year-end (2024: €10,578).

**24. CONSTITUTION**

The company is limited by guarantee and does not have a share capital. Every member of the company undertakes, if necessary, during the time they are a member or within one year after they cease to be a member, to contribute to the assets of the company an amount not exceeding €1.

**25. COMMITMENTS**

The company has committed to spending the following on research projects in the coming years:

	<b>2025</b>	<b>2024</b>
	€	€
Within one year	22,600	9,000
Between two and five years	67,800	-
Total	<u>90,400</u>	<u>9,000</u>

**NOTES TO THE FINANCIAL STATEMENTS  
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**25. COMMITMENTS (continued)**

**Operating Lease Commitments**

Total future minimum lease payments under non-cancellable operating leases are as follows:

	<b>2025</b>	2024
	€	€
Within one year	16,396	24,131
Between one and two years	-	16,396
Total	<u>16,396</u>	<u>40,527</u>

**26. RELATED PARTY TRANSACTIONS**

During the financial year, transactions took place between the company and Camphill Communities of Ireland. This transaction involved the provision of training services for €2,100. A director of the company until September 8<sup>th</sup> 2025, Ambrose Kealy, also serves as a director of Camphill Communities of Ireland.

During the year, the Company paid annual membership fees of approximately €600 to The Disability Federation of Ireland (DFI), an umbrella representative organisation of which a member of key management personnel served as a director. The transaction was conducted on an arm's length basis and under normal commercial terms.

The Company also paid membership fees of approximately €600 to the Neurological Alliance of Ireland (NAI), the umbrella group representing neurological charities. Another member of the management team served as a director of NAI during part of the year. The transaction was conducted on an arm's length basis and under normal commercial terms.

**27. SUBSEQUENT EVENTS**

There are no significant events subsequent to the financial year end.

**28. APPROVAL OF FINANCIAL STATEMENTS**

The financial statements were approved by the Board of Directors on 19<sup>th</sup> May 2026.

  
Michael McLoughlin  
Director

  
Paul Kehoe  
Director

