

REGISTERED COMPANY NUMBER: 08290412 (England and Wales)
REGISTERED CHARITY NUMBER: 1151105

Report of the Trustees and
Financial Statements for the Year Ended 31 March 2019
for
Health and Hope UK

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The trustees, who are also directors of the charity for the purposes of the Companies Act 2006, present their report with the financial statements of the charity for the year ended 31 March 2019.

REFERENCE AND ADMINISTRATIVE DETAILS

Registered Company number 08290412 (England and Wales)

Registered Charity number 1151105

Registered Office

62 Heronsgate Road
Rickmansworth
Hertfordshire
WD3 5NX

Principal Address

62 Heronsgate Road
Rickmansworth
Hertfordshire
WD3 5NX

Trustees

J Boyce	Accountant	
J C E Gardner	Lawyer	
A Gray	Accountant	
H J Greig	Lawyer	
M Hawe	Doctor	(Deceased June 2019)
K Waterfield	Doctor	
E Watson	Management consultant	
A Wyman	Charity manager	(Resigned April 2019)

Independent examiner

Simon Lewcock FCCA
Windsor Lodge
Millfield Road
Hounslow
TW4 5PN

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing document

The charity is controlled by its governing document, a deed of trust, and constitutes a company limited by guarantee, as defined by the Companies Act 2006.

Risk Management

The trustees have reviewed the risks to which the charity is exposed and have ensured that appropriate controls are in place to provide reasonable assurance against fraud and error.

OBJECTIVES AND ACTIVITIES

Objectives and aims

Health and Hope UK (HHUK) was established at the end of 2012. The objectives of the charity are specifically restricted to the following:

- (1) For the public benefit of people in regions of South and South-East Asia, Health and Hope UK aims to relieve poverty and advance health, education and the Christian faith; and
- (2) Promote the efficiency and effectiveness of charities through technical support and by the provision of advice and training in good governance, structure and fundraising for our partners.
- (3) Nothing in the articles shall authorise an application of the property of the charity for purposes which are not charitable in accordance with section 7 of the charities and trustee investment (Scotland) act 2005 and/or section 2 of the charities act (Northern Ireland) 2008.

HHUK has carried out its objectives by working in partnership with Health and Hope Myanmar (HHM).

HHM is a community-based organisation whose mission is to bring health care, education, hope and development to the poorest people in remote areas of western Myanmar, through community engagement and empowerment. Its vision is to see villages that are thriving and self-developed.

The programmes that HHM delivers in Myanmar, and which HHUK supported during 2018 -19, are structured around three strategic goals - health, education and food security - with an underlying objective to see these goals contribute towards increased community cohesion and hope.

Health: To improve access to public health and primary medical care

Education: To increase the number of skilled people who are empowered and trained to take the lead in community development initiatives

Food Security: To increase and diversify agricultural production and reduce chronic malnutrition

In order to strengthen the effectiveness of HHM's programmes, HHUK provide support to HHM in the following areas:

- Strategy and Governance
- Finance and Administration
- Training and Development
- Monitoring and Evaluation
- Fundraising
- Marketing and Communications

ACHIEVEMENT AND PERFORMANCE

Charitable activities

Overview: Growth and opportunities

This has been a year of growth and opportunity in both the UK and Myanmar.

Health and Hope UK (HHUK) saw a 46% growth in income, from £398,416 in 2017-18 to £582,765 in 2018-19. This increase was attributed to significant work in the prior financial year, building capacity of the team in Myanmar and preparing the ground for a successful bid for a multi-year grant to support expansion of the ongoing health work. With funding secured for the following three years, Health and Hope Myanmar (HHM) were able to take on additional staff. Some of these highly qualified graduates had been able to study at college and university as a result of scholarships from Health and Hope's Freedom to Education Project (FEP). New staff members have taken on operational responsibility and leadership across a range of projects supported by HHUK in Health, Education and Food Security. This enables HHM's senior team to spend more time on strategic work, and enhances the operational performance and sustainability of HHM's work into the future.

The substantial increase in HHUK's income derived primarily from institutional donors, trusts and corporate partnerships, while income from individuals remained consistent with the prior year. The additional financial support enabled HHUK to fund two new projects in health and education, while also sustaining support for the rebuilding of the training centre, a 100' x 60' two-storey training facility with multi-use classrooms, offices and a large hall able to accommodate over 300 people.

Over the year, HHUK continued to drive forward improvements in the operational performance and capability of HHM, providing four in-country training workshops, as well as three capacity building trips for HHM staff to the UK. HHUK's support included the development of skills in project management and planning, the roll out of a new financial toolkit, development of a set of monitoring tools for measuring impact of the health work and practical support in the design of new projects. An onsite internal audit of our partner was also carried out in December 2018, which led to further staff training and updating of local finance and safeguarding policies to support HHM in meeting international standards of best practice.

Health

HHUK has the following development objective in health:

Remote rural communities in western Myanmar experience a decreased incidence of disease and an improvement in health and well-being.

The development objective is being achieved by:

1. improving access to health care services;
2. improving knowledge about health management and disease prevention;
3. creating a sustainable service through a community contribution and partnership model.

HHUK supports HHM through the running of four projects to meet these objectives:

Training for Traditional Birth Attendants (TBAs)

Government investment in health care in Myanmar has historically been the lowest of any country monitored by the World Health Organisation. Health indicators in Chin State are low even by the standards of Myanmar, in part due to the remoteness of many villages and the paucity of good roads. These factors hinder access to medical expertise, and serious health conditions are often not treated on a timely basis.

The rural poor are most affected by the lack of investment in healthcare. Even where they do exist, clinics are understaffed and lack many basic provisions. Whilst the government is now trying to provide ambulant midwifery services into the rural areas, midwives are forced to spend their own money to secure transport to villages in the border regions. The villages are far away from the main roads and can require a day or more of walking in remote and scarcely populated areas. This increases risks for health professionals and the majority of midwives are unable to fulfil their duties in these areas. A sad paradox emerges: though essential maternal and infant healthcare can have a radically beneficial impact on community well-being, in many parts of rural Chin State it continues to represent an acute area of need.

HHM seeks to address this need by working with partners to train and equip Traditional Birth Attendants (TBAs). These are usually older women who hold status and respect within their communities. They are planted for life within local communities and have gained knowledge of the birthing process through practical experience and oral tradition, rather than formal learning. Poor traditional hygiene practices, as well as myths and superstitions surrounding childbirth, can be reversed through education, leading to a reduction in maternal and perinatal mortality and morbidity.

Since 2012 seven TBA training workshops have been run by expert midwives from the UK which have had a tremendous impact on the local communities, including the local under-5 orphanage being closed down in 2018, thanks to the reduction in maternal mortality in childbirth. This, along with many individual testimonies of lives saved through better birthing practices, have created significant recognition for this work across the region.

After 166 women had attended a basic and advanced training workshop, the first 'Train of Trainer' (ToT) workshops were run in 2017, with further training conducted in 2018 for certain local women selected as trainers. In 2018-19, these women each ran their own training workshops in two other villages, multiplying the impact of the expat trainers. In addition, numerous women who expressed an interest in the work attended the workshops which enabled wider dissemination of knowledge to the local communities. The ToT's work was reviewed in December 2018 through an external in-situ evaluation of their students' knowledge and practical observations of birthing practices. It was found that all of the women trained had retained an excellent knowledge of basic healthcare practices such as hand-washing and diet and there was a satisfactory to good level of knowledge in understanding the mechanisms of birth. While there was more work to be done in practicing for emergency drills, the basic knowledge had been retained. This was strongly evidenced by the fact that 75 infants had been delivered over the prior nine-month period, with no maternal or infant deaths, other than two babies who were stillborn.

There was also clear evidence that the training had significantly raised the status of women within the villages and enhanced their confidence and self-esteem.

Hope Clinic

Based in Lailenpi, Hope Clinic provides services to about 2,000 out-patients each year, and has facilities to treat six in-patients at a time. In emergencies the clinic can provide a referral service and transport patients to hospitals in Pakokku or Yangon. The clinic also acts as a clinical training centre for CHWs and TBAs and a base for community health education campaigns.

In 2018-19 HHUK provided funding for equipment and medication for the clinic and contributed to salary costs for two doctors whose medical training had been made possible via Health and Hope's Freedom to Education Project (FEP). HHUK also provided *pro bono* expert support to the clinic, comprising a review of medical procedures and a set of guidelines drawn up for use of the pharmacy, including stock management.

HHUK arranged logistical and in-country support for Dr Nick Paluch, a Commissioner of Guernsey Overseas Aid, in addition to three visiting doctors from the UK, who provided out-patient clinics to the local community, training to staff and workshops for HHM health workers on essential first aid, the management of burns and community-based palliative care.

In 2019-20, HHUK expects to support the costs of three nurses returning from the FEP to expand the range of services available at the clinic, in addition to providing a mobile medical outreach service to remote villages.

Community-Led Healthcare

Since 2008, HHM have trained 834 Community Health Workers (CHWs) to develop a community-led response to health challenges across the region. Community health workers (CHWs) are known to deliver life-saving services through simple health interventions, right at the point where they are most needed. CHWs are selected and embedded within the communities where they serve and are able to address the vast majority of sickness and ill-health through education and preventative practices such as: the use of clean water, better waste disposal, teaching the benefits of hand washing, nutrition and combatting deadly superstitions about health. Many of these simple and effective techniques are often overlooked but have a significant impact in reducing morbidity and averting mortality.

The network of trained volunteer health workers is spread over 551 partner villages. The project area is remote and poorly connected to the rest of the country. Villagers consist of fifteen different tribal groups, all facing chronic food insecurity, a lack of educational opportunities and poor health outcomes, with many needing to walk up to three days to reach a well-equipped and staffed health facility.

Following on from a pilot project in Rakhine and southern Chin States to provide regular in-situ support to these health workers, the work expanded in 2018/19 to:

1. increase access to health care services through the appointment of 27 Area Coordinators, ensuring the network of trained CHWs are regularly supported, equipped and are able to respond to the changing health needs of their local community;
2. build capacity of the network of health workers through health education initiatives in order to increase the knowledge and capability of local communities to respond to their own health needs;

3. address the sustainability of HHM's rural health care provision through models of community-led social enterprise which return value back into the health network;
4. encourage the government's participation with and recognition of HHM's capability in delivering a model of community-led healthcare;
5. build HHM's capacity at a key point of growth to sustain operations into future years by developing its health expertise and operational delivery.

Between October 2018 and March 2019, 27 Area Coordinators were recruited to support the project work. Two training workshops were led by HHM staff and specialist expat medics, covering a range of topics in maternal and infant care, essential primary health care, first-aid and palliative care. Five hundred and twenty first-aid and preventative medicine kits were distributed to villages across the region, and HHM staff oversaw field visits which reached 100 CHWs across Chin and Rakhine States. Outreach clinics were also run in camps for Internally Displaced People (IDP) fleeing fighting between rebel groups and the Myanmar armed forces.

Materials for sixteen health education campaigns were developed across five different topics and 48,000 health education leaflets were printed for CHWs to use in rural villages. A baseline health survey was undertaken, and HHUK has overseen the development of a healthcare management database which will capture key impact indicators for the healthcare project over its lifespan and beyond.

This work, underpinned by the security of a multi-year grant, will continue until at least September 2021 driving forward outcomes in primary healthcare across the region. In the short-term, the project will expand support from 27 to 32 Area Coordinators by December 2019, aiming to provide regular contact with at least 352 partner villages across the lifespan of the project.

Community Health Financing Initiative

The Community Health Financing Initiative (CHFI) aims to equip Village Health Committees (VHCs), with the ideas, skills and investment required towards developing a local source of income for meeting the cost of the Community-Led Healthcare project in the long-term.

In order to move towards financial sustainability, each village will need to contribute an average of USD \$290 towards the ongoing work of the project. The CHFI has been developed to help villages achieve this.

In 2018-19, the CHFI invested in two community-owned business initiatives in ten villages where a CHW and trained TBA are working. The project fosters community ownership and aims to develop a model of best practice for scaling up the initiative across the region in following years. At the end of the 2018-19 financial year, this project was just launching, and the impact will be monitored in 2019-20.

Education

HHUK has the following development objective in education:

Young people from remote rural communities in western Myanmar experience improved educational prospects, long-term socio-economic wellbeing and are proactively contributing towards the development of their local community.

The development objective is being achieved through:

1. improving access to primary, secondary and higher education opportunities;
2. improving the quality of education services;
3. creating opportunities for young people to apply their learning for the benefit of their local community.

These objectives are being met through the following projects:

Freedom to Education Project (FEP)

The Freedom to Education Project, run by HHM and supported by HHUK, aims to identify young people who carry a vision for the long-term benefit of their people. Those selected for the project are offered the opportunity to pursue higher education. In addition to tuition fees, HHUK finances the provision of accommodation, and provides study guidance and ongoing pastoral care, for the majority of students.

In the 2018-19 financial year, 38 students were supported in their studies, ranging from Year 11 to final year degree students. This creates a virtuous circle, to the benefit of the students and Health and Hope. HHM benefited from the skills of six returning graduates who have taken on leading roles in the health and education projects. Three nurses completed their internship year at hospitals in Yangon and will join the health team in mid-2019. Two further graduates from the project took up roles in companies in Yangon.

The returning graduates are an inspiration for younger generations of students from the rural villages in Chin State, taking on leadership roles, fluent in English and able to interact with foreign visitors. They will continue to play a critical role in HHM's future, in both its operational capability as well as building up the organisation's professionalism and reputation across all areas of its work.

Education for All

During the financial year, HHUK continued to work alongside HHM to develop plans and to source finances for this new education project. The project ran as a pilot during 2018-19, supporting 202 part-time students, who were studying in two schools in Lailenpi town. The HHM team provided additional tutoring in English, Maths, Physics and Biology.

These are early days for this project; but the initial signs are encouraging. The Year 10 exam results showed a significant improvement as a result of the pilot work this year. In 2018-19, 24% of students passed their exams compared to 16% the previous year. This was in a context of the exam results falling nationally, with the highest performing state in the country dropping from a 39% pass rate to 37% in the same period. The 2018-19 result meant that an additional 21 students passed the year and are able to move forward with making decisions about opportunities for the future, rather than having to retake the year.

In 2019-20, the 'Education for All' project will take on direct responsibility for at least 100 students to study full time at the newly constructed Health and Hope Training Centre. The project will support 'repeater students' with high quality tuition, a library of educational resources, enhanced nutrition and a safe place to study. This long sought-after education initiative aims to improve once again on the results from 2018/19, aiming to equal the pass-rate of the highest performing state in Myanmar, while also

equipping and inspiring FEP graduates to contribute their time, knowledge and skills to transforming educational provision in their home villages.

Food Security

HHUK's development objective in relation to food security is that:

Remote rural communities in western Myanmar adopt sustainable agricultural methodologies and experience an improvement in food security and nutritional health.

The development objective is being achieved through:

1. increasing the quantity and diversity of household food production through crop diversification;
2. increasing nutrition and healthy food production knowledge and skills, particularly through shared learning;
3. increasing the uptake of environmentally sustainable agricultural techniques and water management practices;
4. ensuring there are accessible resources and networks in place to provide rapid food relief to needy areas during natural disasters.

Sustainable Agriculture

Working with Together for Sustainable Development (TSD, a local NGO) and Mission East, HHM received funding from the Danish government for a sustainable farming project: 'Something to Eat Every Day' (SEED). The project started in July 2017 and continues until 2019, focusing on bringing new farming techniques and crop diversification to local Family Farmer Groups (FFGs). The primary purpose is to demonstrate that an increased agricultural yield with higher nutritional gains can be achieved using sustainable farming methods which reduce exposure to natural disasters and divert activity from traditional destructive slash and burn methodology. Secondary health outcomes will also be achieved through enhanced nutrition as a result of changes to diet.

A second round of funding has now been sourced to enable the work to continue for a further three years from mid-2019, reaching new to new communities and building on the lessons learnt in the first phase of the work.

During this financial year HHUK continued to support HHM through providing operational and staffing resources to complement the main grant, through the ongoing support for a bespoke digital accountancy tool for financial management, as well as providing complementary staff training in-country, and supporting HHM to meet international standards.

Building for the future

Rebuilding the Training Centre

On 30th May 2017, Cyclone Mora made landfall in Bangladesh before moving northwards through western Myanmar. Torrential rain and high winds destroyed homes and triggered landslides in rural villages with thirty-seven families made homeless in the village of Lailenpi where HHM's work is based.

In addition, seven buildings of HHM's training centre were destroyed including the main training hall, kitchen and dining area and four dormitory buildings.

Work started on the rebuilding of the 100'x 60' training centre in December 2017, and significant progress has been made throughout 2018-19, culminating with the installation of the roof at the end of the financial year. HHUK were able to source all of the financial resources required to complete the building, thanks to the generous commitment of both individual supporters and key long-term partners.

Our partnership with Engineering Ministries International (eMI) continued to flourish throughout the year with HHUK supporting the placement of one of their field engineers on-site to help with both the rebuilding of the training centre as well as the Lailenpi Airport construction process.

During the year, the training centre, despite not being complete, was able to host two workshops for Area Coordinators in December and February. In June 2019, the building will accommodate 100 students for 10 months of the year attending the Education for All project, in addition to multiple workshops for CHWs and TBAs across 2019-20.

Lailenpi airstrip

HHUK have continued to work closely with Mission Aviation Fellowship (MAF) and eMI during the financial year to develop and progress plans to build an airstrip in Lailenpi. In December 2018 HHUK made a film in Lailenpi of the airstrip project during the final site survey, which later contributed to the commitment of financial donors to the project. Funding for the project was then approved and the government gave the go-ahead for the airstrip construction, taking part in a ground-breaking ceremony which was shown on national television. The airstrip will reduce travel time from Yangon radically, from a minimum of three days of (often hazardous) driving to around 90 minutes flying time. The airstrip has an anticipated completion date of May 2020.

FUTURE DEVELOPMENTS

In January 2019 the HHUK staff team was strengthened by the addition of a new staff member. The role of Senior Partnerships and Communication Officer will support our Executive Director in deepening and expanding our relationships with supporters and key donors.

The end of 2018-19 also saw the culmination of our five-year partnership plan with HHM. In early 2019, the board reviewed the achievements to date during a capacity building trip of the CEO and Founder of HHM to the UK. The review noted how many of the objectives across the spheres of health, education and food security had been met over the period and there was a real sense of celebration looking back at all that had been achieved. This was reflected in the growth of both organisations, as well as the work of transforming lives in communities in western Myanmar.

The year ahead will see the outlining of a new five year plan for the partnership, building on the foundational achievements of the last period, with a particular focus on increasing the capacity of HHM to source and secure funding through local and regional partners, as well as to continue to develop its governance and operational capabilities.

HHUK will undertake a review of key communication tools, and focus on the launch of a new website, while continuing to try to meet funding needs and expand our capacity building support against the agreed operational plan.

Focusing on our partner's work, we are delighted that the new training facility is 95% complete. The building has provided a secure base for HHM's work into the foreseeable future, with the work left to finish the building able to be completed after the monsoon rains. With the commitment of multi-year funding for the Community-led Healthcare Project and the return of high calibre graduates taking on key leadership roles, we look back on an encouraging year despite the challenges of conflict, injustice and poverty that still continue to hold back the wider transformation of the region and the country as a whole.

Approved by order of the board of trustees on 26th September 2019 and signed on its behalf by:

A handwritten signature in black ink, appearing to be 'JCE' followed by a stylized surname.

J C E Gardner - Trustee

I report on the accounts for the year ended 31 March 2019 set out on pages 12 to 16.

Respective responsibilities of trustees and examiner

The charity's trustees (who are also directors for the purposes of company law) are responsible for the preparation of the accounts. The charity's trustees consider 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 required. Since the charity's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of the Association of Chartered Certified Accountants (ACCA), which is one of the listed bodies.

Having satisfied myself that the charity is not subject to audit under company law and is eligible for independent examination, 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 the 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 statements 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 386 and 387 of the Companies Act 2006; and
 - to prepare accounts which accord with the accounting records, comply with Sections 394 and 395 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities 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.



S A Lewcock FCCA
Windsor Lodge
Millfield Road
Hounslow
TW4 5PN

Health and Hope UK
Year ended 31 March 2019

Statement of Financial Activities

	Notes	Unrestricted fund	Restricted funds	31.3.19 Total funds	31.3.18 Total funds
INCOME AND ENDOWMENTS					
Income from generated funds					
Voluntary income		172,946	408,933	581,879	397,726
Investment income	3	887	0	887	690
Total income and endowments		173,833	408,933	582,766	398,416
EXPENDITURE					
Cost of generating funds					
Costs of generating voluntary income	4	31,666	0	31,666	16,163
Charitable activities					
Health		40,639	115,751	156,390	83,341
Education		35,569	79,643	115,212	91,384
Food security		0	0	0	1,424
Rebuilding project		38,900	120,986	159,886	158,612
Capacity building & training		34,405	0	34,405	13,908
Other expenditure		12,397	16,594	28,991	26,429
Total expenditure		193,576	332,974	526,550	391,261
NET INCOME/(EXPENDITURE) BEFORE TRANSFERS					
		(19,743)	75,959	56,216	7,155
Gross transfers between funds		0	0	0	0
NET MOVEMENT IN FUNDS		(19,743)	75,959	56,216	7,155
RECONCILIATION OF FUNDS					
Total funds brought forward		103,563	19,156	122,719	115,564
TOTAL FUNDS CARRIED FORWARD		83,820	95,115	178,935	122,719

The notes form part of these financial statements

Health and Hope UK
Year ended 31 March 2019

Balance Sheet as at 31 March 2019

	Notes	Unrestricted fund	Restricted funds	31.3.19 Total funds	31.3.18 Total funds
CURRENT ASSETS					
Debtors	7	0	0	0	0
Cash at bank and in hand		92,841	95,115	187,956	127,269
		<u>92,841</u>	<u>95,115</u>	<u>187,956</u>	<u>127,269</u>
CREDITORS					
Amounts falling due within one year	8	(9,021)	0	(9,021)	(4,550)
		<u>83,820</u>	<u>95,115</u>	<u>178,935</u>	<u>122,719</u>
NET CURRENT ASSETS					
		<u>83,820</u>	<u>95,115</u>	<u>178,935</u>	<u>122,719</u>
TOTAL ASSETS LESS CURRENT LIABILITIES					
		<u>83,820</u>	<u>95,115</u>	<u>178,935</u>	<u>122,719</u>
NET ASSETS					
		<u><u>83,820</u></u>	<u><u>95,115</u></u>	<u><u>178,935</u></u>	<u><u>122,719</u></u>
FUNDS					
Unrestricted funds: General fund	9	83,820	0	83,820	103,563
Restricted funds	9	0	95,115	95,115	19,156
		<u>83,820</u>	<u>95,115</u>	<u>178,935</u>	<u>122,719</u>
TOTAL FUNDS					
		<u><u>83,820</u></u>	<u><u>95,115</u></u>	<u><u>178,935</u></u>	<u><u>122,719</u></u>

The charitable company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 March 2019.

The members have not required the charitable company to obtain an audit of its financial statements for the year ended 31 March 2019 in accordance with Section 476 of the Companies Act 2006.

The trustees acknowledge their responsibilities for

- (a) ensuring that the charitable company keeps accounting records that comply with Sections 386 and 387 of the Companies Act 2006
- (b) preparing financial statements which give a true and fair view of the state of affairs of the charitable company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the charitable company.

These financial statements have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small charitable companies and with the Financial Reporting Standard 102 SORP 2015.

The financial statements were approved by the board of trustees on 26th September 2019 and signed on its behalf by:



Mrs J Boyce - Trustee



J C E Gardner - Trustee

The notes form part of these financial statements

Notes to the Financial Statements

1 ACCOUNTING POLICIES

Accounting convention

The financial statements have been prepared under the historical cost convention and in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard 102, the Charities Act 2011 and the Companies Act 2006.

Income and Endowments

All income and endowments are included on the Statement of Financial Activities when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy.

Expenditure

Expenditure is accounted for on an accruals basis and have been classified under heading that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Taxation

The charity is exempt from corporation tax on its charitable activities

Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

2 FINANCIAL RESERVES POLICY

The trustees seek to hold an amount in reserve equal to or greater than six months running costs. This policy is reviewed on an annual basis.

3 INVESTMENT INCOME

	Year ended 31.3.19 £	Year ended 31.3.18 £
Deposit account interest	<u>887</u>	<u>690</u>

Notes to the Financial Statements - continued

4 COSTS OF GENERATING VOLUNTARY INCOME

	Year ended 31.3.19	Year ended 31.3.18
	£	£
Events	3,004	0
Postage and stationery	88	347
Promotional material	1,782	1,436
Staff costs	21,129	13,115
Film and media	2,480	81
Travel	3,183	1,184
	<u>31,666</u>	<u>16,163</u>

5 TRUSTEES' REMUNERATION AND BENEFITS

Trustees' expenses

There were no trustees' expenses paid for the year ended 31 March 2019.

6 STAFF COSTS

	Year ended 31.3.19	Year ended 31.3.18
	£	£
Wages and salaries	69,356	43,134
Pension and Social security costs	5,945	2,913
	<u>75,301</u>	<u>46,047</u>

The average monthly number of part-time employees (2 full time equivalent) during the year was:

Administrative	3	2
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No employees received emoluments in excess of £60,000

7 DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	31.3.19	31.3.18
	£	£
Donor debtors	<u>0</u>	<u>0</u>

8 CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	31.3.19	31.3.18
	£	£
Other creditors	<u>9,021</u>	<u>4,550</u>

Notes to the Financial Statements - continued

9 MOVEMENT IN FUNDS

	1.4.18	Income & Endowments	Expenditure	31.3.19
	£	£	£	£
Unrestricted funds: General fund	103,563	173,833	193,576	83,820
Restricted funds				
CHWs - area co-ordinators	295	142,851	91,326	51,820
Traditional birth attendants training	6,635	21,688	12,728	15,595
Clinic	2,000	1,251	3,251	0
Mobile clinic	0	15,000	0	15,000
Community Health Financing Initiative	0	19,224	10,446	8,778
Further education project	0	73,220	73,220	0
Education for All	0	29,792	6,423	23,369
Rebuilding of training centre	10,226	89,274	118,986	(19,486)
Peace building	0	39		39
UK overheads	0	16,594	16,594	0
TOTAL FUNDS	<u>122,719</u>	<u>582,766</u>	<u>526,550</u>	<u>178,935</u>

NB: The negative balance on the fund for the rebuilding of the training centre relates to an amount of £19,576 which was committed for this project but wasn't received until after the year end. Due to requirements on the ground it was necessary to send out cash in advance before it was received into the charity's bank account.