

HEALTHPROM

REPORT AND FINANCIAL STATEMENTS

YEAR ENDED 31 MARCH 2014

Company number: 4887855

Registered Charity number: 1100459

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LEGAL AND ADMINISTRATIVE DETAILS

HealthProm was incorporated and registered as a private company limited by guarantee on 4 September 2003 (Company number: 4887855). It was registered as a charity on 03 November 2003 (Charity number: 1100459).

The company's Directors are also the charity's Trustees.

BOARD OF DIRECTORS/TRUSTEES

Chairman:	Mr Simon Ray
Company Secretary:	Mr Robert Scallon
Treasurer:	Ms Alison Hunter
Officers:	Ms Olga Johnson
	Mr Ralph Land, CBE
	Ms Caroline Leveaux (resigned March 2014)
	Mr Tim Unmack
	Mr Patrick Vaughan

STAFF

CEO:	Ms Fiona McLean
Finance and Administration Manager:	Maia Phutkaradze
Programmes and Partnerships Manager:	Tanya Buynovskaya
Programmes and Partnerships Manager:	Candice Sly

PATRONS

Mr Greg Hands MP
Baroness Elizabeth Smith of Gilmorehill

REGISTERED OFFICE

Star House, 104-108 Grafton Road, London NW5 4BA

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AUDITORS

Myrus Smith, Norman House, 8 Burnell Road, Sutton, SW1 4BW

BANKERS

CAF Bank Ltd, Kings Hill, West Malling, Kent, ME19 4TA

HSBC, 246 Kentish Town Road, London, NW5 2BS

NatWest Bank, Camden Town Branch, 166 Camden High St., London, NW1 0NW

STRUCTURE, GOVERNANCE AND MANAGEMENT

Structure:

HealthProm has a Board of Directors and Trustees (currently 7), a core staff made up of 4 employees and is supported by numerous experts (health, social and education), interns and volunteers.

Governance:

The Board of Directors and Trustees has responsibility for all governance, policy, strategy and financial matters.

The Board of Directors meets at least six times during the year. The board met 8 times in 2013/14.

Management

The CEO is responsible for the overall management and coordination of HealthProm's activities. She provides input and advice on governance, policy, strategy and finance matters and is responsible for implementing the decisions of the Board.

Financial Management

The Finance and Administration Manager is responsible for the management of HealthProm's financial and administrative procedures.

Risk Management

The charity trustees have considered the major risks to which the charity is exposed and have established systems and procedures to manage those risks.

Regular risk assessment is undertaken to ensure sufficient funds are available to cover the unexpected variance of the income and expenditure.

The trustees have identified the need for internal controls, and have put in place procedures for authorising all transactions and projects. A key element in the management of financial risk is the setting of a reserves policy and its regular review by trustees.

Policy on Reserves

Reserves are an important part of planning and sound financial management. It feeds into the budgeting and decision-making process, acting as a benchmark to ensure that funds are used effectively.

Reserves are needed for HealthProm to:

- continue to meet its financial commitments
- deploy funds promptly, in a planned way and react to new opportunities
- manage short-term volatility in income or liquidity

Trustees aim to ensure that general or unrestricted reserves do not fall below a value equivalent to three months' overheads. As at 31 March 2014, Healthprom met this requirement.

REPORT OF THE BOARD OF DIRECTORS AND TRUSTEES

The Directors and Trustees present their annual report and audited financial statements for the year ended 31 March 2014.

The Directors and Trustees confirm that the annual report and financial statements comply with the current statutory requirements, the requirements of the Company's governing document and the provisions of the Statement of Recommended Practice Accounting and Reporting by Charities issued by the Charity Commission in March 2005 (SORP 2005).

Incoming resources were £553,705 in 2013/2014, representing an increase of 36.76% (from £404,856) in 2012/2013. Grants represented the principal funding source, accounting for £352,740 or 63.71% of total income (59.42% in 2012/2013). Total Resources Expended amounted to £526,105, £461,706 (or 87.76%) of which consisted of resources expended on operational programmes. This resulted in an overall Unrestricted surplus of £54,140 for the year (compared to a Unrestricted deficit of £13,475 in 2012/2013). Net Assets at year end stood at £95,142, of which £29,044 was held in Restricted Funds.

BACKGROUND

HealthProm evolved out of the USSR-UK Medical Exchange Programme set up in 1984 by doctors and allied professionals to promote health education through tours, conferences and exchange visits between the two countries.

Our activities have since evolved and now focus on supporting vulnerable children in countries of the former Soviet Union and Afghanistan. Our three main areas of engagement are health, social care and education.

AIM AND OBJECTIVES

HealthProm's objective as set out in its Articles of Association is to "preserve, protect and improve the health of the public in Britain, Eastern Europe, the Caucasus and Asia, in particular the health of mothers and children".

We have recently developed our organisational "Theory of Change". According to this, HealthProm's overarching goal is to "support vulnerable children to have the best start in life", by strengthening families and communities, improving access to health and social care and promoting access to education.

The Trustees confirm that they have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing Healthprom's aims and objectives and in planning future activities.

VISION AND MISSION

Our vision is a world where each mother and child has secured the right to a healthy and socially included life.

Our mission is to work in partnership to promote health and social care for women and children in countries of the former Soviet Union and Afghanistan.

HEALTHPROM'S STRATEGY

HealthProm's Strategy for Growth 2012-2017 was approved by the Board on 11 November 2011.

It envisages taking a more programmatic approach to:

- Scaling up of activities in Central Asia and Afghanistan
- Re-engagement in Russia
- Engagement in Ukraine, Moldova, Belarus, Georgia, Armenia, Azerbaijan, Kazakhstan and Mongolia.

Linked to this was the plan to increase income. The current target is to raise income to £1 million by 2017.

STRATEGIC APPROACH

HealthProm works in partnership with target beneficiaries and communities as well as health, social care and education professionals, NGOs, local, regional and national governments to build local capacity to develop and implement innovative, low cost and high impact measures to improve the lives of vulnerable children. We focus on the most vulnerable and marginalised.

Specifically, HealthProm works to (i) strengthen families and communities; (ii) improve access to health and social care; and (iii) promote access to education.

As an international development organisation, HealthProm seeks to promote and support the achievement of the Millennium Development Goals (MDGs), specifically MDGs 4 (Reducing child mortality rates) and 5 (Improving maternal health).

HealthProm uses a participatory approach and is driven by the needs of the target beneficiaries. We seek to be a learning and innovative organisation which promotes best practices and also aim to ensure Value for Money and sustainability

DIMENSIONS OF CHANGE / CORE ACTIVITIES

HealthProm's four "Dimensions of Change" or Core activities are:

- (i) Strengthening families and communities
- (ii) Improving access to health and social care
- (iii) Promoting access to education
- (iv) Working with and through local partner organisations

Strengthening families and communities

HealthProm supports the mobilisation and empowerment of families and communities. We work with families and communities to raise awareness of the rights and needs of vulnerable children (and their families) and support them to have a voice through awareness-raising and advocacy initiatives.

Improving access to health and social care

HealthProm supports the development of innovative, low-cost community based services, by building the capacity of state and non-state service providers to develop and provide services to vulnerable children and their families, who currently have limited access to such services.

Promoting access to education

HealthProm works with education professionals at pre-school and primary school levels as well as with Ministries of Education to promote access to education for vulnerable children, who are frequently excluded from education.

Working with and through local partner organisations

HealthProm supports and works in partnership with local partner organisations to implement our projects.

We have developed Key Performance Indicators (KPIs) for each of these core activities.

METHODOLOGY

HealthProm's activities are based on the following four key approaches:

Child Centred Approach

A child centred approach recognises that children's needs and rights are the primary focus. A child does not grow and develop in a vacuum, but as part of a family, a community, a culture and a country. Since numerous institutions are accountable for fulfilling the rights of children, a child-centred approach inevitably requires strengthening social systems for care and well-being of the entire society. This approach includes the following components:

- Guided by best interests of the child, non-discrimination as well as other principles of the UN Convention on the Rights of the Child (UNCRC) and the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)
- Involves children's participation as far as possible
- Strengthen integrated community-based social services
- Emphasises investment and a strategic focus in early childhood care, basic primary education and adolescence
- Strengthens families and the social and biological status of women

Rights Based Approach

A rights based approach is about empowering people to know and claim their rights and increasing the ability and accountability of individuals and institutions who are responsible for respecting, protecting and fulfilling these rights.

This means giving people greater opportunities to participate in shaping the decisions that impact on their rights and their lives. It also means increasing the ability of those with responsibility for fulfilling rights to recognise and know how to respect those rights, and make sure they can be held to account.

A rights based approach is about ensuring that both the standards and the principles of rights are integrated into policymaking as well as the day to day practice and behaviour.

HealthProm focuses particularly on promoting the respect of child rights, women's rights and the rights of persons with disabilities enshrined in the UN Convention on the Rights of the Child (UNCRC), the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the UN Convention on the Rights of Persons with Disabilities (UNCRPD).

HealthProm champions two fundamental human rights: the right to health as an attainment of complete physical, mental and social well-being¹, and the right children have not to be separated from their parents².

Integrated and Multi-Disciplinary Approach

HealthProm take a holistic, integrated/multi-disciplinary approach to supporting vulnerable children, drawing on expertise of health, social care and education professionals.

Evidence-Based Approach

Evidence-based approaches to practice involve combining individual practitioner expertise with the best available external evidence from published research in order to make decisions about what to do in response to a presenting problem. HealthProm's activities are based on sound evidence, gained both from international research, best practices and lessons learned.

ACTIVITIES AND ACHIEVEMENTS IN 2013-2014

Organisational Development

Over the last 12 months HealthProm has continued to make significant progress in implementing its Strategy for Growth 2012-2017. Highlights include:

- Refinement of Strategy Implementation Plan for period 2013/14 – 2016/17
- Development of organisational Theory of Change (ToC) and Key Performance Indicators (KPIs)
- Substantial progress on developing organisational Monitoring and Evaluation (M&E) Framework and implementation plan
- Securing of BIG Lottery grant for 3-year project in Kyrgyzstan
- Provisionally securing DFID grant for 2-year project in Afghanistan
- Financial growth from approx. £450k in 2011 to £550k this financial year

Refinement of Strategy Implementation Plan for period 2014/15 – 2016/17

HealthProm carried out an Annual Progress Review, which provided an overall review of progress in attaining HealthProm's 4 strategic goals as well as a more detailed review of progress in implementing HealthProm's Fundraising Strategy and Plan.

The review found that we are making good progress towards achieving a number of our strategic goals. We have succeeded in scaling up activities in Central Asia and are slowly re-engaging in Russia. We have also succeeded in increasing our income from £458,737 in 2011/12 to £553,705 in 2013/14.

The Board agreed to revise financial targets. The aim is now to increase our income to approximately £1.0million by 2017.

On the basis of the Review, we drafted a new 3-year budget for the period 2014/15 – 2016/17, with revised targets for each income stream.

Theory of Change (ToC) and Key Performance Indicators (KPIs)

See above.

¹ Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19 June - 22 July 1946

² Article 9 United Nations Convention on the Rights of the Child

Organisational Monitoring & Evaluation (M&E) Framework and implementation plan

Substantial progress has been made in developing an organisational M&E Framework and implementation plan.

Securing of BIG Lottery grant for 3-year project in Kyrgyzstan

See under international projects below.

Financial growth from £458,737 in 2011/12 to £553,703 in 2013/14

Despite a drop in income in 2012/13 to £404,856, we succeeded in increasing our income in this financial year to £553,705. See balance sheet below.

INTERNATIONAL PROJECTS

In 2013/14 HealthProm was active in Tajikistan, Kyrgyzstan, Afghanistan and Russia.

In Tajikistan, HealthProm completed the two-year DFID-funded project "An Early Years' Service for families in Dushanbe: Creating an alternative to the institutionalisation of vulnerable and disabled children under 6 years old, Tajikistan" and launched a new 3 year EU funded project "Keeping and Finding Families: Inclusive Social Services for vulnerable young children in Dushanbe":

<i>An Early Years' Service for families in Dushanbe: Creating an alternative to the institutionalisation of vulnerable and disabled children under 6 years old, Tajikistan</i>

August 2011 – July 2013

Budget: £209,607 (£178,238 DFID, £7,475 Caritas, £4,204.80 Soros, £ 31,369 other donors)
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Partners: Ishtirok

The project created an innovative system of community-based services for families, as an alternative to the institutionalisation of vulnerable and disabled young children under 6 years old. This was achieved by expanding the work of the Kishti centre, which offers a community alternative to institutional care, based at Baby Home 1 in Dushanbe. Specialist teams were created which focus on different aspects of Early Years care across Dushanbe and therefore improve and expand on current provision. Five new teams were developed to enhance the current service.

<i>New: Keeping and Finding Families: Inclusive Social Services for vulnerable young children in Dushanbe</i>
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February 2013 – January 2016

Budget: €706,841 (€565,473 from the EU IBPP Programme)
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Partners: Sarchasma

Developmental delays before age six are difficult to compensate for later in life because early childhood is a particularly sensitive period for brain formation. This action will target the 4 domains of childhood development - physical, cognitive, language and social/emotional - and thus the situation for vulnerable groups of children and their families. It will create modern social services through new centres and teams at Baby Homes in Dushanbe and Sughd. Following the development of the Kishti centre through an earlier EU funded Project, this action targets the remaining three baby homes in Tajikistan. The Family Support Centres and Mobile Outreach Teams will provide inclusive community based social services for vulnerable young children in Tajikistan and their families.
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In Kyrgyzstan, HealthProm launched a new three-year BIG Lottery funded project "Supporting Disabled Children in Kyrgyzstan". We also organised the 5th annual summer camp for children with disabilities, funded by one of HealthProm's longstanding supporters, Mark Hunter.

<i>New: Supporting Disabled Children in Kyrgyzstan</i>
September 2013 – August 2016
Budget: £568,430 (£499,870 from the BIG Lottery)
Partner: Kelechek HP
The project will contribute to the prevention of institutionalisation of children with special needs in the country by improving community-based services that support CWD and their families, with focus on early intervention and family support; improving access to education, by supporting day centres to provide pre-school education; by strengthening the capacity of parent-led NGOs and parent networks through regional and national information exchanges, support and training; and finally also campaigning to reduce negative attitudes in society and promoting inclusion and integration of CWD in local communities.

<i>A summer holiday at Lake Issyk-Kul for children with disabilities from Belovodsky children's home and Talas day centres</i>
Summer 2013
£4,000 (Mark Hunter)
Partners: Kelechek HP
Kelechek organised a fifth annual summer holiday camp at Lake Issyk-Kul for a group of 55 children with disabilities, accompanied by 15 staff and volunteers from Belovodsky Children's Home and two day centres in the Talas region.

In Afghanistan, we have been continuing our project "Reducing maternal, child and newborn mortality in Charkent District":

<i>Reducing maternal and newborn deaths in Charkent District, Northern Afghanistan</i>
September 2008 – ongoing
Budget for 2013/14: £86,578 (various Trusts and Foundations)
Partners: CHA
The main focus of the project is on awareness-raising of village women and men (about maternal and child health); provision of emergency transportation to health centres; and design of a special donkey saddle for pregnant women. Over the last 18 months, we have also piloted a number of small but much needed initiatives to improve water supply (by repairing wells, installing tanks and laying pipelines from distant water springs to villages), chicken and seed distribution (to increase household income of the poorest and most vulnerable and improve nutrition) and road repairs with the support of local government departments within the framework of the existing project.

In Russia, we are implementing a new project "Opening school doors for disabled children in Krasnoyarsk, Russia":

<i>New: Opening school doors for disabled children in Krasnoyarsk, Russia</i>
January 2014 – December 2014
Budget: £18,000 (£15,000 from British and Foreign School Society)
Partners: NGO "Krasnoyarsk Centre for Community Partnerships" (Tsentr Sotrudnichestvo) and parent-led NGO "Open Hearts"
We will work with three mainstream schools in Krasnoyarsk (School No 11, Lyceum No 11 and School No 5) and local parents' organisation "Open Heart" to develop and pilot a partnership inclusion programme aimed at helping the schools to open their doors to

children with disabilities and ensure that every child enjoys their right to education. The main beneficiaries will be vulnerable disabled children, including those with intellectual, multiple and severe disabilities, who are now marginalised, invisible and isolated in their own communities.

PLANS FOR 2014/2015

HealthProm will continue to implement its five year strategy for growth and, underpinning this, its fundraising strategy.

The Board has agreed to invest in further developing human resources by increasing the time of the two Programmes and Partnerships Managers from 3 to 4 days per week and recruiting a new Head of Programmes, to support the drive to develop new programme and project initiatives and bring in institutional funding as well as investing in capacity building/training.

The Board has also agreed to invest in developing Monitoring and Evaluation and Communications.

Priorities for 2014/2015 are:

- To finalise and approve the 3 year-budget and financial targets for the period 2014/15 – 2016/17
- To plan and organise relevant capacity building / training
- To finalise the M&E Framework and implementation plan and action the plan
- To continue to consolidate and expand our work in Central Asia and Afghanistan
- To extend our activities into other countries in the region
- To further strengthen existing partnerships and develop new partnerships
- To increase our income to £790,000.

ACKNOWLEDGEMENT AND THANKS

The Trustees would like to thank HealthProm's partner organisations, whose drive and enthusiasm have helped bring about the successes of our shared projects.

The Trustees would also like to thank staff, consultants and volunteers who have all invested much time and effort to develop and implement projects, organise fundraising events etc.

All of our work has only been able to take place thanks to the generous support provided by:

- Assembly House Pub
- Barbican Centre
- Barclays Bank PLC
- Big Lottery Fund
- British Embassy Dushanbe
- British and Foreign School Society
- British School in Tashkent
- Bryan Lancaster's Trust
- Department for International Development (DFID)
- Dr Michael and Anna Brynberg Charitable Foundation
- European Union
- Falkirk Council
- Foreign & Commonwealth Office
- GV & SJ Britten Trust
- Karen Woo Foundation
- Kentish Town Sports Centre
- Mari Vanna Ltd
- Marjorie Barnabe
- Mark Hunter
- Open Society
- RA & VB Reekie Charitable Trust
- Rotary Club of London
- Russia House
- Russo British Chamber of Commerce
- Souter Charitable Trust
- SPANA
- Tarim Charitable Trust
- T&J Meyer Family Foundation
- Toy Trust
- The Bryan Guinness Charitable Trust
- The Doris Pacey Charitable Foundation
- The Funding Network
- The Linda Norgrove Foundation
- The Oakdale Trust
- The Open Gate Trust
- The Pushkin House in London
- Usborne Publishing Ltd
- Vernon Ellis Foundation
- W F Southall Trust

The Trustees would also like to thank HealthProm members and many other individuals whose contributions through membership fees and/or donations have helped us to carry out our important work.

STATEMENT AS TO DISCLOSURE OF INFORMATION TO AUDITORS

So far as the directors are aware, there is no relevant audit information (as defined by Section 418(3) of the Companies Act 2006) of which the company's auditors are unaware, and each director has taken all steps that he ought to have taken as a director in order to make himself/herself aware of any relevant audit information and to establish that the company's auditors are aware of that information.

STATEMENT OF RESPONSIBILITIES OF THE BOARD OF DIRECTORS AND TRUSTEES

Company law requires the Board of Directors and Trustees to prepare financial statements for each financial year which give a true and fair view of the affairs of HealthProm and of the surplus or deficit of the charity for that period. In preparing those financial statements, the board are required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- Prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the charity will continue in business.

The Board of Directors and Trustees is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The maintenance and integrity of the HealthProm website is the responsibility of the trustees; the work carried out by the auditors does not involve consideration of these matters and accordingly, the auditors accept no responsibility for any changes that may have occurred to the financial statements if they are presented on the website.

The Board of Directors and Trustees is responsible for ensuring that its report is prepared in accordance with Company and Charity law in England and Wales.

Approved by the trustees and signed on their behalf by:



Simon Ray
Chairman
23 July 2014

INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF

HEALTHPROM

(A Company Limited by Guarantee and Not Having Share Capital)

Registered Charity No. 1100459

(Company No: 4887855)

We have audited the financial statements of Healthprom for the year ended 31 March 2014 on pages 18 to 27 which comprise the Statement of Financial Activities, the Summary Income and Expenditure Account, the Balance Sheet and related notes. The financial reporting framework that has been applied in their preparation is applicable law and the Financial Reporting Standard for Smaller Entities (effective April 2008) (United Kingdom Generally Accepted Accounting Practice applicable to Smaller Entities).

This report is made solely to the charitable company's members, as a body, in accordance with Section 495 and 496 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and its members as a body, for our audit work, for this report, or for the opinions we have formed.

RESPECTIVE RESPONSIBILITIES OF TRUSTEES AND AUDITORS

As explained more fully in the Trustees' Responsibilities Statement set out on page 15, the trustees (who are also the directors of Healthprom for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's (APB's) Ethical Standards for Auditors.

SCOPE OF THE AUDIT OF THE FINANCIAL STATEMENTS

A description of the scope of an audit of financial statements is provided on the APB's website at www.frc.org.uk/apb/scope/private.cfm.

OPINION ON FINANCIAL STATEMENTS

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2014, and of its incoming resources and application of resources, including its income and expenditure, for the year then ended.
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice (applicable to Smaller Entities).
- have been prepared in accordance with the Companies Act 2006.

INDEPENDENT AUDITOR'S REPORT (CONTINUED)

TO THE MEMBERS OF

HEALTHPROM
(A Company Limited by Guarantee and Not Having Share Capital)
Registered Charity No. 1100459
(Company No: 4887855)

OPINION ON OTHER MATTER PRESCRIBED BY THE COMPANIES ACT 2006

In our opinion the information given in the Trustees Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

Except for the matter referred to above, we have nothing to report in respect of the following matters where Companies Act 2006 requires us to report to you if, in our opinion

adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or

the financial statements are not in agreement with the accounting records and returns; or

certain disclosures of trustees' remuneration specified by law are not made; or

we have not received all the information and explanations we require for our audit; or

the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the Trustees' Annual Report



K.C. Fisher (Senior Statutory Auditor)
For and on behalf of **MYRUS SMITH**
Chartered Accountants and Registered Auditor
Norman House
8 Burnell Road
Sutton, Surrey
SM1 4BW

Date: 25 July 2014

STATEMENT OF FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 MARCH 2014
(Incorporating an Income and Expenditure Account)

HealthProm
(company limited by guarantee and not having share capital)
(COMPANY NO: 04887855)

	Notes	Unrestricted funds 2014 £	Restricted funds 2014 £	Total funds 2014 £	Total funds 2013 £
INCOMING RESOURCES					
Incoming resources from generated funds:					
Voluntary Income (VI)	2	171,408	17,246	188,654	145,486
Investment income (II): deposit interest		63	54	117	178
Other incoming resources		12,194	-	12,194	18,637
Incoming resources from charitable activities:					
Grants	3	-	352,740	352,740	240,555
Total incoming resources		183,665	370,040	553,705	404,856
RESOURCES EXPENDED					
Cost of generating funds:					
Fundraising costs	4	4,211	149	4,360	3,392
Charitable activities:					
Operational programmes	5, 8	55,917	461,706	517,623	443,873
Governance costs	6	4,122	-	4,122	2,806
Total resources expended		64,250	461,855	526,105	450,071
Net incoming (outgoing) resources before transfers	7	119,415	(91,815)	27,600	(45,215)
Net Transfers between funds	9	(65,275)	65,275		
Net movement of funds in year		54,140	(26,540)	27,600	(45,215)
<i>Reconciliation of funds</i>					
Total funds brought forward		11,958	55,584	67,542	112,757
Total funds carried forward		66,098	29,044	95,142	67,542

BALANCE SHEET

AS AT 31 MARCH 2014

HealthProm
 (company limited by guarantee and not having share capital)
 (COMPANY NO: 04887855)

	Notes	2014 £	2013 £
Fixed assets			
Office equipment, fixtures and fittings	10	1,072	545
Current assets			
Debtors	11	99,941	35,491
Cash at bank and in hand		135,421	176,558
		235,362	212,049
Creditors: amounts falling due within one year	12	(141,292)	(145,052)
Net current assets		94,070	66,997
Total net assets		95,142	67,542
Fund balances			
Charitable funds:			
Unrestricted funds: General reserves	13	66,098	11,958
Restricted funds	13,15	29,044	55,584
		95,142	67,542

These financial statements have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

**Approved by the Board of Trustees on 23 July 2014
 and signed on their behalf by**


 Simon Ray
 Chairman

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2014

1. Principal accounting policies

Accounting convention

The financial statements are prepared under the historical cost convention and in accordance with applicable accounting standards. In preparing the financial statements the charity follows best practice as set out in the Statement of Recommended Practice "Accounting and Reporting by Charities" (SORP) issued in March 2005. The incorporated charity took over the activities and assets and liabilities of HealthProm, charity number 1100459 with effect from 1st April 2004.

Going concern

The accounts have been prepared on the going concern basis.

Cashflow

The company is exempt from the requirement to prepare a cashflow statement on the grounds that it is a small company.

Incoming resources

Income is recognised in the period in which the company is entitled to receipt and the amount can be measured with reasonable certainty. Income is deferred only when the charity has to fulfill conditions before becoming entitled to it or when the donor has specified that the income is to be expended in a future accounting period.

Grants from the government and other agencies have been included as income from activities in furtherance of the charity's objects where these amount to a contract for services, but as donations where the money is given with greater freedom of use.

Resources expended and basis of apportioning costs

Expenditure is included when incurred and liabilities are established for all services once provided. Expenditure includes amounts of irrecoverable VAT where charged. Expenditure on operational programmes is recognised in the period in which it is incurred. A designated fund is established for expenditure which has been committed to projects but remains unspent at the year end.

The majority of costs are attributable to specific activities. Certain shared costs are apportioned to activities in furtherance of the objects of the charity by reference to the level of activity as reflected by the amount of staff utilisation. Staff costs and premises expenses are allocated in proportion to the time spent on different activities.

Support costs represent the cost of the head office and the costs incurred by head office based staff, directly providing support for the international programmes including management and supervision where those costs have not been attributed to specific activities in furtherance of the objects of the charity.

Fundraising costs

These include the salaries, direct expenditure and overhead costs of head office staff who promote fundraising, including events.

Governance costs

Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity and include the audit fees and costs linked to the strategic management of the charity.

Capitalisation and depreciation of tangible fixed assets

All assets costing more than £100 are capitalised.

Depreciation is provided on all tangible fixed assets at rates calculated to write off the cost, less estimated residual value, of each asset over its estimated useful life, as follows:

Office equipment, fixtures and fittings - Over five years

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2014

Fund accounting

Funds held by the charitable company are:

Unrestricted general funds - these are funds which can be used in accordance with the charitable objects at the discretion of the Trustees.

Restricted funds - these are funds that 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.

Foreign currencies

Transactions in foreign currencies are translated at the exchange rates prevailing at the date of the transaction. Balances denominated in foreign currencies are translated at the exchange rates prevailing at the year end.

Taxation

As a registered charity, the company is not liable to corporation tax on surpluses arising from its activities.

Incoming Resources from generated funds:

2. Incoming Resources from voluntary donations

	Committed giving £	Donations, appeals and fundraising events £	Total £
Unrestricted 2014	765	170,643	171,408
Restricted 2014	-	17,246	17,246
Total 2014	765	187,889	188,654
Unrestricted 2013	925	125,530	126,455
Restricted 2013	-	19,031	19,031
Total 2013	925	144,561	145,486

3. Incoming Resources from charitable activities:

Grants receivable	2014 £	2013 £
The Big Lottery Fund Grant – Kyrgyz	95,426	-
The GV & SJ Britten Trust	67,541	45,366
European Commission	135,786	20,999
ICCO	-	43,716
DfID	34,845	82,931
British and Foreign School Society	1,592	-
Karen Woo Foundation	10,000	-
SPANNA	4,550	-
Southall Trust	-	4,000
The Funding Network	-	5,463
T&J Meyer Family Foundation	-	10,000
Karl Meyer Foundation	-	6,582
Quaker Peace and Social Witness	-	4,000
Toy Trust	2,500	-
Guernsey Overseas Aid Commission	-	17,000
RA and VB Reekie Charitable Trust	500	500
	352,740	240,556

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2014

Resources Expended

4. Costs of Generating Funds:

Fundraising costs of grants and donations

	2014 £	2013 £
Costs of Fundraising events	4,360	3,392
	<u>4,360</u>	<u>3,392</u>

5. Charitable activities:

Operational Programmes

	2014 £	2013 £
Reducing Maternal and Infant Deaths, Afghanistan	135,446	159,638
Supporting Young Disabled Children, Kyrgyzstan	-	782
Training of Trainers - Respiratory Care, Uzbekistan	-	6,316
Keeping and Finding Families, Tajikistan	167,067	26,763
Community Midwives - Safe Childbirth, Azerbaijan	3,457	-
Summer Camp Holiday, Kyrgyzstan	8,510	6,981
Supporting Disabled Children, Kyrgyzstan	95,828	53,138
Early Years Support Centre, Tajikistan	15,044	34,720
Early Years Support Centre, Tajikistan (DfID funded)	34,845	82,931
Opening School Doors for Disabled Children in Siberia, Russia	1,509	-
	<u>461,706</u>	<u>371,269</u>
Operational Programme support costs	55,917	72,604
	<u>517,623</u>	<u>443,873</u>

Resources expended on operational programmes comprised:

Direct Costs

Professional fees and implementation costs	282,962	238,224
Travel & subsistence	32,631	20,635
Communications	38	61
Publications, Research & Other costs	11,002	7,080

Support Costs

Staff costs	150,117	135,015
Office and Premises costs	37,987	40,711
Communications	2,886	2,147
	<u>517,623</u>	<u>443,873</u>

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2014

6. Governance	2014	2013
	£	£
Audit and Accountancy fees	2,480	2,430
AGM and Strategy Meetings	1,541	79
Trustees expenses for attendance at meetings	101	297
	<u>4,122</u>	<u>2,806</u>
7. Net Incoming Resources for the year	2014	2013
	£	£
These are stated after charging:		
Depreciation	271	495
Audit and accountancy	2,480	2,430
Property rent and service charges	17,392	17,487
Property Council Tax and charges	1,413	1,582
8. Staff Costs and numbers	2014	2013
	£	£
Staff costs were as follows:		
Salaries and wages	111,000	92,684
Social security costs	11,072	8,805

The average number of employees during the year was four (four in 2013). No employee was paid more than £60,000. Directors and trustees are not remunerated but reasonable travel expenses incurred whilst performing their duties are reimbursed (see note 16).

9. Transfers between funds Apportionment

The transfer from the Unrestricted Funds to the Restricted Funds is in respect of HealthProm's contribution to the costs of the projects. The transfer of balances from one project fund to another (see note 15) is an adjustment to clear the previous year's balances on completed projects and has no overall net effect.

10. Tangible fixed assets

Office Equipment Fixtures and Fittings

Cost	£
At 1 April 2013	9,727
Additions	798
Disposals	-
At 31 March 2014	<u>10,525</u>
Depreciation	
At 1 April 2013	9,182
Charge for the year	271
At 31 March 2014	<u>9,453</u>
Net Book Value	
At 31 March 2014	<u>1,072</u>
At 31 March 2013	<u>545</u>

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2014

11. Debtors	2014	2013
	£	£
Project advances	53,682	20,785
Prepayments	9,399	8,099
Other debtors	3,641	6,607
Other debtors: Grants Due	33,219	-
	<u>99,941</u>	<u>35,491</u>

12. Creditors	2014	2013
	£	£
PAYE and NIC	3,045	9,047
Deferred Income	115,126	115,329
Accruals	3,959	6,215
Other creditors	19,162	14,461
	<u>141,292</u>	<u>145,052</u>

13. Analysis of net assets between funds	Unrestricted Funds	Restricted Funds	Total 2014	Total 2013
	£	£	£	£
Tangible fixed assets	347	725	1,072	545
Current assets	104,534	130,828	235,362	212,049
Current liabilities	(38,783)	(102,509)	(141,292)	(145,052)
Net assets	<u>66,098</u>	<u>29,044</u>	<u>95,142</u>	<u>67,542</u>

14. Lease Commitments

At 31 March 2014 the company had annual commitments under non-cancellable operating leases as follows:

	Land and Buildings		Other	
	2014	2013	2014	2013
Expiry Date				
Within 1 year	£10,800	-	-	-
Within 2-5 years	-	£10,800	£1,526	£1,526

HealthProm has an annual rental commitment of £10,800 (exclusive of VAT) plus service charges, in respect of the lease of the office premises which was renewed on 28 September 2007 for a period of eight years.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2014

15. Movement in funds	At 1 April 2013	Incoming Resources	Outgoing Resources	Transfers	At 31 March 2014
	£	£	£	£	£
Opening School Doors for Disabled Children in Siberia, Russia	-	1,592	(1,509)	(83)	-
Community Midwives - Safe Childbirth, Azerbaijan	4,975	-	(3,457)	955	2,473
Reducing Maternal and Infant Deaths, Afghanistan	17,336	88,417	(135,490)	29,737	-
Publications, Russia	431	-	-	-	431
Early Years Support Centre, Tajikistan	1,691	38,233	(49,905)	9,981	-
Keeping and Finding Families, Tajikistan	-	141,299	(167,121)	25,822	-
Summer Camp Holiday, Kyrgyzstan	6,151	1,250	(8,514)	2,253	1,140
Supporting Disabled Children, Kyrgyzstan	-	99,249	(95,859)	(3,390)	-
Project bridge fund	25,000	-	-	-	25,000
	<u>55,584</u>	<u>370,040</u>	<u>(461,855)</u>	<u>65,275</u>	<u>29,044</u>

The movement in funds shows the transfer of funds from balance brought forward from the previous year; the income received during the year; the costs incurred by the projects; and the transfers of funds between projects.

16. Payments to Trustees for services

Total of £101 has been paid out towards trustee expenses during the period of 01 Apr 2013 – 31 Mar 2014 (total of £297 has been paid out during the period of 1 Apr 2012 – 31 Mar 2013).

INCOME AND EXPENDITURE ACCOUNT
FOR THE YEAR ENDED 31 MARCH 2014

(This page does not form part of the statutory accounts)

HealthProm
(Company limited by guarantee and not having share capital)
(COMPANY NO: 04887855)

	General Fund	Projects Fund	Total to 31 March 2014	Total to 31 March 2013
	£	£	£	£
INCOME				
Grant Income – Restricted	-	352,740	352,740	240,555
Gifts (Designated)	150,000	4,386	154,386	108,363
Donations Received	9,500	10,457	19,957	19,499
Proceeds from Fundraising Events and Activities	11,143	2,403	13,546	13,178
Membership fees	765	-	765	925
Bank interest received	63	54	117	178
Premise costs recovered	10,785	-	10,785	14,720
Sundry Income	1,409	-	1,409	7,438
Total Income	183,665	370,040	553,705	404,856
EXPENDITURE				
Project payments to Local Partners	-	237,151	237,151	208,780
Project travel, accommodation, subsistence	-	32,631	32,631	20,635
Project Training and other costs	-	11,040	11,040	5,507
Project Consultants' Fees	-	45,011	45,011	29,445
Project Development Costs	-	-	-	-
Fundraising Costs & Event Expenses	4,211	149	4,360	3,425
Rent, Rates & Services	4,201	14,823	19,024	19,069
Heat & Light	269	949	1,218	1,331
Travel	656	2,311	2,967	5,837
Telephone & postage	637	2,250	2,887	2,147
Stationery, Printing & Photocopying	641	2,286	2,927	1,725
Publications & Subscriptions	272	960	1,232	792
Office Machine Maintenance	197	696	893	866
Premises Expenses	382	1,349	1,731	2,816
Other Office Costs	1,347	4,754	6,101	6,200
Office & Charity Insurance	350	1,237	1,587	1,510
Depreciation	44	227	271	494
Staff Salaries & Employer's N.I.	26,958	95,114	122,072	101,489
Staff Recruitment & Training	136	588	724	1,716
Governance Costs	1,642	-	1,642	506
Bank Charges	8	28	36	70
Audit and Accountancy Fees	2,480	800	3,280	3,900
Consultancy & Professional Fees	19,819	7,501	27,320	31,811
Gross Expenditure	64,250	461,855	526,105	450,071
Trustees Authorised Transfers	65,275	(65,275)		
Total Expenditure	129,525	396,580	526,105	450,071
Total Income less Expenditure	54,140	(26,540)	27,600	(45,215)