

Endless Medical Advantage
Unaudited Financial Statements
31 May 2023



SAMARA & CO
Chartered accountant
511 Kenton Lane
Harrow
Middlesex
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Endless Medical Advantage

Financial Statements

Period from 31 May 2022 to 31 May 2023

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Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

The trustees present their report and the unaudited financial statements of the charity for the period ended 31 May 2023.

Reference and administrative details

Registered charity name Endless Medical Advantage

Charity registration number 1194717

Principal office 53 Kings Road
London
E11 1AU

The trustees

Ms A Patel	(Appointed 1 May 2021)
Ms R Patel	(Appointed 1 May 2021)
Ms L Newman	(Appointed 1 May 2021)

Independent examiner Samara & Co
511 Kenton Lane
Harrow
Middlesex
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Structure, governance and management

The charity is registered with number 1194717, and is constituted as a Charitable Incorporated Organisation (CIO) dated 1 May 2021 and registered as an official UK charity on 01 May 2021.

New trustees are appointed for a term of at least two years passed at a properly convened meeting of the charity trustees. In selecting individuals for appointment as charity trustees, the charity trustees must have regard to the skills, knowledge and experience needed for the effective administration of the CIO.

The charity trustees will make available to each new charity trustee, on or before his or her first appointment: a copy of the current version of this constitution and a copy of the CIO's latest Trustees' Annual Report and statement of accounts.

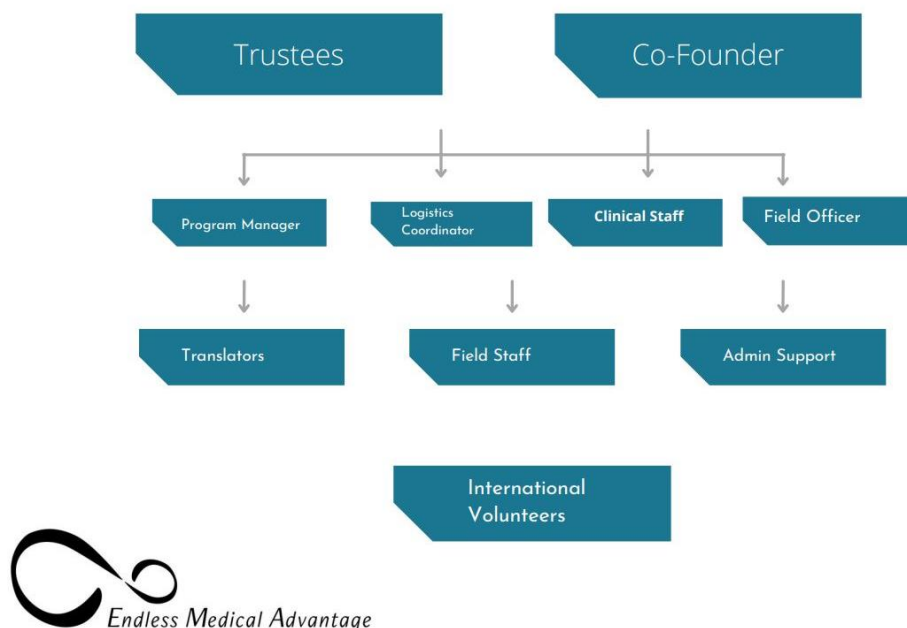
All trustees give their time voluntarily and receive no benefits from the charity. The charity's co-founder and medical director is regarded as key management personnel. The pay of the director is reviewed annually and normally increased in accordance with average earnings. The remuneration is also bench-marked with other charities of a similar size and activity to ensure that the remuneration set is fair and not out of line with that generally paid for similar roles.

The trustees oversee the work of the medical director/co-founder, staff and volunteers, delegating responsibility for day-to-day decision-making to the medical director.

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023



In order for Endless Medical Advantage (EMA) to achieve and maintain ethical delivery of services as well as ethical workplace management, we have developed several policies and are guided by them in practice to mitigate such issues.

All paid staff and volunteers undergo a recruitment process and they must all provide an up to date criminal record check (or equivalent) to ensure they meet our safeguarding standards. Furthermore, we maintain accountability as a service delivery provider and humanitarian actor by working collaboratively with other grassroots organisations and refugee-led initiatives in the local area whom we continue to learn from and allow us to work ethically in a dynamically changing environment.

We work with a community-based approach which promotes an ethical service delivery structure. Our services are delivered for the community, by the community whereby the team is sensitive to the needs of the communities and beneficiaries, having lived experience, cultural awareness and strong understanding of the needs of those who have been marginalised. We have developed strong communication strategies within the core team to ensure best practice is achieved and key behaviours are managed to remain aligned with EMA ethos.

There is a strong collaborative network of organisations, both regional and national, of which we are a part of to contribute to positive systemic shifts in refugee response. As a refugee-led organisation (RLO), working in the hearts of these communities, we are able to gain insight and understanding that is often missed by larger NGO/INGOs who are not as community-led. Our co-founder and medical director is a leader in his community and a part of this network which has given him a platform to show what the true needs are. We have an ear to the ground for big NGOs like UNHCR and we are thus able to give them insights they can't otherwise gain. In this way, we are able to support advocacy for refugees in particular to healthcare and represent a much needed voice for the people.

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

Objectives and activities

EMA is a refugee-led organisation in Lebanon. Our mission is to support Syrian and Lebanese medical professionals in providing sustainable healthcare services and humanitarian relief to refugees and vulnerable communities in Lebanon. Together with the communities we serve, we aim to contribute to health and well-being by providing the best care to every patient. Lebanon currently hosts almost 2 million Syrian refugees, the highest number of refugees per capita in the world. Many have little or no access to affordable healthcare and are living in remote and isolated areas of the Bekaa valley. For thousands of families, we are the only way for them to access free healthcare given by community-based medical professionals. Over the past years, much of the Lebanese host community are also living increasingly below the poverty line, unable to afford the cost of basic healthcare. EMA provides healthcare for anyone regardless of background.

As our organisation is a key source of healthcare for the community, we aim to keep building our movement by implementing integrated clinical practice with the main activities run through healthcare mobile clinics, a fixed polyclinic, dental clinic and physiotherapy programme. In doing so, we aim for sustainable improvements in healthcare in Lebanon. Furthermore, EMA commits to providing aid and relief to those living in poverty and affected by the challenging economic conditions of Lebanon. In emergencies, such as a storm or fire, we aim to be on the ground quickly, providing healthcare and supporting in the aftermath of such events by providing physical aid such as food and blankets. As EMA is growing, we are able to increasingly offer holistic healthcare to the vulnerable communities in the Bekaa Valley.

EMA's objectives are

- To create a sustainable, community-led infrastructure by sharing skills and materials to refugees to reduce the health crisis in Lebanon and help save lives. We do this by creating physical clinics run by refugees, providing long term sustainable healthcare solutions for all
- To improve the quality of life with provision of health services that are the most needed in the community, aiming to fill the essential gaps left by the host country and larger NGOs
- To lead the example of how community and refugee-led organisations with limited or no resources can make a systemic change by developing partnerships with NGOs to share resources
- To improve the provision of dental healthcare for the most vulnerable in Lebanon
- To improve the provision of healthcare for people with disabilities and increase their awareness and knowledge in managing such conditions
- To support advocacy for refugees in particular to healthcare and represent a much needed voice for the people
- To manage prevention and control of epidemic outbreaks through all our healthcare activities and education

Specific objectives for 2022-2023

- Expand the number of mobile medical units (MMUs)
- Expand to more areas across the region
- Enable fully subsidised dental treatments for all patients, not just emergencies, by expanding with a second dental chair
- Develop our pilot physiotherapy programme with both short term and long term interventions for those with severe physical disabilities
- Produce a comprehensive health education programme/health promotion for refugee communities living in informal settlements as well as local schools in our target areas

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

Activities

During the reported period, EMA operated in Central and West Bekaa in Lebanon, primarily in the towns of Al Marj, Taalabaya and Saadnayel. These areas are home to Lebanese families and Syrian refugees. The needs of the local population have continued to grow in 2022 and 2023, without relief support provided by the collapsed government, as families face additional challenges fuelled by economic collapse, mass unemployment, ever present political tension and increasing threats as a result of racism against the Syrian refugee population. These social, economical and health crises have all been happening at the same time and continue to worsen, making our work still desperately required.

From June 2022 to May 2023, EMA's main charitable activities were:

1) Mobile Medical Units (MMUs)

Until December 2022 we visited 50 settlements each month, reaching up to 52,000 individuals, many of whom are children. With our two fully equipped vans, each camp was visited every ten to fourteen days. With our unique EMA way of working we were able to continue reaching the refugee and vulnerable communities where they are, which saves people the cost of transportation to a Primary Health Centre (PHC), a cost burden many are unable to bear. We support the long term sustainable living for the communities, by providing not just one-off healthcare, but visits to all of our locations twice a month - to provide follow up where necessary.

Our mobile service is still unique in this geographical area: no other health clinic is mobile. However, from the start of 2023 there was an important change in our operating environment, as new restrictions to work in the camps were imposed by the Lebanese government and general security forces. This required all NGOs working in the settlements to seek new permissions from various ministries including the Ministry of Public Health and the Ministry of Social Affairs. This was a long and arduous process and EMA did not obtain these permissions before the end of the reported year. Whilst we awaited our paperwork, working in the mobile clinics was not possible. We therefore had to find an alternate solution to reach the people most in need of affordable healthcare. This is why we accelerated the establishment of a fixed polyclinic.

2) Polyclinic

In February 2023, we established our first fixed polyclinic. We initially created this clinic to ensure our activities could continue during the ongoing restrictions to enter the camps with our mobile medical clinics.

The polyclinic is also part of our long term vision to provide holistic healthcare and be able to follow up and provide our patients with affordable specialist healthcare. Following the restrictions on our mobile service, we established the fixed clinic sooner than planned, in order to remain visible to our communities and secure their access to affordable healthcare.

For the polyclinic we partnered with a local Lebanese NGO, INMAA. We started off by implementing our operating model we've been developing with our mobile service over the last years, and then were able to develop the polyclinic by bringing in specialists. We engaged local specialists based on the needs in our communities. During the first months of operations, we built our team of specialists, offering consultations at affordable rates including OB-GYN, endocrinology, orthopaedics and urology.

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

Our mobile clinics and polyclinic offer triage, assessment and treatment for primary health patients and to anyone in need, regardless of race, gender, ethnicity, age. Medications are also provided upon treatment to reduce the burden of additional costs. If patients need further investigation, we have now limited capacity to follow up at our own polyclinic. Additionally we still maintain excellent relationships with local laboratories and hospitals which offer EMA patients a subsidised or discounted cost for tests and treatments.

3) Dental Clinic

Following the initial success of our first dental chair, we opened a second dental chair in December 2022 to meet the demands of the community. We now offer all dental treatments next to emergency dental care.

Our dental clinic is self-sustaining, while still offering heavily subsidised treatments. With our unique EMA approach, we are setting an example and an inspiring precedent for affordable dental care in Lebanon. At our dental clinic we receive patients from all population groups such as Syrians, Lebanese, Palestinians, as well as migrant workers. People come from afar, not just the Bekaa region, but spanning other regions of Lebanon as well.

4) Physiotherapy

After the successful physiotherapy pilot, which ended in July 2022, we were able to establish a fully equipped small physiotherapy centre immediately after. Physiotherapy is now part of our core services, with free sessions available to all population groups. Our physiotherapist provides short and long term treatment plans, along with education and support for families.

The long term toll of war, poor health infrastructure and poor living conditions results in a higher rate of disability in the Syrian refugee population. In the physiotherapy clinic, we see several patients with neurological problems such as cerebral palsy, hemiplegia, tetraplegia, paraplegia and spina bifida. Other problems that are commonly treated and prevalent in the community are rheumatological problems, muscle dystrophy and traumatic conditions.

Our physiotherapy programme enhances disability inclusion and contributes to communities in which disabled people can participate in a meaningful way and reach their full potential.

5) Aid & Relief

Food insecurity kept reaching new staggering levels over the last year, as disposable income became problematic for more and more people in Lebanon. This was worsened by the dollarisation of the economy, rising cost of living and ongoing devaluation of the currency with rising inflation as a result. In addition, most of the refugee population living in camps have been facing a lack of access to NGOs and our services and resources, due to the restrictions for NGOs to work in the camps imposed by the Lebanese government. Along with the anti refugee campaign fueled by the Lebanese government, the living conditions for Syrian refugees became even more uncertain with forced arrests, raids and curfews. During Ramadan (April 2023) we were once again able to lift the burden of food insecurity. Similar to the last years, we distributed food parcels to support 1,200 families throughout the month.

6) Financial Assistance

We continued supporting individuals for financial aid and medical bills, helping more than 200 individuals throughout the year with a combination of full and partial payments for treatments such as chemotherapy, kidney dialysis, surgery, MRI, biopsies, X-rays, emergency surgeries, ICU admission and more - as well as basic blood and urine analysis.

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

For those patients, we have been able to diagnose cancer early, to diagnose other internal conditions and also support life saving treatments such as chemotherapy and kidney dialysis.

Next to medical cases, we supported a number of families with rent relief, covering their rent fees for a certain amount of time. Throughout the year we helped 105 families.

7) Health Education & Awareness

Until November 2022 we continued our awareness sessions about fact checking and rumours around health concerns and infectious diseases. This programme started with COVID-19 and continued to prove important as outbreaks of cholera and monkeypox emerged.

During the sessions, participants gained basic insight and understanding of infectious diseases and learned about prevention in an empowering way. During the entire programme from March until November 2022, 178 group sessions were completed. These sessions were a combination of listening groups, focus group discussions and awareness sessions. In total more than 1,500 participants have been involved in these activities.

Contribution made by volunteers

Additional capacity to the core team is provided by international medical healthcare professionals who are a consistent component of EMAs activities. A steady stream of international medical volunteers composed of doctors, nurses and medical students who joined us on the ground throughout the year assisted with clinical activities, health education and organisational support. They dedicate their time, bringing with them their own skills, experiences and knowledge to share with the EMA community, helping us to impact and improve the lives of thousands of individuals. On average EMA hosts one or two international medical volunteers per month throughout the year. During the reported year we hosted twenty volunteers in total. Their experience and knowledge are diverse, allowing us to reach more people and share specialist knowledge.

Achievements and performance

During the reported year, EMA provided an affordable solution to primary healthcare for vulnerable, displaced and disadvantaged communities. The camps where EMA operates are some of the most isolated and remote in relation to access to governmental clinics and hospitals. There are large numbers of people living in remote areas, often along poor roads with no access to traditional public transport. With data and evidence from local municipalities, we are able to identify those individuals and families most in need of health, aid and relief services. With the support of a local Lebanese healthcare clinic and NGO, our refugee leaders are informed of the most rural and remote areas where communities struggle to access and afford healthcare. Over the years we have seen the general health in the camps we visited improve. With follow ups and referrals for further investigative testing, which often we support financially, we have noticed that the overall healthcare for the communities has increased.

Since we were forced to partially and temporarily change our mode of operation, due to the restrictions on working in the camps with our mobile clinics, we closely monitored if and how this impacted our patients. Thanks to our strong relations with communities in the camps, people soon were able to seek our primary healthcare at the newly established polyclinic which is situated in a central area, easy to reach for the majority of our patients.

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

Beneficiaries in numbers (June 2022 - May 2023)	
18,129	patients treated in the mobile clinics and polyclinic combined
12,243	patients treated in the dental clinic
350	patients treated in our physiotherapy programme
7,500	individuals supported with a food package (1,200 families)
210	individual medical cases supported for often life saving treatment
105	families supported with livelihood support (rent relief) throughout the year
12,864	individuals supported with winterisation goods such as fuel, wood, blankets etc (2,144 families)

Moreover, we supported various disaster responses:

- During the storms in January 2023, several camps got flooded. We were called by another NGO to support emergency response by providing health checks and medications for the evacuated community. We were able to check and support the most vulnerable, many were babies or young children suffering from the cold weather and bad living conditions.
- We were also able to support winterisation for the most vulnerable families, by distributing wood and fuel for heating purposes, mattresses, blankets and tent covers (tarpaulins) during the wet and cold months. 2,144 families (approximately 12,864 individuals) benefited from our winterisation campaign.

Monitoring achievement

In spite of the restrictions and extremely challenging circumstances, we have again met our expectations for the reported year. However we also had to be flexible and adapt some of our ambitions as they didn't suit the developments and wouldn't have been as beneficial. As restrictions to work in the camps with our mobile clinics turned out to be an ongoing challenge, we had to decide not to expand the number of our mobile medical units. Due to this we were also not able to expand to more areas across the region, as our mobile services were put to a halt for the time being.

Meanwhile we were able to meet our goal to offer fully subsidised dental treatments for all patients, not just emergencies, by expanding with a second dental chair. The second dental chair has been running successfully from December 2022, reaching our objective in the now self-sustaining dental clinic.

Together with the establishment of our fixed polyclinic, we also created the space and opportunity for our physiotherapist to develop the physiotherapy programme with both short term and long term interventions for those with severe physical disabilities. In a fully equipped room, our physiotherapy is now growing and a core activity known within the wider community, improving the quality of life for people with disabilities and their families.

The establishment of the fixed polyclinic also meant an important step for one of our long term objectives to lead the example of how community and refugee-led organisations with limited or no resources can make a systemic change by developing partnerships with NGOs to share resources. As

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

a small organisation, we are doing exactly this, showing how to maximise impact under challenging circumstances by partnering and leading the polyclinic with our effective way of working.

Another objective for the year was to further develop a comprehensive health education programme, following the success of the awareness session that ran until November 2022. However, due to the mentioned challenging environment from the start of 2023, we were unable to produce such a comprehensive health education programme yet, as an important part of our efforts and energy were put towards establishing the polyclinic. However, we adapted and partnered with Jigsaw Charity in an awareness campaign aimed to improve girl's and women's health. We contributed to awareness sessions and health checks, supporting public health and health education for the most vulnerable communities. The further development of a comprehensive health education programme for refugee communities living in informal settlements as well as local schools will remain a goal for the next reporting period.

Although our work on the ground grew steadily during the reported year, we weren't able to achieve registration as a charity in Lebanon. This is one of the challenges we face especially as a refugee-led NGO in Lebanon. Registration and the opening of official bank accounts became even more challenging, if not impossible, following the collapse of the central bank in 2021, the deepening socio-economic crisis and the turbulent political climate. Over the course of 2022 and 2023 the situation for Syrians became dire even more so, not allowing us to pursue registration during the reporting period. This remains a goal for the next reporting period.

Financial Review

EMA relies entirely on funds both sourced from public as well as private donors, along with individual donors through PayPal and crowdfunding. Over the reported year, the total income was £245,269 with an expenditure of £232,256. Surplus for the year was £13,013 and reserves carried forward is £27,566.

The charity is incorporated and has actively been fundraising, the charity is being Independently Examined.

EMA's principal sources of funds

Previous to the reporting period, EMA had already secured funding by Internews Network for a nine month research and outreach project around COVID-19 misinformation and rumours. This project started before the reporting period and ended in November 2022 (grant of \$58,000 USD in total).

From January 2023, EMA again secured funding for a six month project by the specifically created Refugee Led Organisation (RLO) fund, Funders for Refugee Leadership in Lebanon (FRL) led by a consortium of these organisations: Robert Bosch Stiftung GmbH, Choose Love Inc., Global Whole Being Fund, Open Society Foundations and Rockefeller Brothers Fund. In the accounts it can be identified under the label Choose Love Inc. Phase 2 (following Phase 1 prior to the reported year) of this grant included \$100,000 USD and supported the mobile clinic activities, physiotherapy services and financial assistance for more complex health treatments in hospital settings.

Furthermore, EMA received several unrestricted funds from LUSH charity pot (£7,500 GBP), Cultures of Resistance Network (\$5,000 USD), Caramella Pignatelli Foundation (£2,500 GBP) and Jigsaw Charity (£15,000 GBP) to support the polyclinic and additional medical supplies for all activities.

In addition, EMA received a private donation for the food security project during Ramadan from MDS healthcare for £24,380 GBP, and a one off donation of \$30,000 USD by the CRLM Consortium for the winterisation project.

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

We have also successfully raised funds through individual giving (through PayPal) and crowdfunding (GoFundMe) to support EMAs services and aid and relief projects. We were given a number of cash donations directly in Lebanon by visiting partners, visitors, journalists and other individuals or groups connected to EMA.

Statement explaining the policy for holding reserves stating why they are held

At the end of the reported year, on May 31 2023, a reserve of £27,566 was held. Reserves are held by EMA to support the expenses and running costs of the organisation during transitional periods due to incremental periods of funds.

Investment policy and objectives including any social investment policy adopted

EMA does not have investments of any kind in this period. EMA will review the Investment policy as and when required.

Risk Management

Due to the unstable political and socio-economic situation in Lebanon in general, and in the Bekaa Valley specifically, the context we work in poses several risks and uncertainties to our daily work. As a grassroots NGO in Lebanon, in particular a refugee-led NGO, some specific risks have increased during the year:

- 1) Due to the ongoing and deepening economic crisis in Lebanon, along with the Syrian refugee communities, we are seeing more of the local Lebanese communities also accessing the EMA healthcare services. This has meant the volume of service users has again grown in the last year whilst the team capacity and monthly budgets have remained the same. We keep being creative in how we manage patient care and providing medications for those in real need, often sharing medication across an entire family.
- 2) The economic crisis still greatly affects how we operate, with government subsidies on several sectors including pharmaceuticals, healthcare, fuel and food no longer supported. This again led to phenomenal price increases. The vulnerable communities which we serve struggle with food security and paying for even the basic healthcare.
- 3) Rising xenophobia and racism against the Syrian community has led to rising fear within the refugee communities and there are stricter rules on working in the camps. This has often made it more challenging to run our day to day activities, especially from the start of 2023 when governmental restrictions were imposed on working in the camps. We needed to change our approach as we weren't able to obtain the permissions and saw a huge health risk for our communities if we would cease to continue our health services. Additionally, in the Spring months of 2023, the safety threats for Syrian refugees also impacted our team and wider network, as violent raids, checkpoints and deportations happened on a daily basis. Thanks to our professional team and strong relationships, we were able to continue working, ensuring safety first for all of our team, along with the support of influential Lebanese partners and leaders within our operating community.

The Lebanese context is ever changing and extremely dynamic however we have worked tirelessly with our existing resources and collaboratively with all our partners to ensure we are meeting the healthcare needs of the local communities. Although most risks, such as the uncertainties mentioned above as well as operational risks are external factors out of our control, we have adopted several policies and procedures to mitigate risks as much as possible.

Endless Medical Advantage

Trustees' Annual Report *(continued)*

Period from 31 May 2022 to 31 May 2023

Plans for the future

As we look forward, our general objectives remain intact. For the future of our activities and our organisation, we plan to build capacity within the team and our operations with the aim of changing the face of healthcare for refugees and vulnerable communities in Lebanon. We plan to continue learning from our work, and maintain a bottom up approach to ensure all our work is community-led and community driven. We hope to maintain flexibility and remain visible and active within the community in light of the ever changing operating environment in Lebanon.

We anticipate the following in the next 12 months:

- a) Expand the polyclinic with more specialties based on the needs in our communities, such as cardiology, dermatology
- b) Make laboratory services accessible to our patients, by offering these in house at affordable prices in our polyclinic and to ensure a holistic, all rounded patient centred approach for our beneficiaries
- c) Offer vaccinations for the childhood immunisation programme, free of charge for all children, supported by the Ministry of Public Health in Lebanon
- d) Expand the dental clinic to cover a larger geographical area, by opening a third dental chair
- e) Expand the physiotherapy service into a fully fledged centre (with more equipment and resources) to serve the greater population needs, and expand the reach of our physiotherapy programme to new geographical areas
- f) Produce a comprehensive health education programme for the refugee communities as well as local schools in our target areas. Topics will include: Dental hygiene, Infectious disease prevention, Pregnancy, Breastfeeding and would be mothers, Female hygiene, First aid, Nursing skills and Lifestyle & nutrition.

EMA will pursue sourcing funds from subject grants to support the expansion of services with project costs, operational costs, staffing of healthcare professionals and growth of the organisation to meet our long term goals.

We will continue to gather insight from our beneficiaries, partners and staff to understand how we can improve and develop our operations, continuing to evaluate and monitor the impact we are having to ensure they are at the core of everything we aim to achieve. By reviewing milestones and final outcomes of our projects, we hope to build systematic practices dedicated to the assessment of EMA's overall performance and achievement of our short and long term aims.

The trustees' annual report was approved on 26 January 2024 and signed on behalf of the board of trustees by:



Ms A Patel
Trustee

Endless Medical Advantage

Independent Examiner's Report to the Trustees of Endless Medical Advantage

Period from 31 May 2022 to 31 May 2023

I report to the trustees on my examination of the financial statements of Endless Medical Advantage ('the charity') for the period ended 31 May 2023.

Responsibilities and basis of report

As the trustees of the charity you are responsible for the preparation of the financial statements in accordance with the requirements of the Charities Act 2011 ('the Act').

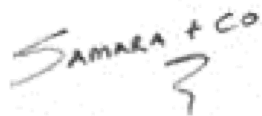
I report in respect of my examination of the charity's financial statements carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

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

1. accounting records were not kept in respect of the charity as required by section 130 of the Act; or
2. the financial statements do not accord with those records; or
3. the financial statements do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination.

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



Independent Examiner

511 Kenton Lane
Harrow
Middlesex
HA3 JW

26 January 2024

Endless Medical Advantage

Statement of Financial Activities

Period from 31 May 2022 to 31 May 2023

		2023		2022
	Note	Unrestricted funds £	Total funds £	Total funds £
Income and endowments				
Donations	4	245,269	245,269	169,419
Total income		<u>245,269</u>	<u>245,269</u>	<u>169,419</u>
Expenditure				
Expenditure on charitable activities	5,6	232,256	232,256	154,866
Total expenditure		<u>232,256</u>	<u>232,256</u>	<u>154,866</u>
		—	—	—
Net income/(expenditure) and net movement in funds		<u>13,013</u>	<u>13,013</u>	<u>14,553</u>
Reconciliation of funds				
Total funds brought forward		14,553	14,553	—
Total funds carried forward		<u>27,566</u>	<u>27,566</u>	<u>14,553</u>

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The notes on pages 15 to 21 form part of these financial statements.

Endless Medical Advantage

Statement of Financial Position

Period from 31 May 2022 to 31 May 2023

	Note	2023 £	2022 £
Fixed assets			
Tangible fixed assets	11	10,130	15,195
Current assets			
Cash at bank and in hand		18,936	798
Creditors: amounts falling due within one year	12	1,500	1,440
Net current liabilities		<u>17,436</u>	<u>642</u>
Total assets less current liabilities		<u>27,566</u>	<u>14,553</u>
Net assets		<u>27,566</u>	<u>14,553</u>
Funds of the charity			
Unrestricted funds		27,566	14,553
Total charity funds	13	<u>27,566</u>	<u>14,553</u>

These financial statements were approved by the board of trustees and authorised for issue on 26 January 2024, and are signed on behalf of the board by:



Ms A Patel
Trustee

The notes on pages 15 to 21 form part of these financial statements.

Endless Medical Advantage

Statement of Cash Flows

Period from 31 May 2022 to 31 May 2023

	2023	2022
	£	£
Cash flows from operating activities		
Net income	13,013	14,553
<i>Adjustments for:</i>		
Depreciation of tangible fixed assets	5,066	5,066
Accrued expenses	<u>60</u>	<u>1,440</u>
Cash generated from operations	<u>18,138</u>	<u>21,059</u>
Net cash from operating activities	<u><u>18,138</u></u>	<u><u>21,059</u></u>
Cash flows from investing activities		
Purchase of tangible assets	—	<u>(20,261)</u>
Net cash used in investing activities	—	<u>(20,261)</u>
Net increase in cash and cash equivalents	18,138	798
Cash and cash equivalents at beginning of year	<u>798</u>	<u>—</u>
Cash and cash equivalents at end of year	<u><u>18,936</u></u>	<u><u>798</u></u>

The notes on pages 15 to 21 form part of these financial statements.

Endless Medical Advantage

Notes to the Financial Statements

Year ended 31 May 2023

1. General information

The charity is a public benefit entity and a registered charity in England and Wales and is unincorporated. The address of the principal office is 53 Kings Road, London, E11 1AU.

2. Statement of compliance

These financial statements have been prepared in compliance with FRS 102, 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland', the 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) (Charities SORP (FRS 102)) and the Charities Act 2011.

3. Accounting policies

Basis of preparation

The financial statements have been prepared on the historical cost basis, as modified by the revaluation of certain financial assets and liabilities and investment properties measured at fair value through income or expenditure.

The financial statements are prepared in sterling, which is the functional currency of the entity.

Going concern

There are no material uncertainties about the charity's ability to continue.

Fund accounting

Unrestricted funds are available for use at the discretion of the trustees to further any of the charity's purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular future project or commitment.

Restricted funds are subjected to restrictions on their expenditure declared by the donor or through the terms of an appeal, and fall into one of two sub-classes: restricted income funds or endowment funds.

Endless Medical Advantage

Notes to the Financial Statements

Year ended 31 May 2023

Incoming resources

All incoming resources are included in the statement of financial activities when entitlement has passed to the charity; it is probable that the economic benefits associated with the transaction will flow to the charity and the amount can be reliably measured. The following specific policies are applied to particular categories of income:

- income from donations or grants is recognised when there is evidence of entitlement to the gift, receipt is probable and its amount can be measured reliably.
- legacy income is recognised when receipt is probable and entitlement is established.
- income from donated goods is measured at the fair value of the goods unless this is impractical to measure reliably, in which case the value is derived from the cost to the donor or the estimated resale value. Donated facilities and services are recognised in the accounts when received if the value can be reliably measured. No amounts are included for the contribution of general volunteers.
- income from contracts for the supply of services is recognised with the delivery of the contracted service. This is classified as unrestricted funds unless there is a contractual requirement for it to be spent on a particular purpose and returned if unspent, in which case it may be regarded as restricted.

Resources expended

Expenditure is recognised on an accruals basis as a liability is incurred. Expenditure includes any VAT which cannot be fully recovered, and is classified under headings of the statement of financial activities to which it relates:

- expenditure on raising funds includes the costs of all fundraising activities, events, non-charitable trading activities, and the sale of donated goods.
- expenditure on charitable activities includes all costs incurred by a charity in undertaking activities that further its charitable aims for the benefit of its beneficiaries, including those support costs and costs relating to the governance of the charity apportioned to charitable activities.
- other expenditure includes all expenditure that is neither related to raising funds for the charity nor part of its expenditure on charitable activities.

All costs are allocated to expenditure categories reflecting the use of the resource. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs are apportioned between the activities they contribute to on a reasonable, justifiable and consistent basis.

Tangible assets

Tangible assets are initially recorded at cost, and subsequently stated at cost less any accumulated depreciation and impairment losses. Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Endless Medical Advantage

Notes to the Financial Statements *(continued)*

Period from 31 May 2022 to 31 May 2023

3. Accounting policies *(continued)*

Tangible assets *(continued)*

An increase in the carrying amount of an asset as a result of a revaluation, is recognised in other recognised gains and losses, unless it reverses a charge for impairment that has previously been recognised as expenditure within the statement of financial activities. A decrease in the carrying amount of an asset as a result of revaluation, is recognised in other recognised gains and losses, except to which it offsets any previous revaluation gain, in which case the loss is shown within other recognised gains and losses on the statement of financial activities.

Depreciation

Depreciation is calculated so as to write off the cost or valuation of an asset, less its residual value, over the useful economic life of that asset as follows:

Plant and machinery	-	25% straight line
Equipment	-	25% straight line

Impairment of fixed assets

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

For the purposes of impairment testing, when it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that largely independent of the cash inflows from other assets or groups of assets.

For impairment testing of goodwill, the goodwill acquired in a business combination is, from the acquisition date, allocated to each of the cash-generating units that are expected to benefit from the synergies of the combination, irrespective of whether other assets or liabilities of the charity are assigned to those units.

Financial instruments

A financial asset or a financial liability is recognised only when the charity becomes a party to the contractual provisions of the instrument.

Basic financial instruments are initially recognised at the amount receivable or payable including any related transaction costs.

Current assets and current liabilities are subsequently measured at the cash or other consideration expected to be paid or received and not discounted.

Debt instruments are subsequently measured at amortised cost.

Where investments in shares are publicly traded or their fair value can otherwise be measured reliably, the investment is subsequently measured at fair value with changes in fair value recognised in income and expenditure. All other such investments are subsequently measured at cost less impairment.

Endless Medical Advantage

Notes to the Financial Statements *(continued)*

Year ended 31 May 2023

Other financial instruments, including derivatives, are initially recognised at fair value, unless payment for an asset is deferred beyond normal business terms or financed at a rate of interest that is not a market rate, in which case the asset is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial instruments are subsequently measured at fair value, with any changes recognised in the statement of financial activities, with the exception of hedging instruments in a designated hedging relationship.

Financial assets that are measured at cost or amortised cost are reviewed for objective evidence of impairment at the end of each reporting date. If there is objective evidence of impairment, an impairment loss is recognised under the appropriate heading in the statement of financial activities in which the initial gain was recognised.

For all equity instruments regardless of significance, and other financial assets that are individually significant, these are assessed individually for impairment. Other financial assets are either assessed individually or grouped on the basis of similar credit risk characteristics.

Any reversals of impairment are recognised immediately, to the extent that the reversal does not result in a carrying amount of the financial asset that exceeds what the carrying amount would have been had the impairment not previously been recognised.

4. Donations

	Unrestricted Funds £	Total Funds 2023 £
Donations		
Charitable Donations	245,269	245,269
	<u> </u>	<u> </u>

	Unrestricted Funds £	Total Funds 2022 £
Donations		
Charitable Donations	169,419	169,419
	<u> </u>	<u> </u>

5. Expenditure on charitable activities

	Unrestricted Funds £	Total Funds 2023 £
Charitable Activity	225,419	225,419
Support costs	6,837	6,837
	<u> </u>	<u> </u>
	232,256	232,256
	<u> </u>	<u> </u>

Endless Medical Advantage

Notes to the Financial Statements *(continued)*

Period from 31 May 2022 to 31 May 2023

	Unrestricted Funds £	Total Funds 2022 £
Charitable Activity	138,312	138,312
Support costs	16,554	16,554
	<u>154,866</u>	<u>154,866</u>

6. Expenditure on charitable activities

	Activities undertaken directly £	Support costs £	Total funds 2023 £
Charitable Activity	225,419	–	225,419
Governance costs	–	6,837	6,837
	<u>225,419</u>	<u>6,837</u>	<u>232,256</u>

	Activities undertaken directly £	Support costs £	Total funds 2022 £
Charitable Activity	138,312	–	138,312
Governance costs	–	16,554	16,554
	<u>138,312</u>	<u>16,554</u>	<u>154,866</u>

7. Net income

Net income is stated after charging/(crediting):

	2023 £	2022 £
Depreciation of tangible fixed assets	<u>5,065</u>	<u>5,066</u>

8. Independent examination fees

	2023 £	2022 £
Fees payable to the independent examiner for:		
Independent examination of the financial statements	<u>1,500</u>	<u>1,200</u>

Endless Medical Advantage

Notes to the Financial Statements *(continued)*

Period from 31 May 2022 to 31 May 2023

9. Staff costs

The total staff costs and employee benefits for the reporting period are analysed as follows:

	2023	2022
	£	£
Wages and salaries and social security costs	102,012	71,483

The average head count of employees during the period was 10 (2022: 7).

No employee received employee benefits of more than £60,000 during the year (2022: Nil).

10. Trustee remuneration and expenses

No Trustees were remunerated and/or had expenses incurred on their behalf or re-imbursed to them.

11. Tangible fixed assets

	Plant and machinery £	Equipment £	Total £
Cost			
At 31 May 2022	15,815	4,446	20,261
Additions	—	—	—
At 31 May 2023	<u>15,815</u>	<u>4,446</u>	<u>20,261</u>
Depreciation			
At 31 May 2022	3,954	1,112	5,066
Charge for the period	3,954	1,112	5,066
At 31 May 2023	<u>7,908</u>	<u>2,224</u>	<u>10,132</u>
Carrying amount			
At 31 May 2023	<u>7,907</u>	<u>2,222</u>	<u>10,129</u>
At 31 May 2022	<u>11,861</u>	<u>3,334</u>	<u>15,195</u>

12. Creditors: amounts falling due within one year

	2023	2022
	£	£
Accruals and deferred income	1,500	1,440

Endless Medical Advantage

Notes to the Financial Statements *(continued)*

Period from 31 May 2022 to 31 May 2023

13. Analysis of charitable funds Unrestricted funds

	At 31 May 2022	Income	Expenditure	At 31 May 2023
	£	£	£	£
General funds	14,553	245,269	(232,256)	27,566
		<u> </u>	<u> </u>	<u> </u>
	At 1 May 2021	Income	Expenditure	At 31 May 2022
	£	£	£	£
General funds	–	169,419	(154,866)	14,553
		<u> </u>	<u> </u>	<u> </u>