EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

REPORT OF THE TRUSTEES

AND

STATEMENT OF ACCOUNTS

FOR THE YEAR ENDED 31ST DECEMBER 2016

CHARITY NUMBER: 1159050

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LEGAL STATUS
EACH: International Association for Communication in Healthcare (EACH), originally called the European Association for Communication in Healthcare, was established in 2001 as an unincorporated entity and entered into the register of charities on 3rd November 2014 as a Charitable Incorporated Organisation (CIO). On the 14th November 2016 EACH held an AGM where the resolution to change the name of the charity was agreed and passed by the members. The resolution was accepted by the Charity Commission by email on the 9th December 2016.

TRUSTEES
Trustees are appointed and removed in accordance with the constitution.

STRUCTURE, GOVERNANCE AND MANAGEMENT
The stated aim of the CIO is the relief of sickness and the preservation of health of patients for the public benefit by the promotion of effective evidence-based patient-centred healthcare communication between patients, relatives and healthcare practitioners throughout the world.

Over 2016, membership increased from 494 to 592 individual members of the association with an associated increase from 45 to 46 countries represented worldwide. Membership fees increased to €120 including print version of our affiliated journal, Patient Education & Counselling (PEC) or €105 with online access only (with reductions for undergraduate and postgraduate students).

The decision was made in 2016 that EACH would become a predominantly Sterling based association from 2017 onwards. This is due to the association being a UK charity and therefore needing to submit accounts in Sterling each year and also to reflect that EACH is now international and no longer just a European association. Every effort will be made to ensure this transition is smooth with minimal impact to members.

EACH is governed by the steering committee and executive committee that have been constituted according to the policies and procedures of the association. All members of the executive and steering committees are trustees of the charity. The activities of the association are overseen by three major committees:
Research (through the rEACH committee)
Teaching (through the tEACH committee)
Policy and Practice (through the pEACH committee)

The steering committee consists of voting National Representatives (NR) of countries with at least five members, non-voting NRs of countries with less than five members, all members of the executive committee, the PEC journal advisor, and a representative of the American Academy on Communication in Healthcare (AACH). NRs have a deputy (DNR) who takes the role of the national representative in his/her absence.

2016 was an election year for EACH. The EACH elections were conducted electronically for the first time in 2016. Every NR stepped down from their position and was asked to re-apply. The EACH constitution states that every NR can stand for a maximum of 3 terms (serving 6 years in total). As such, three NRs stepped down and were unable to re-apply: Jette Ammentorp, Denmark; Lidia Del Piccolo, Italy; Ana Carvajal, Spain.

There are currently NRs from 21 countries, of which 2 have less than 5 members and are therefore non-voting NRs - South Africa and Nigeria. Only voting NRs and executive members are trustees of EACH.

The steering committee is the highest decision-making body of EACH and makes all decisions concerning finances, general strategy, future development etc. The steering committee meets twice a year in venues across Europe.

The executive committee consists of the President, President-Elect, Past-President, chair of rEACH, chair of tEACH, chair of pEACH and the Treasurer. The executive committee looks after the daily work and functions of the association which result from the decisions of the steering committee. The executive committee also prepares documents for the steering committee concerning strategic plans, budget planning, and finances. The executive committee meets by videoconference every 4 to 6 weeks.

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A general meeting of the members is held annually in accordance with the association's constitution. At the general meeting in Heidelberg on September 8, 2016, Sara Rubinelli from Switzerland was elected as the new President-elect and Karolien Aelbrecht from Belgium was re-elected Treasurer. New trustees will be appointed in September 2018 following the biannual election of NRs.

In all of its activities EACH respects and promotes the fundamental importance of transparency in its:
- mission and values
- governance practices
- internal and public policy practices
- financial information
- financial relationships with funding sources, both public and private
- internal and external financial control by independent audits
- financial relationships with commercial companies

In addition to the public website, there are restricted areas on the website for the membership, steering committee and executive committee, where information and documents can be posted and essential documents preserved in archives. This enables committee members to work remotely and encourages trustee participation in the charity's decision-making processes.

The general sources of funding for the charity's core activities and specific projects come from a mixture of membership fees, a guaranteed royalty from our publication partner, Elsevier, from conferences and charitable donations. EACH has an agreed policy not to accept funding from the pharmaceutical industry for any of its activities, including meetings and conferences. This is to prevent any potential conflict of interest.

The Trustees give of their time freely and the executive committee members receive only reimbursement for actual costs incurred (such as travel and accommodation).

Management of the association is provided by:
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STRATEGY
EACH is a worldwide organisation with the overall aim of promoting effective evidence-based patient-centred healthcare communication between patients, relatives and healthcare practitioners. The association is intended for all who are active in communication research, training and policy making and for patients, practitioners and students with an interest in communication in healthcare.

Our stated aims and objectives for achieving our overall aim are as follows:
- promoting the development of healthcare communication research and education to improve the quality of communication in healthcare around the world and hence improve the health outcomes of the general public
- enabling the exchange and dissemination of products of teaching and research within the community of healthcare communication researchers and teachers, to enhance the quality of communication in healthcare and thereby improve patients' and relatives' experience
- more widely disseminating knowledge about effective communication between patients, relatives and health professionals, extolling best practices and improvements in education to comply with the changing needs of health delivery and increasing moves towards a person-centred approach incorporating shared responsibility and decision making
- developing an active network of researchers, teachers and practitioners throughout the world, committed to improving the patient experience in the field of communication in healthcare
- to influence health policy related to healthcare communication
- to increase the translation of this knowledge into mainstream health organisations and bodies

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The strategy of the association has been carefully constructed to further the public benefit. Almost all members of the public will be patients at some point in their lives or be carers of members of their family who are patients. The quality of the health care that they receive and the subsequent relief of sickness or prevention of illness will depend upon the effectiveness of the communication with their health care providers. Effective healthcare communication between patients, relatives and healthcare practitioners has been demonstrated to affect the health of patients through improvements in patient satisfaction, recall, adherence, resolution of symptoms and disease outcome. Effective health care communication leads to more efficient, accurate and supportive medical care and improves the effectiveness of medical interactions and interventions. Effective health care communication not only leads to better care but to less expensive care with fewer unnecessary medical interventions and reduced inappropriate or futile treatments. Over 30 years of health care communication research has demonstrated that there are many problems in health care communication between professionals and patients and that there are increasingly evidence-based solutions to these problems. These solutions can be taught and the learning from these solutions can be retained and utilised by practitioners in their everyday practice.

RISK MANAGEMENT
The trustees confirm that they have reviewed the major risks to which the Charity is exposed and, where practicable, they have established systems to mitigate those risks.

ACTIVITIES
In order to translate the above strategies into practice, EACH undertakes the following activities:
- organises major international conferences on health care communication research and teaching to bring together the community of healthcare researchers, educators and practitioners
- provides workshops, courses and meetings on specific research and teaching components of healthcare communication for teachers and researchers
- develops and supports active networks of teachers and researchers through communication at meetings, via the internet, using web-based conferences, web-based solutions and social media
- provides a dedicated website to raise awareness and share related resources on teaching and research with the wider community of healthcare practitioners, researchers, teachers and patients
- collaborates with existing networks and associations which have similar purposes
- is affiliated with the scientific journal, Patient Education and Counselling, to disseminate results of research on health care communication
- provides grants to attend courses for researchers and teachers in countries throughout the world without established health care communication research or teaching programmes
- provides grants for young researchers to attend workshops and develop networks
- carries out site visits to establish networks, and train teachers and researchers, in countries around the world without established health care communication research and teaching programmes
- promotes best practice in health care communication to other local and national organisations
- responds to requests from government and their healthcare organisations to review key policy documents from a healthcare communication perspective

Specific committees have been established to promote networks for teaching, research and policy respectively. These committees are composed of leaders in the field and actively promote the various activities provided by the organisation to as wide a group of healthcare researchers, teachers, policy makers and practitioners as possible. Networks are established in individual countries throughout the world. When researchers, teachers, policy makers and practitioners contact the organisation, it attempts to provide bespoke advice and solutions to their teaching or research issues. It is these education, research, policy and practice activities that lead to improvements in health care communication and therefore to public benefit.

ACHIEVEMENTS AND PERFORMANCE

Conferences and courses
International conference: EACH and the American organisation AACH collaborate in organising the annual International Conferences on Communication in Healthcare (ICCH). In the even years, EACH is the main organiser of ICCH and in the odd years, AACH is the main organiser. Over 600 participants attended the last highly successful EACH-organised conference in Heidelberg in 2016 from 43 countries worldwide.

A hallmark of EACH conferences is fostering interaction and exchange among participants. By doing so, the conference provides an excellent opportunity to reach one of the key objectives of EACH: to facilitate the exchange of ideas and products of teaching and research activities across a network of individuals and institutions around the world. Our conferences capture both the research and teaching components of communication in healthcare as well as policy issues, and focus on all health professionals including doctors, nurses, pharmacists, physiotherapists, dentists, etc. The conferences are therefore of interest to trainers, teachers, health care professionals and researchers. The conferences are a mixture of plenaries, oral paper presentations, workshops, posters and symposia.

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The next EACH hosted ICCH conference will take place in Porto in 2018.

Summer event: Due to the success of the new Summer Event launched in 2015, EACH began organising the next Summer Event to take place in 2017. It will be hosted again at Regent's University in London, UK from the 4 - 6 September. It will be a 2 day event featuring high quality half-day workshops on important and exciting topics in the research and teaching of healthcare communication. This will again be connected to the rEACH Summer School where up to 12 participants can take part.

Membership drive

A membership drive was conducted to increase the membership of the organisation so that EACH is considered to be the place where researchers and teachers, throughout the world, can turn to for help and support as their natural academic home and to feel that they have a group working for them and their causes. In order to provide help and support to the wider community, EACH needs to be seen to represent the whole constituency of communication research and teaching and to be their advocates in the wider world. This new membership drive was highly successful, increasing numbers from 494 to 592 over the course of the year.

The Teaching Committee (tEACH)

tEACH is the committee of EACH that focuses on providing support, resources and sharing of expertise for communication teachers, whether about teaching, curriculum development or assessment. The aim of tEACH is to be a primary source of help for communication teachers everywhere. Since 2008, tEACH has developed and collected teaching, curriculum and assessment resources, train the trainer courses, and provided support to communication teachers throughout Europe and beyond. The committee meets twice yearly to work together on producing products and resources to support teachers of communication. Bi-annual meetings in the last year have been held in Cambridge, UK (Spring 2016) and Heidelberg, Germany (Autumn 2016). The committee at the end of 2016 comprised 41 working members representing a variety of health care disciplines and 21 different countries.

In 2015 tEACH added 11 members through a peer reviewed nomination process in order to expand the number of countries, disciplines and areas of expertise within the committee. To take advantage of this infusion of new members and build on our previous efforts, in spring of 2016 tEACH held a meeting in Cambridge to identify what this group could do to further support communication teachers. The aim of this process was to establish small, time limited working groups focused on developing tangible products that could be especially helpful for communication teachers and had not been previously addressed through prior tEACH efforts. In a two day process, which included brainstorming through a displayed thinking exercise based on input from national networks of communication teachers, the group identified several specific projects to work on over the next year. This active, participatory method elicited many inspiring ideas of which we embraced the following projects as our first priorities:

New project groups and aims:
Video bank: While videos of simulated and real patient encounters can be particularly powerful tools in teaching clinical communication skills, communication teachers often have difficulty finding appropriate videos that can be used in their teaching. The aim of this group is to begin to develop a collection of videos that will be available to EACH members to be used for communication teaching. This collection will include those videos already being used by communication teachers in their own settings and that they are willing to share. Eventually this group hopes to produce specific videos to address needs identified by communication teachers.

"Dating" site for communication teachers: Many communication teachers have identified wanting to have access to colleagues to assist and advise them in developing and enhancing their communication teaching activities. This group will work to create a database of people involved in communication teaching and/or assessment who are willing to share their expertise with others. Individual educators will be able to search this database to identify and contact colleagues with specific expertise to help address their educational programme needs.

Local courses support: Many countries do not have established evidence-based teaching programmes for the training of communication in healthcare teachers. tEACH has developed effective and evidence-based teaching courses and through this project group will produce a comprehensive framework for trainers of healthcare communication teachers to help guide the development and delivery of local courses in individual countries by local trainers under the auspices of tEACH.

Sharing evidence to support communication education: Both novice and experienced teachers can benefit from having access to the evidence that supports both the content and process of teaching communication skills in the health professions. This project group will start by surveying communication teachers about what particular educational topics would be especially helpful for them to have evidence for order do such things as develop a module or course based on solid knowledge and to convince faculty, students and key stake holders for enhancing communication teaching. Based on the results of this needs assessment, the group will begin producing summaries of evidence to support the efforts of communication teachers.

Cross cultural communication teaching: Teaching about cross cultural clinical communication has become increasingly important and challenging due to global migration and complex multi-cultural populations. This group will conduct a needs assessment of communication teachers to identify both how these issues are being addressed in healthcare curriculum and what types of resources and tools could help address challenges in teaching these topics. In response, the group will produce a portfolio and map of cross cultural teaching tools and supportive literature to be available to communication teachers as they develop and enhance curriculum focused on this important topic.

Workplace based teaching and assessment: While currently many undergraduate training programs in healthcare have substantial formal communication programmes, studies continue to demonstrate that healthcare students have difficulties in transforming the acquired competences into quality communicative behaviours in real clinical practice. The aim of this group is to collect and develop resources that enhance the transfer of skills from the classroom to the clinical workplace. Initial efforts will focus on collect teaching tools & strategies, assessment materials and research evidence within the undergraduate teaching context that describe and support the replication and imitation of the reality of clinical practice into the classroom. All quality resources found will be categorized and transformed into an online, accessible database, where teachers and researchers can find the specific resources needed to address the gaps in communication skill development. EACH members will be surveyed to identify both what types of materials would be helpful to them and their suggestions and experiences of particularly useful teaching tools and literature resources.

In addition to these new project groups, tEACH also has several continuing working subgroups whose efforts support to work of communication teachers. These subgroups and highlights of some of their ongoing work includes:

Assessment: The Assessment subgroup continues to collect communication assessment tools to be included in the searchable database as well as providing an annual course on assessment and a summary paper of general principles of communication assessment.

Courses and support for trainers: This subgroup provides annual "train the trainer" courses on What to Teach, How to Teach, Curriculum Development and Assessment (in collaboration with the Assessment group). The group is now offering a Certificate of In depth Study in Communication Skills Education in which participants apply the skills learnt in tEACH courses to a specific teaching, curriculum or assessment project with mentoring from a tEACH member. In addition, the group has provided local courses on these and related topics in a number of countries including Norway, Moldova, Ireland, Poland, South Africa, Sri Lanka and others.

Networking: The aim of this subgroup is to support the establishment and enhancement of networks of communication teachers within individual countries and healthcare disciplines. In addition to resources to support these efforts on the tEACH web pages, this subgroup is working with the research (rEACH) and policy (pEACH) subcommittees to establish mechanisms through which those involved in communication in healthcare can identify one another and share their expertise nationally and within different healthcare disciplines.

Curriculum: Ongoing efforts of this subgroup focus on evaluating and expanding the application of the Health Care Professions Core Curriculum (HPCCC), the consensus based objectives for communication curriculum, in several different countries and health care disciplines.

Teaching tools: This subgroup has spearheaded the development of the searchable database of teaching tools available on the EACH website. This group will continue to collect teaching tools from communication teachers and refine the functions of this database.

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Broader tEACH activities:
Here we highlight examples of tEACH "outreach" activities during 2016:

Heidelberg conference contributions:
- tEACH members worked together to make several significant contributions to the Heidelberg ICCH conference in September 2016 including two pre-conference courses: Workplace based communication teaching and What to Teach in communication skills education
- Pairing with colleagues program: Matching 36 "senior" colleagues willing to share their expertise with 52 "junior" colleagues who met together at designated times during the meeting.
- Networking activities: The tEACH networking group set up a public stand where attendees could learn about EACH and all its subcommittees and activities through posters, videos, written materials and interaction with EACH subcommittee members. In addition, they helped arrange national and language based network meetings during the conference.
- Workshops: Workshops facilitated by tEACH members included:
  - "Have Another Go": Enhancing the Impact of Feedback Through Re-rehearsal;
  - Experiencing and Comparing Communication Training Tools for Allied Healthcare Professionals
  - What Assessment Approach to Choose? Experiencing Different Communication Skills Assessment Formats
- Symposia: Two symposia were presented by tEACH members including:
  - Reflective Practice in Learning Communication in Healthcare
  - Student led symposium on teaching and learning
- Fringe: Let's Connect: Creative teaching approach featuring Image Theatre

National partnership projects:
tEACH has continued to initiate partnership projects in several countries to help develop and enhance communication skills curriculum and networking of communication teachers at a national level. Among these projects, two examples from 2016 include:

Australia tEACH project: In December 2016, Cancer Council Victoria, EACH and the Victorian Department of Health and Human Services partnered to deliver the inaugural Teaching Communication in Healthcare Conference and Education Program. The conference hosted over 120 national and international delegates with representatives from 22 hospitals and health organisations, 22 universities and 17 individual organisations, including research institutes, policy making organisations and peak bodies. 85% of delegates were either currently teaching or interested in teaching communication skills in healthcare. The schedule included a two day Teaching Communication in Healthcare Conference (6-7 December 2016) and a two day intensive Education Program for healthcare communication educators (8-9 December 2016). Delegates praised the "experience and enthusiasm" of the presenters and delegates throughout the conference and welcomed the practical workshops. The Conference and Education Program provided a valuable platform to drive forward an Australian network of healthcare communication educators with delegates committing to continued action by forming the Australian tEACH Network.

Moldova tEACH project: In the Moldova project in spring 2016, tEACH developed and participated in a training project in collaboration with WONCA, the World Organisation of Family Doctors with which EACH is a collaborating organization. This project focused specifically on how to teach communication skills in mental health consultations in Moldova.

Organizational structure
tEACH committee oversight and strategic planning is conducted by the Core Planning Group, which consists of a chair and deputy chair and the heads of each working subgroup, as chosen by working group members. The current tEACH membership in 2016 included 41 representatives from 21 different countries and a broad range of health care disciplines. In addition, tEACH has tried to develop a tEACH network to allow all interested EACH members to contribute to and benefit from tEACH efforts. Consideration of how this broader network can be expanded, better engaged and utilised will be a primary focus for tEACH in the coming year as well as emphasis on how all EACH members can contribute to and benefit from tEACH.

The Research Committee (rEACH)
The aim of rEACH is to promote good quality communication research within EACH and to support the development of high quality researchers. These aims can be pursued by promoting networking, quality of research, international research collaboration and encouraging the development of new young researchers

In 2016 the research committee (rEACH) underwent a radical restructure that was realised through two face to face meetings held in Ghent. The purpose of this meeting was to engage our membership and energise the working rEACH Committee. The first meeting took place at the end of 2015. Hence 2016 has been an important year for EACH to monitor the working of this Committee. It has led to the creation of 7 new project groups:

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1. Funding: concerned with providing advice and seeking collaborative funding. This group helps identify funding agencies to apply for research funding to promote the networking of health care communication research. The EU COST Action portfolio has been a specific source of funding that is attractive and appropriate for EACH to target. A proposal has been designed for submission by an active member of this group
2. Managing content of Special Interest Groups, SIGS: dealing with approvals of new SIG proposals. The activity of this sub-group is to manage the Special Interest Groups (SIGS) within rEACH and to ensure that each of them maintain a presence with regular reports and demonstration of activity. One of the issues currently is to ensure that all sections of EACH (including tEACH and pEACH) are represented in the development of the SIGs. Some of these special interests fit very well into the teaching and training field of healthcare communication and therefore there does need to be a wide dissemination and presence in the EACH organization (principally the website). There are 6 SIGS within rEACH: 1 Teaching and learning communication skills; 2 Psychophysiology; 3 Verona CoDES; 4 Oral Health; 5 yEACH; 6 Language and culture. The siting of 'yEACH' the young researchers SIG is being re-organized with a more centralized location within the EACH website to enable all members (regardless of interest in research, teaching or policy aspects of healthcare communication).
3. Communication in Healthcare Research Training: working on exploring the topics, interests and expertise available to instigate training workshops. Specific activity has been focused on on-line tools and training.
4. Database/Sharing Information: designing a searchable database of interests among members.
5. Networking: working on establishing methods of enhancing contact between researchers.
6. House of Research: creating a virtual (or actual) space for researchers to meet.
7. Structure: working on the formal procedure to adopt for the election of officers of rEACH, especially the Chair and Co-Chair.

All group leads now meet with Gerry Humphris and Myriam Deveugele via GoToMeeting conferences approximately every month. The subgroups leads work on their project development and have monthly teleconferences by GoToMeeting - the online teleconference platform of EACH.

After the second meeting in June 2016, these project groups changed as projects 4 & 5 combined to be a general Networking group. The work of this sub-group overlaps with the 'Dating' system described by tEACH. Links have been formed to assist the integration of this system across EACH. Project 7 had completed its task and has disbanded. Project 6 has been placed on reserve and the members of this sub-group are redesigning the specification to present at a later date to rEACH. Two more groups were proposed at the second meeting:

1. Summer School, led by Mara van Beusekom, who will work on the rEACH summer school for 2017. This group will assist with advertising, design and selection of delegates and facilitators.
2. Coding Tools group that will collate all coding systems used in the observation of healthcare communication and present them in the form of a centralised catalogue with details of each system, current reports of usage and a comments box detailing specific advantages and features.

Further activity
The preconference workshop, run by rEACH, on behavioural coding of tri-partite 'actors' (i.e. clinician and two or more non-professional persons) using VR-CoDES and other instruments, at the Heidelberg Conference in September 2016.

The practice and policy committee (pEACH)
Current research originating from the field of implementation sciences emphasizes the failure of health systems to improve the quality of care by translating research evidence into health care practice and policy. This failure also concerns the implementation of findings from health communication, a discipline that has successfully identified several health care areas where the improvement of communication and the use of evidence-based communication education can lead to optimal patient-centred care. pEACH is the EACH committee that targets policy-making and practice in health communication. Its specific mission is to foster the application of research from health communication and health communication education into healthcare practice, professional educational programs and policy. This mission is pursued through the following main specific activities:

Networking EACH and its activities: Knowledge dissemination and implementation are not isolated processes, but they presuppose an integrative exchange between research findings and the different stakeholders, i.e. creators and users of evidence. Engaging in networking activities is an important mechanism for knowledge dissemination as it results in the exchange of views and the creation of synergies for the improvement of professional practice. To prepare EACH for engaging in networking, the first activity of pEACH is to delineate the profile of EACH as the leading International association for promoting effective communication between patients, relatives and health providers, as well as to identify what EACH can offer to enhance health communication at different levels of the health care system.

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Knowledge creation: The second main activity of pEACH is to create a body of evidence on the value of specific interventions of health communication in relevant areas of health care practice. Scientific publications alone often cannot be directly translated in practice. Knowledge syntheses in a user-friendly format are important to address the needs of end-users. pEACH intends to identify areas of healthcare where communication problems can negatively impact healthcare practice, and illustrate how health communication theories, models and tools (in their multifaceted format) and teaching approaches can be used to help solving these problems. In particular, there are two main projects in progress. The first one, called "bullet point" papers, consists in the production of comprehensive but usable texts based on evidence from key areas of health communication research (e.g. shared-decision making). The second one, called "position papers", consists in the creating of full text papers that have a policy oriented framework and exploit further the content of the bullet point papers. All together, these texts and proposed publications aim at informing and enhancing policy making in the field and being able to speak to key health stakeholders external to the healthcare communication sector.

Rapid response: The fourth activity of pEACH aims to support the translation of evidence from health communication and education into International policy-making through the analysis and dissemination of information. Through an active group of international members, pEACH intends to monitor media events and policy-making that entail problems and solution in the field of health communication, and to inform institutions and policy makers with the latest evidence.

Social media: the presence of EACH on social media is a main target for EACH. Social media is an ideal channel to disseminate information on health communication, to promote EACH's activities and to recruit new members. Social media is a key channel for EACH to be represented as a key association in the field and to reach people all over the world. pEACH has started to identify ways to best approach social media. As one of the three committee of EACH it is in the process of developing strategies to assure dissemination of content that target specific core-areas of its work and health communication generally.

Consumer involvement:
pEACH has started to explore the possibility of linking with national umbrella groups in countries within EACH to:
- help us to discover what patients and patient groups are really concerned about in health professional/patient communication and what they would like to see prioritized in the work of EACH
- discover how pEACH and EACH generally might advocate for the implementation of this in their world
- ensure that EACH would be a first port of call for advice and help about communication in their health area
- develop collaborations with patient organisations for our mutual benefit
pEACH initiated this approach by becoming a professional member of National Voices in the UK and has built a highly successful relationship with them.
pEACH is currently composed of 15 members from seven countries. It has started as a relatively small group, but it intends to grow in the near future. Thus, the committee is working on the recruitment of additional members according to the different expertises required for the exploitation of its activities.

Development of Special Interest Groups (SIGs)
EACH is actively seeking to develop Special Interest Groups and has developed an online application form. SIGs are open to all members within EACH who want to work together on a specific content area or as a specific group of Healthcare professionals. SIGs are therefore distinct from a subgroup or project group of a committee. However, they need to report their progress through one of the existing committees. The benefit to EACH members of establishing a special interest group is to delineate their interest on the EACH website, advertise their activities and develop a blog space.

Existing awards
The Jozien Bensing Research Award is an award for talented early-career researchers awarded biennially at the EACH conferences. The award is intended for researchers in the first ten years of their research career – for example, within ten years of PhD or similar qualification, allowing for career breaks. The award was first given in 2008. The 2016 award was awarded at the Heidelberg ICCH conference to Annegret Hannawa from Switzerland.

The Teaching Award is an award for teachers of communication in healthcare who have made a significant and outstanding contribution to healthcare communication education. The first award was presented at the ICCH conference in Heidelberg to Rasnayaka Mudiyanse from Sri Lanka.

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Administrative infrastructure and website

The administrative infrastructure of the association has continued to thrive under our management company - SAS Events & Association Management. SAS provide full financial administration, membership administration, project management, event management, governance and procedure advice, meeting administration and communication with members.

Developments in administration over 2016 have been as follows:

- further improvements of our website with much clearer information available to the public, potential members and current members.
- negotiations have continued with our publisher Elsevier to enable further cost reductions in the provision of PEC which will enable more funds to be available for our various projects and tasks.
- a regular 6-weekly newsletter for members has been established as well as dedicated EACH pages within the journal PEC with regular articles provided by EACH every 2 months.
- changing EACH's name to become truly international

Donation fund

A donation fund was established in 2014, enabling members to provide financial assistance for people to attend EACH activities including conferences and workshops. Members have been able to donate to this fund during the annual reapplication process for membership and when booking onto events and the fund stands approximately at €877 at the end of 2016. The beneficiaries of this fund will be applicants who would otherwise find it difficult financially to participate in EACH activities. This might include people from less-developed countries, countries in financial difficulties and students. The first use of the donation fund was made in providing scholarships to the Heidelberg ICCH conference. A total of €1,440 was used for this purpose.

Project funding

Due to the increase in membership and in income from courses and conferences, EACH for the first time was able to allocate a certain amount of money in 2016 for projects to be spent through the official standing committees to further enable EACH's work. This year's funding was allocated to a pEACH proposal about making links with patient groups in a variety of countries to explore their perspective of the need for effective healthcare communication and to discover how we might advocate for the implementation of this in their world and a rEACH proposal to help students to attend the summer school.

FUTURE PLANS

Consolidating changes

Over 2017, the association will continue to consolidate the very large changes that have been initiated in 2016. All three committees tEACH, rEACH and pEACH will continue to progress current projects and start new ones. The chairs of the three subcommittees will meet together at least twice a year to make sure they collaborate with tasks aimed at achieving EACH aims.

Networking within countries

The development of country networks of members will continue and examples of countries which have managed to set-up a network successfully will serve as an example for others. All 3 committees are actively involved together in supporting the initiatives which come up and stimulate members to establish a network in their countries.

Provision of conferences and courses

EACH will continue to provide a major international conference every 2 years with an intervening summer event in the fallow year. It will also continue to develop courses and workshops on research and teaching and will now add policy. These courses are aimed at our membership and others in the healthcare communication community. A particular area for development will be outreach to specific countries following the successful Poland project. Local courses are being actively planned in Poland, Russia, Austria and Norway. A policy will be developed for budgeting these courses and on how to manage the increasing number of requests that the association now receives for speakers and workshop providers to external events.

Planning for the 2018 EACH conference in Porto, Portugal will continue via a highly active planning and scientific committee. This conference will occur in September 2018 and we hope to attract over 600 participants, similar to the Heidelberg conference. For the first time, EACH will take on the financial risk for the conference rather than secure guaranteed income from the hosts. The conference organisation will be led and facilitated by SAS Event and Association Management. The summer event and rEACH Summerschool will be repeated in September 2017.

Project funding

We will continue to allocate a certain amount of money for projects to be spent through the official standing committees to be able further EACH's work. The amount of money will be carefully considered and the projects assessed formally as in 2016.

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE
TRUSTEES REPORT

The renaming the association

On the 14th November 2016 EACH held an AGM where the resolution to change the name of the charity to EACH: International Association for Communication in Healthcare was agreed and passed by the members. The resolution was accepted by the Charity Commission by email on the 9th December 2016. The new name properly represents our current situation and clearly demonstrates a global reach. The website and all documents will be adjusted and pEACH is working on a social media strategy that will also include advertising this name change to the outer world more widely.

Membership drive and communicating with members

The association is continuing its membership drive following its highly successful introduction in 2016 and again this will increase our worldwide presence and the number of countries that we represent. A new strategy under discussion is more active representation at other relevant conferences. We are continuously discussing how we can increase membership, by becoming an attractive association that offers products that matter to members. We will also continue to use the existing methods of talking to the membership including newsletters, the development of the PEC pages, and make more use of other methods, for example on social media.

Special interest groups

The association will continue supporting the existing special interest groups and encourage the development of new ones. The executive has also suggested that instead of all SIGs being sited under rEACH, they should be able to choose EACH directly and/or the most appropriate subcommittee as their home and to report to. We will continue developing this further and ensure an improved organizational structure as well as visibility on the website.

Accounting and reporting responsibilities

Charity law requires the trustees to prepare accounts for each financial year which give a true and fair view of the state of affairs of the charity and of its financial activities for that period.
In preparing those accounts the trustees are required to:

1)   select suitable accounting policies and then apply them consistently;

1)   make judgements and estimates that are reasonable and prudent;

1)   follow applicable accounting standards, subject to any material departures disclosed and explained in the accounts;

1)   prepare the accounts on the going concern basis unless it is inappropriate to assume that the charity will continue to function.

The trustees are responsible for keeping adequate accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable it to ensure that the accounts comply with the Charities Act 2011, all current statutory requirements, the charities governing document and the requirements of the revised statement of recommended practice. The trustees are responsible for taking reasonable steps for the prevention and detection of fraud or other irregularities.

Signed on behalf of the trustees

…………………………………………..
Evelyn Van Weel-Baumgarten

Date: ……………………………………

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF THE INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

I report on the accounts of the Charity for the year ended 31 December 2016 which are set out on pages 13 to 21.

RESPECTIVE RESPONSIBILITIES OF TRUSTEES AND EXAMINER

The charity's trustees are responsible for the preparation of the accounts. The charity's trustees considers that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the 2011 Act) and that an independent examination is needed.

It is my responsibility to:

- examine the accounts under section 145 of the 2011 Act;

- to follow the procedures laid down in the general Directions given by the Charity Commission under Section 145
  (5) (b) of the 2011 Act, and

- to state whether particular matters have come to my attention.

BASIS OF INDEPENDENT EXAMINER'S REPORT

My examination was carried out in accordance with the general Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently no opinion is given as to whether the accounts present a "true and fair view" and the report is limited to those matters set out in the statement below.

INDEPENDENT EXAMINER'S STATEMENT

In connection with my examination, no matter has come to my attention:

(1) which gives me reasonable cause to believe that in any material respect the requirements:

- to keep accounting records in accordance with section 130 of the 2011 Act; and

- to prepare accounts which accord with the accounting records and comply with the accounting
  requirements of the 2011 Act

    have not been met; or

(2) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts
  to be reached.

Geoffrey Thomas FCA
Chartered Accountant
Fletcher & Partners
Crown Chambers
Bridge Street
Salisbury
SP1 2LZ

Date:

		Unrestricted	Restricted		
	Notes	TOTAL 2016 £	TOTAL 2016 £	TOTAL 2016 £	TOTAL 2015 £
Income and endowments from:					
Donations and legacies	2	54,606	745	55,351	31,310
Charitable activities	3	126,277	-	126,277	88,291
Investments	4	12,750	-	12,750	11,040
Total income		193,633	745	194,378	130,641
Expenditure on:					
Charitable activities	5	113,913	1,224	115,137	116,567
Total		113,913	1,224	115,137	116,567
Net income (expenditure) for the year and net movement in funds in the year		79,720	(407)	79,241	14,074
Total funds brought forward		75,273	1,696	76,968	52,572
Total funds carried forward	12	£ 154,993	£ 1,289	£ 156,209	£ 66,646

The notes on page 16 to 21 form part of these accounts

The accounts have been prepared in Euros.

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EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE
BALANCE SHEET
FOR THE YEAR ENDED 31ST DECEMBER 2016

CHARITY NUMBER: 1159050

	Notes	2016 £	2015 £
Fixed Assets	8	6,230	6,165
Current assets			
Debtors	9	30,328	25,477
Cash at bank and in hand	10	137,637	72,544
		167,965	98,022
Liabilities			
Creditors: Amounts falling due within one year	11	19,836	37,541
Net current assets		125,910	60,481
Total assets less current liabilities		112,318	66,645
Funds			
Restricted Funds	12	1,095	1,468
Unrestricted Funds	12	131,744	65,177
		132,839	66,646

Signed on behalf of the Trustees:

Evelyn Van Weel-Baumgarten - President

Approved by the trustees on

The notes on page 16 to 21 form part of these accounts

The accounts have been prepared in Euros.

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EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE
STATEMENT OF CASHFLOWS
FOR THE YEAR ENDED 31ST DECEMBER 2016

	Note	2016 £	2015 £
Cash used in operating activities	14	41,106	(3,878)
Cash flows from investing activities			
Royalty income and bank interest		12,750	11,040
Purchase of tangible fixed assets		-	-
Cash provided by (used in) investing activities		12,750	11,040
Increase (decrease) in cash and cash equivalents in the year		53,856	7,162
Cash and cash equivalents at 1 January 2016		72,544	65,383
Exchange variance between Euro and GBP		11,237	
Total cash and cash equivalents at 31 December 2016	10	137,637	72,545

The notes on page 16 to 21 form part of these accounts

The accounts have been prepared in Euros.

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE
NOTES TO THE ACCOUNTS
FOR THE YEAR ENDED 31ST DECEMBER 2016

1 ACCOUNTING POLICIES

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

a Basis of accounting

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) - (Charities SORP (FRS 102)) and the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

The International Association for Communication in Healthcare meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy notes.

b Preparation of the accounts on a going concern basis

The accounts are prepared on a going concern basis, in the opinion of the trustees the charity will be able to operate for the foreseeable future.

c Income

Income is stated net of VAT. Income is only recognised when the charity 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 from grants or donations for specific purposes are accounted for as receivable and are treated as forming restricted funds.

Membership subscriptions are recognised in the financial year that they relate to.
Donations are recognised when the charity is satisfied that it is entitled to receive the donation.
Training income is recognised in the period that the course takes place. Income received for courses occurring in future periods is deferred and recorded as a liability.
Investment income is recognised when it is receivable.

d Donated services and facilities

In accordance with the Charities SORP (FRS 102), general volunteer time is not recognised in the accounts. On receipt, donated professional services and donated facilities are recognised as income on the basis of the value of the gift to the charity which the charity would be willing to pay to obtain services or facilities of equivalent economic benefit on the open market. A corresponding amount is then recognised in expenditure in the period of receipt.

e   Expenditure and irrecoverable VAT

Expenditure is recognised when there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity heading:

Expenditure on charitable activities includes the costs of delivering training courses and events undertaken to further the purposes of the charity and their associated support costs.

Expenditure includes any VAT which cannot be fully recovered, and is reported as part of the expenditure to which it relates.

f   Allocation of support costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. These costs, including governance costs, are allocated to expenditure on charitable activities.

g   Fixed assets

All assets costing over €1,500 are capitalised. Tangible fixed assets are depreciated on a straight line basis at the following rates:

Computer equipment and software   10% per annum

h   Fund Accounting

Unrestricted funds

These are funds which can be used, at the discretion of the trustees, in accordance with the charitable objects of the charity.

Restricted funds

These are donations and grants that have been given for a particular purpose and expenditure must be in accordance with the purpose of the fund.

i   Foreign Currency

Transactions are carried out primarily in euros and pounds sterling. The accounts have been prepared in euros, as this is the functional currency of the charity. Foreign currency balances at the year end are translated into euros at the rate ruling on the balance sheet date. Transactions in currencies other than euros are translated at the actual rate on the day of the transaction.

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE
NOTES TO THE ACCOUNTS
FOR THE YEAR ENDED 31ST DECEMBER 2016

	2016	2015
2 VOLUNTARY INCOME	£	£
Donations	2,445	5,452
Membership subscriptions	52,906	25,859
	55,351	31,310

	2016	2015
3 CHARITABLE ACTIVITIES		
Training income	43,727	37,244
Summer event income	-	51,047
Conference income	82,550	-
	126,277	88,291

	2016	2015
4 INVESTMENT INCOME		
Royalties	12,750	11,040
Bank interest	-	-
	12,750	11,040

5 ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES

	2016		
	Membership Benefits	Research, Teaching Events and Courses	Total
Professional subscription	10,200	-	10,200
Training and research courses costs, including events/conferences	-	52,245	52,245
Governance costs	170	1,148	1,318
Support costs	1,700	49,674	51,374
	12,070	103,067	115,137

	2015		
	Membership Benefits	Research, Teaching Events and Courses	Total
Professional subscription	8,832	-	8,832
Training and research course costs, including events/conferences	-	84,658	84,658
Governance costs	147	1,340	1,487
Support costs	1,472	20,118	21,590
	10,451	106,116	116,567

6 NET INCOME/(EXPENDITURE) FOR THE YEAR

This is stated after charging:

	2016	2015
	£	£
Depreciation	890	771
Independent examiners fee	1,318	1,487

7 ANALYSIS OF GOVERNANCE AND SUPPORT COSTS

The charity initially identifies the costs of its support functions. It then identifies those costs which relate to the governance function. Having identified its governance costs, the remaining support costs together with the governance costs are apportioned between the two key charitable activities undertaken (see note 5) in the year. Refer to the table below for the basis for apportionment and the analysis of support and governance costs.

Analysis of support and governance costs

	General Support	Governance Function	Total	Basis of apportionment
Outsourced administration	45,536	-	45,536	Time spent
General office	5,838	-	5,838	Time spent
Accountancy services	-	1,318	1,318	Governance
Total	51,374	1,318	52,692	

8 TANGIBLE FIXED ASSETS

	2016
	£
Cost	
As at 31 December 2015	8,900
Additions	-
As at 31 December 2016	8,900
Amortisation	
As at 31 December 2015	1,780
Charge for the year	890
As at 31 December 2016	2,670
Net book value as at 31 December 2016	6,230
Net book value as at 31 December 2015	7,120

9 DEBTORS

	2016	2015
Trade debtors	35,602	19,957
Other debtors	77	5,520
	-	
	£35,680	£25,477

10 CASH AND CASH EQUIVALENTS

	2016	2015
Cash at bank and in hand	£137,637	£60,532

11 CREDITORS AMOUNTS FALLING DUE WITHIN ONE YEAR

	2016	2015
Trade creditors	3,389	5,250
Other creditors	1,891	3,687
Accruals and deferred income	18,057	28,604
	£23,337	£37,541

12 FUNDS

	Balance 1 January 2016	Income	Expenditure	Funds 31 December 2016
Unrestricted funds	75,273	193,633	(113,913)	154,992
Restricted funds	1,441	745	(1,224)	1,034
	76,714	194,378 £	(115,137)	156,027

Unrestricted funds
These are funds which can be used, at the discretion of the trustees, in accordance with the charitable objects of the charity.

Restricted funds
Specific donations collected from members can be used to assist people who may require financial assistance to attend EACH activities.

13 TRUSTEES REMUNERATION AND EXPENSES
A number of trustees are involved in the delivery of training and have been paid for their services and received out of pocket expenses. The constitution of the charity enables trustees to be paid for providing services to the charity.

Services provided: 3 trustees paid €11,287 in total (2015: 3 trustees €2,215) .
Expenses received for accommodation, travel and subsistence: 5 trustees paid €8,062 in total.
(2015: 10 trustees €9,619).

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE
NOTES TO THE ACCOUNTS
FOR THE YEAR ENDED 31ST DECEMBER 2016

14 RECONCILIATION OF NET MOVEMENT IN FUNDS TO NET CASH FLOW
FROM OPERATING ACTIVITIES

	2016	2015
	£	£
Net movement in funds	79,241	14,074
Add back amortisation	890	771
Less investment income	(12,750)	(11,040)
Decrease (increase) in debtors	(10,202)	19,444
Exchange variance from Euro to GBP	3,947	
Increase (decrease) in creditors	(14,204)	(27,126)
Exchange variance from Euro to GBP	(5,815)	
Net cash used in operating activities	£ 41,106	£ (3,878)

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE
DETAILED INCOME & EXPENDITURE
FOR THE YEAR ENDED 31ST DECEMBER 2016

	2016	2015
INCOME	£	£
Membership subscriptions	52,906	25,859
Donations to Restricted Fund	745	1,468
Other income (including Vasella Fund)	1,700	3,983
Training income	43,727	37,244
Royalties	12,750	11,040
Summer event	-	51,047
Conference income	82,550	-
Interest receivable	-	-
Total income	194,378	130,641
EXPENDITURE	0	
Training courses	36,304	28,783
Summer event	-	45,365
Vasella Fund	-	3,623
Restricted fund expenditure	1,224	-
Conferences	2,152	472
Elsevier publishing	10,200	8,832
Jozien Bensing award	1,988	-
Teaching award	556	-
Annual Activities Fund	1,020	-
Website expenses	549	114
Depreciation	890	771
Insurance	378	-
Travel and subsistence	169	1,591
Postage, stationery and printing	296	522
Telephone and internet	128	45
Computer software	815	269
PR - Literature and brochures	123	-
Executive committee	5,651	1,596
Steering committee	3,181	3,229
Bank charges	1,616	1,105
Currency charges	287	1,100
Outsourced administration	45,536	17,664
Professional fees	-	-
Independent examiners fee	1,318	1,487
Assurance	-	-
Bad debts	755	-
	115,137	116,567
	-	-
Surplus income over expenditure	79,241	14,074