INTERNATIONAL MEDICAL CORPS (UK)

England & Wales · Charity number 1093861

Details

Other names	IMC-UK
Status	Registered
Legal form	Charitable company
Company number	04474904
Registered	2002-09-19
Register	View on the Charity Commission register

Contact

Address	Workspace 4 Mode 1-6 Centric Close Oval Road Camden London
Phone	02038709992
Email	info@InternationalMedicalCorps.org.uk
Website	www.InternationalMedicalCorps.org.uk

Activities

Objects: TO RELIEVE SUFFERING, SICKNESS AND POVERTY THROUGHOUT THE WORLD BY PROVIDING MEDICAL AID, HEALTHCARE TRAINING AND HEALTH CARE PROGRAMMES {PLEASE SEE CLAUSE 3 OF THE MEMORANDUM OF ASSOCIATION FOR FURTHER DETAILS).

Activities: International Medical Corps UK works alongside its affiliate International Medical Corps, responding to humanitarian emergencies and communities afflicted by conflict, poverty and natural disaster in more than thirty countries around the world. It achieves this, through the provision of medical aid, health care training and health care programmes.

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Classification

- **How:** Provides Services, Other Charitable Activities
- **What:** Education/training, The Advancement Of Health Or Saving Of Lives, Disability, The Prevention Or Relief Of Poverty, Overseas Aid/famine Relief, Economic/community Development/employment, Other Charitable Purposes
- **Who:** Children/young People, Elderly/old People, People With Disabilities, Other Defined Groups, The General Public/mankind

Geography

- **Area of benefit:** WORLDWIDE
- Afghanistan
- Cameroon
- Central African Republic
- Chad
- Congo (Democratic Republic)
- Ethiopia
- India
- Iraq
- Jordan
- Lebanon
- Libya
- Mali
- Nigeria
- Occupied Palestinian Territories
- Pakistan
- Philippines
- Poland
- Somalia
- South Sudan
- Sudan
- Syria
- Ukraine
- Venezuela
- Yemen
- Zimbabwe
- Camden

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Finances

Period end	Income	Expenditure	Assets	Employees
2025-06-30	£136,357,320	£127,814,692	£21,733,563	34
2024-06-30	£97,903,227	£107,599,188	£14,298,005	33
2023-06-30	£104,070,295	£101,127,523	£23,858,087	28
2022-06-30	£90,984,811	£82,775,975	£21,898,816	25
2021-06-30	£86,227,645	£86,652,657	£11,604,617	26

Trustees

Name	Role	Appointed
ANDREW GECZY	Chair	2002-11-12
Clyde William SUNDBLAD		2014-06-26
DOMINIC O'HAGAN		2023-08-31
Hendrik Jan Cornelis		2021-03-30
NANCY ANN AOSSEY		2002-11-12
Reto Braun		2020-11-06

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INTERNATIONAL MEDICAL CORPS (UK)

England & Wales - Charity number 1093861

Accounts



International Medical Corps UK

INTERNATIONAL MEDICAL CORPS (UK) 2024/2025 ANNUAL REPORT

Company Registration No. 04474904



DEMOCRATIC REPUBLIC OF THE CONGO

INTERNATIONAL MEDICAL CORPS (UK)

2024/2025 ANNUAL REPORT

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International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

Throughout the document, where references to "affiliates" (in plural) are made, they refer to International Medical Corps and International Medical Corps Croatia.

Unless otherwise stated, projects and their statistics referred to in the first part of this report (pages 1-27) are the results of combined International Medical Corps (UK), International Medical Corps and International Medical Corps Croatia global efforts in calendar year 2024 and do not form part of the statutory annual report. Projects and their statistics referred to in the second part of this report (pages 28-73) represent the work of International Medical Corps (UK) only, and covers the 12-month period to 30 June 2025 and forms part of the statutory financial statements and trustees report.



JORDAN

TO OUR SUPPORTERS

Last year, we celebrated a significant milestone—with the founding of International Medical Corps in the United States 40 years ago, we have been saving lives and relieving suffering in countries around the world ever since. With your support, we have provided lifesaving healthcare to millions worldwide, from our first programmes in Afghanistan in 1984 to our global reach today. Thank you for making this journey possible.

With your help, we reach communities struck by conflict, disaster and disease when they need us most. Over the past four-plus decades, we have worked in more than 85 countries and delivered more than $5 billion in services and training to millions worldwide through our global International Medical Corps team. In 2024 alone, your support enabled us to directly help more than 15.1 million people.

For example, you helped us provide lifesaving nutrition services to millions across Sudan, where conflict has created the world's largest displacement crisis, and where more than half the population is experiencing acute hunger. We also offered critical maternal health and nutrition services, as well as training, in countries with high maternal and infant mortality rates—for example, in the Central African Republic, the Democratic Republic of the Congo, Somalia, South Sudan and elsewhere.

In South Sudan, our women's and girls' safe spaces (WGSSs) and community-led initiatives helped women and girls feel safe and supported. Through the South Sudan Humanitarian and Resilience Programme, in the first half of 2025, we engaged with more than 65,000 women and girls across our 17 WGSSs. In these safe spaces, we offered case management, psychosocial support, skills training and opportunities to build strong peer networks. We also continued to foster resilience and independence through village savings schemes, loan associations and livelihood programmes that strengthen women's economic participation and leadership in their communities. We engaged men and boys as allies and worked with local leaders and the government to shift harmful social norms and build systems that protect women's rights. Together, these efforts have created safer, more inclusive communities where women and girls can realise their full potential.

And we continued providing essential services to conflict-affected communities across the Middle East. In Gaza, through our two field hospitals, International Medical Corps has delivered lifesaving care—including emergency, trauma, surgical, nutrition, maternal and newborn health, clean water and sanitation services—to more than 400,000 civilians affected by the war. Our dedicated teams also delivered vital health services and training in Iraq, Jordan, Lebanon, Syria and Yemen.

Training continues to be the cornerstone of our mission, enabling us to help communities survive today's challenges whilst preparing them for future ones. For example, in Ukraine, we continued our seven-part emergency- and trauma-care training programme. We also trained family doctors and general practitioners to address chronic diseases that are often neglected in times of war, and provided psychological first-aid training to civilians, as well as the health workers who care for them—enabling these caregivers to continue their work during difficult times.

Thanks to your generous support, our teams are providing lifesaving care in some of the most difficult and dangerous environments around the world. Because of you, we can continue our lifesaving work, and bring hope and healing to vulnerable families worldwide. For that, we're forever grateful.





Andrew W. Géczy
Chairman
International Medical Corps (UK)





David Eastman
Managing Director
International Medical Corps (UK)

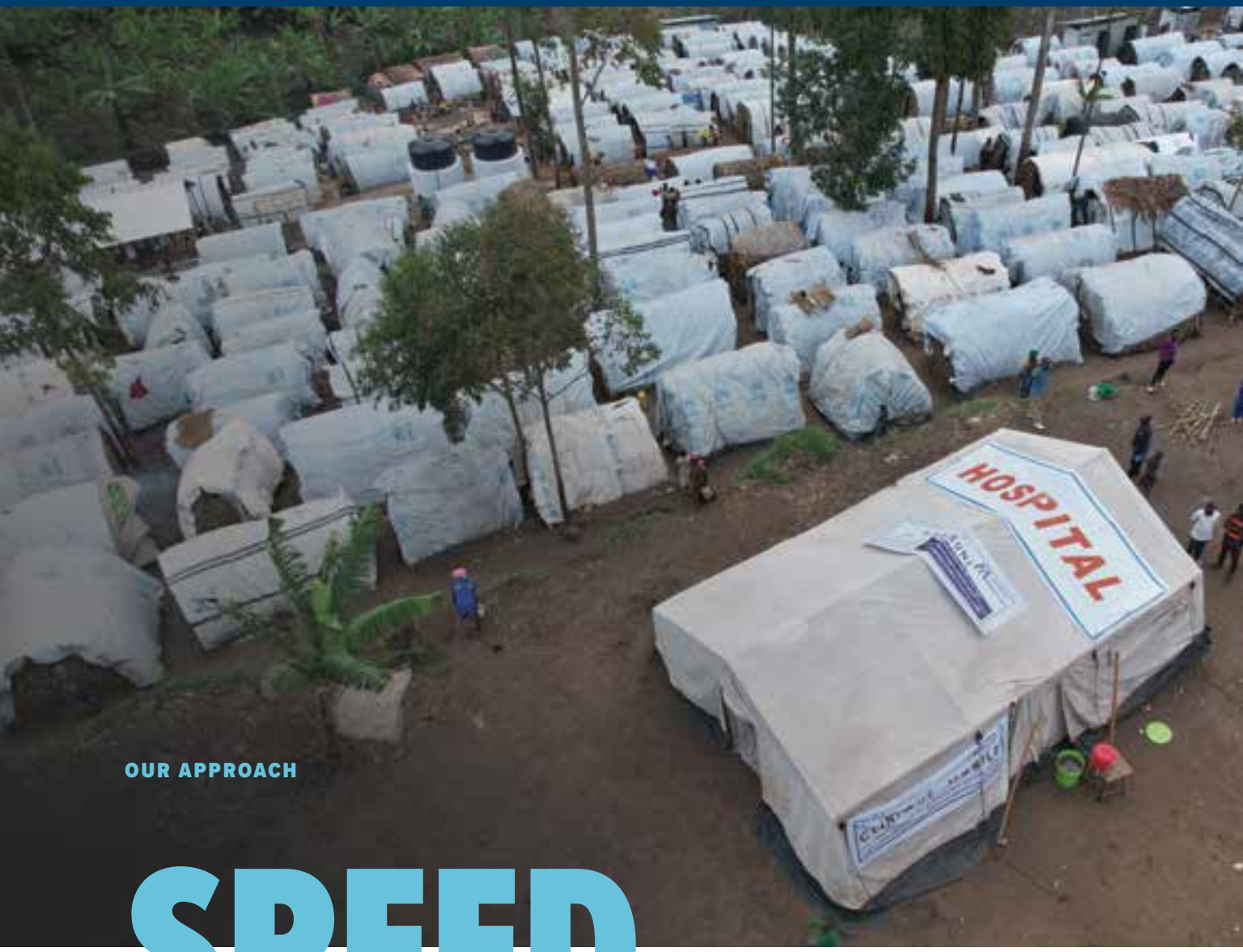
OUR MISSION

WE ARE A GLOBAL FIRST RESPONDER

We deliver emergency healthcare and other essential services to those affected by conflict, natural disaster or disease. We do this no matter where they are in the world or what the conditions may be. We also train people in their own communities, providing them with the skills they need to recover, build self-reliance and shape their future—enabling them to become effective first responders themselves.



CAMEROON



OUR APPROACH

SPEED SAVES LIVES



DEMOCRATIC REPUBLIC
OF THE CONGO

Our emergency response teams deploy quickly to help those in great need—often arriving within hours, even in the most remote and challenging environments.

We draw on our experience gained over 40+ years of responding to disasters in more than 85 countries on six continents. Our staff includes physicians and nurses trained in emergency medicine, supported by specialists in vital healthcare services that range from women and children's health, to nutrition, to mental health and psychosocial support, to protection, to water, sanitation and hygiene, and more.

Our emergency response teams mobilise in the initial hours following a disaster, because speed saves lives. As conditions improve in the weeks that follow, we remain and partner with local communities to help them build a better future. The key to our approach is training, which we use to transfer the latest knowledge and skills into local hands. We strengthen local health systems and work with community leaders, hire and train local staff, develop partnerships and constantly evaluate our progress to ensure quality outcomes.

With thousands of staff members worldwide, 96% of whom are recruited locally, our approach ensures that the knowledge and tools required to prepare for—and respond to—future emergencies are deeply rooted in the community. We work to ensure that if disaster strikes again, residents can be their own first responders.

In 2024–25, our teams worldwide continued to respond to conflicts and disasters. In the face of these challenges, we delivered lifesaving services and training to affected communities in hard-to-reach areas and under challenging conditions.



SYRIA

Emergency Response and Preparedness

Escalating conflict, economic crises and mass displacement have intensified humanitarian needs across the Middle East and Europe. International Medical Corps continued large-scale emergency responses across the region. In Gaza, we operated two field hospitals offering trauma, surgical and maternal care, and offered mobile triage near displacement sites. Our teams reached 477,468 patients in these field hospitals with lifesaving services amidst the ongoing conflict and displacement. In Syria, mobile medical teams provided emergency care to 425,097 people and supported referrals to fixed facilities. Additionally, we provided immediate medical assistance and non-food items to hundreds of thousands of people across the region.

Nutrition and Food Security

In Cameroon, Ethiopia, Jordan, Mali, Nigeria and Syria, we screened 273,937 children under 5 for malnutrition, whilst in Ethiopia and Jordan, we also screened 24,625 pregnant and lactating women for malnutrition. In Syria and Yemen, we admitted 20,177 children under 5 to our therapeutic and supplementary-feeding programme. In Cameroon, Chad, Ethiopia, Nigeria, Syria and Yemen, we provided infant and young-child feeding counselling to 475,185 caregivers. In Venezuela, we delivered 92,613 food baskets to more than 46,300 people across 55 schools in Delta Amacuro state, strengthening food security and improving school attendance.

Health Services Support

In Cameroon, Jordan, Lebanon and Mali, we provided primary healthcare consultations to 243,513 people. Additionally, in Jordan's Azraq and Zaatari refugee camps, we conducted 630 surgeries and 69,350 laboratory tests whilst providing 25,981 paediatric consultations. In Ukraine, we provided 11 health facilities with 7,584 items of medical supplies and essential pharmaceutical equipment and operated four mobile medical teams to restore services in frontline areas. In the Central African Republic, we conducted 2,872,934 malaria tests and treated 1,984,495 cases of uncomplicated malaria.

Mental Health and Psychosocial Support (MHPSS)

We integrated MHPSS into primary healthcare across Cameroon, Jordan, Lebanon and Ukraine, providing more than 63,000 mental health consultations. In Afghanistan, we reached 23,531 people with MHPSS awareness messaging, and in Mali, 5,536 women participated in psychosocial support activities in safe spaces for women and girls.

Water, Sanitation and Hygiene

In Syria, we repaired and rehabilitated water systems, delivering 25 million litres of safe water. This intervention, paired with infection prevention and control support in field hospitals and health centres, helped prevent disease outbreaks. In Gaza, Yemen and Zimbabwe, rehabilitation of water systems helped 89,016 people access safe water, whilst in Cameroon, Gaza, Yemen and Zimbabwe, we reached 115,763 people with hygiene-promotion activities.

Maternal and Child Health

In Cameroon, Gaza, the Central African Republic and Yemen, we supported 12,631 deliveries through skilled birth attendants, and provided antenatal consultations to 23,347 women. In both countries, we vaccinated 56,958 children against common childhood illnesses, such as polio and measles. In the Central African Republic, we supported 69 students in a two-year Auxiliary Midwifery Certification program, providing them with uniforms and classroom supplies.

Violence Against Women and Girls (VAWG)

In Cameroon, Gaza, Lebanon, Nigeria and Yemen, we provided awareness sessions on prevention of VAWG to 183,920 people, and in Cameroon, Lebanon and Nigeria, we provided dignity kits to 1,116 women and girls. In South Sudan, we engaged with more than 65,000 women and girls across 17 women's and girls' safe spaces between January and June 2025. In Nigeria, 180 girls completed a 12-week life-skills session to build their confidence and interpersonal skills, whilst we engaged with 100 men and 120 adolescent boys to foster behavioural change.



EGYPT

GLOBALLY, IN 2024, WE TRAINED:

145,240

people through 1,365 training sessions covering a range of health-related issues.



DECADES OF PROVIDING TRAINING

For more than 40 years, we've provided training to help communities move from relief to self-reliance. For example, we train nurses and midwives in countries with high maternal and newborn mortality rates to help ensure that the next generation arrives in our world safely.

8,382

people in infection prevention and control measures.

1,054

people in maternal and newborn healthcare strategies.



Sudan

Sudan is in crisis. The country is consumed by a civil war, and 25.6 million people—more than half of its population—are experiencing acute hunger. Ongoing fighting has led to mass displacement, indiscriminate bombardment of civilian areas, and widespread damage and destruction of civilian infrastructure, compounded by outbreaks of disease and impending famine. In response, International Medical Corps has broadened the scope of the training we provide there, ensuring that frontline service providers—including community leaders—can better support their communities in the face of these challenges. Last year, we provided training on how to diagnose and treat malnutrition and common diseases, including life-threatening cases of diarrhoea, pneumonia and malaria among children. We trained local health workers in disease surveillance and outbreak response, conducted psychological first-aid training for hundreds of participants across seven states, and trained community leaders, local partners and health workers on how to prevent and respond to violence against women and girls—including how to help survivors and provide ongoing case management. Thanks to these vital training sessions, more people are able to access urgently needed services, despite the country's fractured healthcare system.



Ukraine

As the conflict in Ukraine escalated after February 2022, International Medical Corps increased its training and capacity-building in response. As attacks have battered cities, causing destruction that harms civilians, the number of trauma patients has grown. To help ensure that frontline healthcare workers know the latest lifesaving techniques for responding to such emergencies, International Medical Corps has conducted a seven-part emergency- and trauma-care training program.

We have also provided training to doctors facing a new problem: patients in the Kherson and Mykolaiv regions whose chronic diseases were neglected during conflict, leading to an increase in heart attacks and strokes. In response, International Medical Corps trained doctors to help them address such chronic conditions—and save lives—in a war zone. Finally, our team has also provided psychological first-aid training to health workers and civilians across the country.



Central African Republic (CAR)

International Medical Corps is training the next generation of midwives in CAR. In partnership with the Ministries of Health and Higher Education, we opened the Bria Annex Institute in 2024 to train health professionals in this lifesaving role. The school will increase the number of skilled birth attendants—especially in remote areas—whilst improving access to maternal health services and critical care for women and children, leading to reduced mortality rates in CAR.

In 2024, International Medical Corps responded directly to the needs of more than 15.1 million people in some 30 countries on five continents.



GAZA

AMONG THE RESULTS OF OUR WORK

15.1 MILLION

DIRECT BENEFICIARIES

Of these, more than 3 MILLION were children under 5. Our work also reached more than 50 MILLION others who benefited indirectly from our programs.

145,240

PARTICIPANTS TRAINED

This included clinical and non-clinical health staff, community health workers and volunteers, and government and non-government staff.

8.7 MILLION PRIMARY HEALTH CONSULTATIONS

Of these, more than 2 MILLION were children under 5.

1,766

HEALTH FACILITIES SUPPORTED

In 2024, we provided vital assistance to 1,324 primary health facilities and 138 hospitals, and helped 257 mobile clinics reach people in vulnerable and remote areas.

178,513

CHILDREN VACCINATED AGAINST DIPHTHERIA, PERTUSSIS (AKA WHOOPING COUGH) AND TETANUS

Vaccinating children protects future generations from the dangers of these diseases and builds more resilient immune systems.

BY THE NUMBERS

Maternal and Child Health

The key to our future

Ensured that 175,588 births were assisted by a trained birth attendant.

Nutrition

The foundation of life

Provided 2.6 million people with lifesaving nutrition support and screened more than 4.1 million for malnutrition.



SOMALIA

Water, Sanitation and Hygiene

The essence of good health

Helped more than 3.4 million people with water, sanitation and hygiene needs, and supported the delivery of nearly 400 million litres of clean, safe water.

Violence Against Women and Girls

A violation of rights

Offered protection and support to more than 1.7 million people living with the threat or reality of violence in their daily lives.

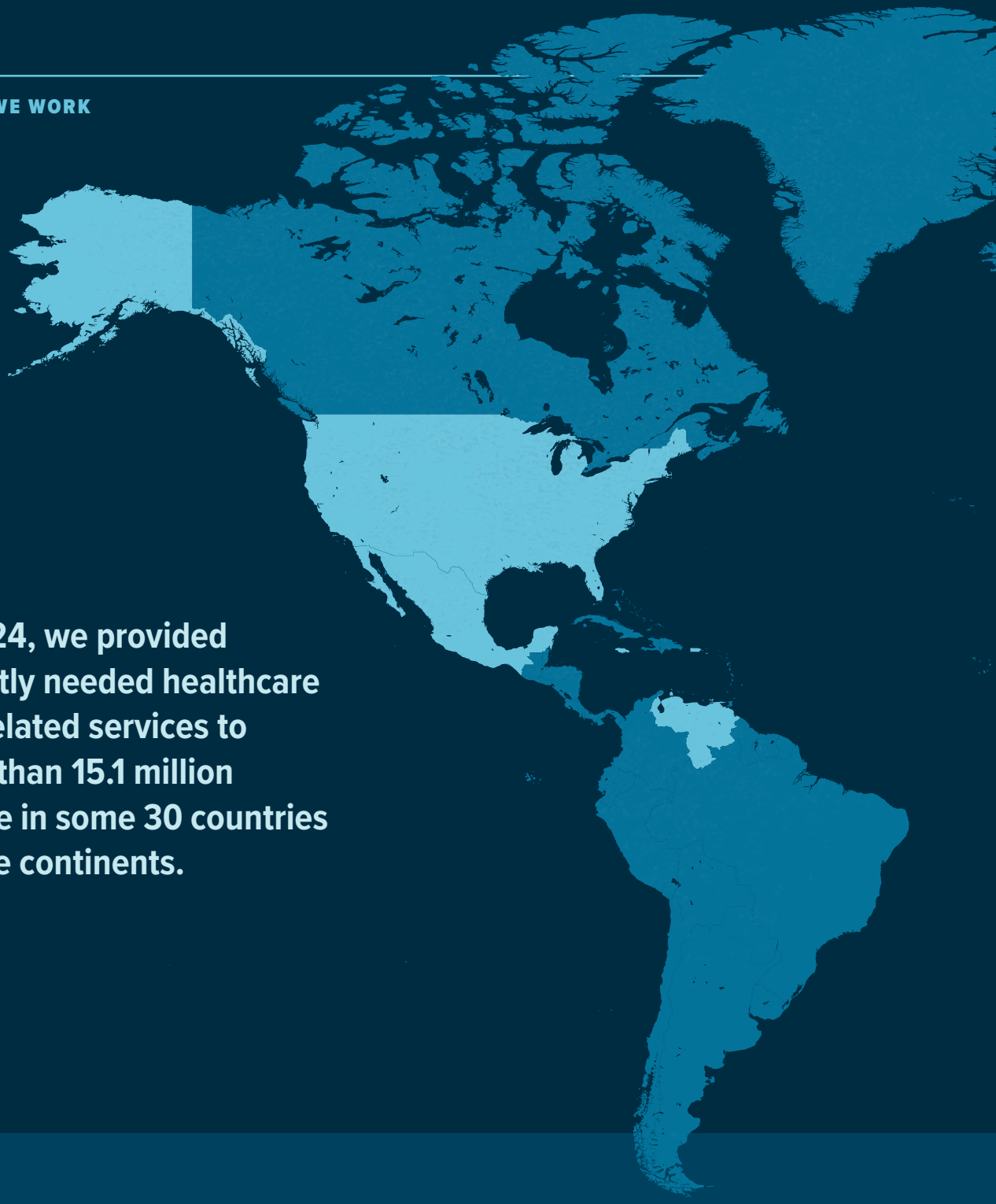
Mental Health and Psychosocial Support

The invisible wounds

Provided services to 797,328 people through hundreds of facilities, mobile teams and other means of delivery.



WHERE WE WORK



In 2024, we provided urgently needed healthcare and related services to more than 15.1 million people in some 30 countries on five continents.

AMERICAS

Jamaica*

United States & Territories*

Venezuela*

AFRICA

Cameroon*

Central African Republic*

Chad*

Democratic Republic of the Congo*

Ethiopia*

Libya*

Mali*

Morocco*

Nigeria*

Somalia*

South Sudan*

Sudan*

Zimbabwe*



EUROPE

Poland
Ukraine*

MIDDLE EAST

Gaza and the West Bank*
Iraq*
Jordan*
Lebanon*
Syria*
Türkiye
Yemen*

ASIA

Afghanistan*
India
Japan
Myanmar*
Pakistan*
Philippines

**Countries where International Medical Corps (UK) programmes were funded during the 12 months to 30 June 2025.*



ZIMBABWE

Influencers Step Up

Throughout 2024, influential supporters helped to raise our profile by posting about our ongoing work and emergency responses and encouraging donations.

- Academy Award-winning actress and activist **Marlee Matlin** became our newest Global Ambassador, helping to raise awareness of International Medical Corps' mission.
- Global Ambassador **Sienna Miller** promoted us on Ruthie's Table 4 Podcast, sharing her experience seeing our work firsthand when she travelled to South Sudan.
- **Judy Greer** travelled to Jordan to learn about our lifesaving work with women and children, meeting with our teams and the people we serve, and posted about her experiences there.
- **Kevin Curry** met with Syrian refugees whom we support in Jordan, sharing a cross-cultural experience as he cooked Texas chili and they showed him how to make a local recipe, delighting his 1 million+ online followers.
- To mark International Medical Corps' 40th Anniversary, **Kevin Curry**, **Judy Greer**, **Maz Jobrani**, **Sanaa Lathan**, **Sienna Miller** and **Ashley Park** contributed to a video celebrating the milestone.
- To support our response to the LA wildfires, several of our supporters created videos and shared our content on their platforms—including YouTube legend **Mr. Beast**, **Beyoncé's** hair-care brand **Cecred**, actress **Alice Hewkin** and Global Ambassadors **Judy Greer**, **Sanaa Lathan** and **Kevin Curry**.

Judy Greer



Kevin Curry



Online Impact

As we responded to emergencies abroad and at home in 2024, our committed supporters promoted our work and fundraised for our efforts to deliver essential services, supplies and training worldwide.

- In April, Oakland-based supporter **Yasmin B.** partnered with local restaurants to raise awareness and funds for International Medical Corps' Gaza relief efforts. Her multi-day efforts raised nearly $4,000.
- International Medical Corps continued to partner with **Novica** for our online Artisan Shop (shop.internationalmedicalcorps.org), which features beautiful, handmade crafts from around the world that help to support artisans and their communities. International Medical Corps receives 25% of the net proceeds for every purchase.
- Influencers **Caroline Arapoglou**, **Michelle Marie Colon**, **Kevin Curry**, **Alice Hewkin**, **Georgina Miranda**, **Priyanka Shah** and **Megan Mimi Williams** promoted our Artisan Shop on Giving Tuesday.



GAZA



LEBANON

Providing Passenger Transport and Cargo Shipments of Critical Supplies

Airlink

Airlink has been a trusted partner of International Medical Corps since 2015, supporting emergency response operations through donated cargo and passenger transportation. In 2024, Airlink facilitated the transportation of 74,817 kilos of cargo for International Medical Corps and coordinated 19 passenger flights to support humanitarian response efforts in the US, Gaza and Brazil.

As part of our response to Hurricane Helene, Airlink provided passenger flights to transport critically needed volunteers to the Southeast US. It also supported 11 cargo shipments to Israel, Egypt and Jordan for our response in Gaza, including shipments that contained our field hospital, additional operating theatres, essential medicines, and medical supplies and equipment. Airlink also coordinated passenger flights to the Middle East for staff members supporting the response. And it helped transport more than 9,600 hygiene and wound-care kits that we donated in response to a request from the International Federation of the Red Cross after flooding struck Brazil.

Hulo

In 2024, International Medical Corps partnered with Hulo, the humanitarian logistics cooperative, to provide free cargo shipments via 11 flights to our emergency responses in Afghanistan, Gaza and Lebanon. Hulo works with the European Union Humanitarian Airbridge programme to help humanitarian organisations organise shared flights, enabling humanitarians to reach remote areas with lifesaving medicines, supplies and equipment. For example, last year, International Medical Corps' partnership with Hulo enabled us to deliver critical supplies to our field hospitals in Gaza, despite the logistical challenges of reaching those areas during an active conflict. The ongoing partnership will continue to help us supply teams operating in difficult environments.

International Medical Corps (UK) is an international humanitarian nongovernmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

INTERNATIONAL MEDICAL CORPS-UK BOARD OF DIRECTORS

Andrew W. Geczy
CHAIRMAN

Hendrik Cornelis
SECRETARY

Nancy A. Aossey
Member

Reto Braun
Member

Dominic J. O'Hagan
Member

C. William Sundblad
Member



JORDAN



Global Ambassador Kevin Curry

GLOBAL AMBASSADORS

Kevin Curry
Influencer, Activist

Lily Donaldson
Model, Activist

Judy Greer
Actress, Activist

Maz Jobrani
Comedian, Actor

Sanaa Lathan
Actress, Humanitarian

Marlee Matlin
Actress, Activist

Sienna Miller
Actress, Activist

Ashley Park
Actress, Humanitarian

Inanna Sarkis
Actress, Activist

ADMINISTRATIVE DETAILS OF THE CHARITY, THE TRUSTEES AND ADVISORS

TRUSTEES

Andrew W. Géczy
CHAIRMAN

Nancy A. Aossey

Reto Braun

Hendrik Cornelis
SECRETARY

Dominic J. O'Hagan

C. William Sundblad

MANAGING DIRECTOR

David Eastman

FINANCE DIRECTOR

Fahmida Wadud-Muhit

REGISTERED OFFICE

Workspace 4, Mode
1-6 Centric Close
Oval Road, Camden
London
NW1 7EP

TELEPHONE
WEBSITE

0207 253 0001
https://www.internationalmedicalcorps.org.uk

COMPANY REGISTRATION NUMBER

04474904 (England and Wales)

CHARITY REGISTRATION NUMBER

1093861

AUDITOR

Buzzacott Audit LLP
130 Wood Street London
EC2V 6DL

BANKERS

Barclays Bank PLC
5th Floor
Level 27
1 Churchill Place London
E14 5HP

The trustees, who are also directors of the company for the purposes of the Companies Act 2006, present their report along with the financial statements of the charity for the year ended 30 June 2025. The financial statements have been prepared under the accounting policies set out therein and comply with applicable law and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102).

The report as a whole has been prepared in accordance with Part 8 of the Charities Act 2011. The information in the sections headed 'Strategic Report' constitutes the strategic report as required by the Companies Act 2006 (strategic report and directors' report) Regulations 2013.

The required information to be presented in a directors' report under the Companies Act 2006 is incorporated in the remaining sections of the report.

STRUCTURE, GOVERNANCE AND MANAGEMENT

TRUSTEES AND ORGANISATIONAL STRUCTURE

International Medical Corps (UK) ('the Charity') was incorporated as a company limited by guarantee in England and Wales on 2 July 2002 and registered as a charitable organisation with the Charity Commission on 19 September 2002. Activities commenced on 1 November 2002.

International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation that shares the same mission, and International Medical Corps Croatia, an association registered in Croatia. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes on the ground in accordance with the terms and conditions of its grants. During the year, more than $164 million of the Charity's programmes were delivered in partnership with International Medical Corps (2024: $135 million). This represents an 22% increase (2024: 11% increase compared to 2023) in activities worldwide over the previous year. International Medical Corps (UK) also maintains an Administrative Services Agreement with International Medical Corps Croatia to share certain services in connection with its operation.

For ease of reference, International Medical Corps (the non-profit organisation registered in California) will be referred to as International Medical Corps. The UK charity will be referred to as International Medical Corps (UK).

The trustees govern in accordance with the Memorandum and Articles of Association of International Medical Corps (UK) and all subsequent amendments.

The trustees of the Charity have the powers to appoint and remove a trustee. The Board of Directors of International Medical Corps has the right to appoint one trustee (and any successor) by notice in writing addressed to the Secretary of the Charity, and any person so appointed shall become a trustee immediately upon receipt by the Secretary of such notice.

International Medical Corps (UK) adheres to and supports the development of the Sphere Project's Minimum Standards in any disaster response. International Medical Corps (UK) is also informed by the guiding principles of CHS Alliance's Code of Good Practice for the Management and Support of Field Staff.

The Board of Trustees is the governing body for International Medical Corps (UK) and currently comprises six members who aim to meet several times each year. Additional meetings can be called at the request of the Chair. For the 2024–25 financial year, the board of trustees met in December 2024 and June 2025. The list of trustees who served in the year is shown on page 28.

Risk, compliance and external audit functions sit with the board.

As the governing body for the Charity, the trustees take decisions and approvals on a board level regarding strategic and operational risks, as follows:

- **Strategy.** Determine and approve International Medical Corps (UK)'s strategic direction and annual business plan, scrutinising the extent to which the Charity has been able to meet its charitable objectives.
- **Management.** Review and provide oversight of the implementation of the Charity's country programmes.
- **Financial Management and Compliance Requirements.** Review and approve annual budgets, statutory statements and ensure full compliance with all constitutional, legal, regulatory and statutory requirements.
- **Risk.** Review and approve International Medical Corps (UK)'s procedures for risk management, and ensure there is a framework of structures, policies and processes in place for the organisation and the board of trustees.

STATEMENT ON APPROACH TO SAFEGUARDING

International Medical Corps (UK) and its affiliates are committed to delivering programming that is safe, accountable, and inclusive in order to address the inherent inequities of power that can exist in humanitarian settings, by putting the people affected by crisis at the centre of assistance and ensuring there are systems in place to elevate the needs of people and communities affected by crises. Safeguarding is a means of risk prevention and mitigation, which reflects our responsibility to ensure our personnel, operations, and programmes do no harm to the people with whom we work, with a particular focus on protecting those people who may be most vulnerable to exploitation and/or abuse. International Medical Corps (UK) receives all relevant reports of safeguarding violations from its US affiliate. As per the Charity's governance structure, the Managing Director and senior staff oversee the charity's responsibilities in regard to safeguarding.

The Charity's US affiliate continues to reinforce its safeguarding capacity and capability through an organisation-wide approach, which includes incorporation of guidance received from the Foreign, Commonwealth & Development Office (FCDO) of the UK Government, other donors, and the Charity Commission.

The following policies of International Medical Corps (UK) outline the Charity's approach to managing safeguarding matters. The policies are reviewed and updated periodically.

- Code of Conduct and Ethics
- Safeguarding Policy, encompassing child safeguarding, protection from sexual exploitation and abuse, safeguarding adults at risk, prevention of trafficking in persons
- Whistleblower Policy
- Guidance on Sub-Recipient Safeguarding and Ethical Conduct requirements
- Anti-Harassment and Bullying Policy
- Conflict of Interest Policy/Staff Integrity Policy
- Disciplinary Rules, including grievance procedures
- Recruitment and Selection Process
- Health and Safety Policy
- Modern Slavery Statement

In addition to the policies, staff are also required to complete mandatory training and awareness-raising courses that include:

- Code of Conduct and Ethics
- Prevention of Trafficking in Persons
- Child Safeguarding
- Preventing Harassment in the Workplace
- Prevention of Sexual Exploitation and Abuse

This training is completed at induction, and refresher training is completed on an annual basis.

The Charity's US affiliate continues to reinforce the following key safeguarding actions taken during the recent years.

THE SAFEGUARDING TASK FORCE

The Safeguarding Task Force provides focus, leadership and oversight over all global safeguarding initiatives. The Safeguarding Task Force is a multi-disciplinary team comprising staff from key departments, including Domestic and International Affairs, Legal, Human Resources, Ethics and Compliance, Technical Unit and International Programmes. The Safeguarding Task Force workplan covers the development and implementation of safeguarding initiatives, including policy review and updates, prevention and protection, survivor assistance guidance, capacity strengthening, training and country support.

POLICY DEVELOPMENT AND IMPLEMENTATION

The umbrella Safeguarding Policy encompasses:

- child safeguarding
- protection from sexual exploitation and abuse
- safeguarding adults at risk
- prevention of trafficking in persons

Sexual harassment in the workplace is covered under the Policy for Protection from Harassment, Bullying and Sexual Misconduct. All policies are reviewed and updated periodically.

SAFEGUARDING POLICY IMPLEMENTATION GUIDE AND TOOLKIT

The Safeguarding Policy Implementation Guide and Toolkit, developed by the Safeguarding Task Force, supports understanding and implementation of the International Medical Corps Safeguarding Policy. The guide describes priority actions that need to be undertaken by country teams to ensure the full implementation of the Safeguarding Policy at the country and programme/project level.

Each priority action has a brief explanation of its importance, an overview of the action itself, how to document or demonstrate that an action has been completed, and guidance on where further tools and information can be found within the accompanying Safeguarding Implementation Toolkit, in order to implement the actions.

The accompanying Toolkit contains tools, information and guidance to support the implementation of the Safeguarding Policy. Examples of the tools include a Safeguarding Action Plan Template, the Terms of Reference for the Safeguarding Focal Points and the Survivor Support Guidelines.

TALENT ACQUISITION

Safeguarding is included in the corporate staff-recruitment process, from advertisement to hiring.

Key actions include the following steps:

- safeguarding risks are considered for each role.
- behavioural-based safeguarding questions are included in the headquarters level interview process for all positions, including field recruitments.
- managers' responsibilities for ensuring safeguarding measures for volunteers, employees and partners are routinely included in job descriptions for international staff and are part of the management and staff performance-appraisal process.

International Medical Corps (UK) and its affiliate International Medical Corps participate in the Inter-Agency Misconduct Disclosure Scheme, facilitated by the Steering Committee for Humanitarian Response. In accordance with this, we will request information from an applicant's previous employers about any findings of sexual exploitation, sexual abuse and/or sexual harassment during employment, or incidents under investigation when the applicant left employment.

SAFEGUARDING FOCAL POINTS

More than 100 Safeguarding Focal Points are identified at the country level. Safeguarding Focal Points are nominated by the Country Director. Training resources, materials and support include regular orientation sessions, terms of reference, extensive trainings and regular webinars, and a resource library on our intranet.

Safeguarding Focal Points' responsibilities include training, programme support as related to Safeguarding (e.g. proposal development), coordinating with the Headquarters Safeguarding Taskforce, and liaising with other focal points from partner agencies and working groups.

Staff globally receive an annual refresher training that covers Safeguarding. Our Safeguarding Focal Points are responsible for ensuring that this training is completed, in coordination with our Learning & Development team at Headquarters.

SAFEGUARDING VIOLATIONS—CASE MANAGEMENT

Reports of violations of International Medical Corps' safeguarding policies are referred to the Ethics and Compliance Department, which conducts investigations in consultation with the Safeguarding Case Team, an interdisciplinary group of senior leaders. Individuals who are found to have violated International Medical Corps' policies are subject to disciplinary action, up to and including termination. In addition to this, the Safeguarding Task Force, also consisting of senior leaders from the departments most involved, analyses safeguarding data over time to identify risks and emerging themes. Key lessons learned through this process inform future safeguarding policy updates and practice, as part of an institutional culture of constantly striving to improve.

SURVIVOR/VICTIM SUPPORT

International Medical Corps works to ensure that survivors of safeguarding violations receive appropriate and timely support, including medical, psychosocial and other services, according to their needs and wishes. Survivors are also informed of their rights to report incidents to police and/or other relevant authorities. In contexts where reporting to authorities may be indicated, International Medical Corps' Safeguarding Case Team advises survivors and consults with Legal Counsel to determine the best course of action. To the extent possible, survivors' wishes guide decisions about the types of support received, and survivors are fully informed of their options and rights.

SAFEGUARDING RISKS OF DOWNSTREAM PARTNERS

Downstream partners are required to conduct all activities under sub-agreements in a manner consistent with international laws, humanitarian principles and donor regulations. Subrecipients are prohibited from engaging in any type of harmful misconduct, including but not limited to sexual exploitation, abuse, harassment and trafficking. Subrecipients are required to inform International Medical Corps of any safeguarding issues that arise under the sub-agreement. Safeguarding-specific requirements are included in the downstream partner risk-assessment guidelines.

DEFINING RISK OWNERS

Ownership of safeguarding risks is documented in the organisational risk register of the Charity and its US affiliate, explicitly stating that the risks are owned by executive staff. The Charity's trustees are updated at least twice a year.

SAFEGUARDING—PREVENTION MEASURES

A comprehensive approach to maintaining and strengthening prevention measures includes incorporating protection mainstreaming into programme design and implementation and training of staff to enhance this approach, as well as the utilisation of a risk mitigation approach to dealing with safeguarding violations.

THE ENVIRONMENT

International Medical Corps (UK) adheres to and promotes policies geared towards environmental protection.

Examples of these policies include:

- co-signing the global pledge on Energy and Infrastructure
- conducting risk and impact assessments for the safe disposal of healthcare waste and expired medicine.

- implementing alternative energy and green initiatives, such as solar-powered communal water systems, resulting in sustained access to water for more than 432,626 community members, preserving over 54,259 litres of fuel in 2024.
- replacing diesel pumps with solar systems in several WASH programmes, reducing carbon emissions.

The Charity is dedicated to upholding high environmental compliance standards and will persist in supporting a cautious approach to environmental challenges. The organisation will undertake initiatives to encourage greater environmental responsibility and promote developing and disseminating environmentally friendly technologies. The organisation contributed to the development of donor minimum environmental requirements, and implemented environmental assessment guidance for the International Medical Corps (UK) donors of Global Affairs Canada and UNICEF for Climate Resilience. International Medical Corps' strategy is designed to comply with various policies, global standards, and management practices. It addresses explicitly environmentally sensitive activities such as water supply, sanitation, and biomedical waste management.

The International Medical Corps has developed comprehensive guidelines to reduce its environmental impact, especially in logistics, the supply chain, and WASH infrastructure interventions. This includes transporting goods and staff, sourcing, packaging, and power supply. The organisation is committed to implementing best practices and recommendations from esteemed agencies such as Groupe URD, IFRC, WHO, and WFP. Additionally, International Medical Corps is actively involved in initiatives like "WREC" (Waste Management And Measuring, Reverse Logistics, Environmentally Sustainable Procurement And Transport, And Circular Economy) and WORM (the "Joint Initiative") that involves collaborating with other humanitarian organisations to review, develop, and share tools and methodologies aimed at reducing the carbon footprint of operations. The Waste in Humanitarian Operations: Reduction and Minimisation (WORM) EU-funded project focuses on waste management during emergencies. International Medical Corps is leading efforts to identify best practices for waste management during Emergency Medical Team deployments.

Since 2022, International Medical Corps measure its CO2 emissions generated globally by transport (international shipment and vehicles) and power production (including since 2023 power grid – scope 2 emissions), and also international travels emissions. The results are used to identify improvement opportunities and initiatives to be developed in close collaboration with country teams (such as carpooling or solarization of facilities).

International Medical Corps, as member of the Fleet Forum, has committed to report fleet related emissions on annual basis (enabling comparison with other organisations), promote vehicle sharing with other INGO and transition to vehicles with lower negative impact on the environment (i.e., EURO 3 or higher).

International Medical Corps continues to develop and disseminate eLearning to improve awareness and provide solutions for emissions reduction. In 2024, an additional training module was developed promoting sustainable practices in warehouse and stock management.

The Charity offers staff environmentally friendly initiatives such as the Cycle to Work Scheme, which is about promoting an alternative way to travel to work and allowing staff to work from home on some days as part of its flexible working policy, contributing to staff welfare and less pollution due to reduced daily commute to work.

The Charity was a low-energy user during the reported period and is not reporting under the UK Government's Streamlined Energy and Carbon Reporting (SECR) requirements.

STATEMENT ON MODERN SLAVERY

International Medical Corps (UK) publishes its modern slavery statement every year, committing to prevent modern-day slavery and human trafficking within the organisation and its supply chains. The Charity actively and continuously works with its affiliates to reduce and eliminate this risk. New employees are informed about organisational policies that contribute towards eliminating modern day slavery by the Human Resources function during staff onboarding orientation. Additionally, all employees are provided with annual training about the prevention of trafficking in persons, sexual exploitation and abuse, and child labour. Related information is made available to employees on the organisation's intranet, as well as through posters displayed in all field and headquarters offices. In addition, International Medical Corps' Global Safeguarding Policy has been updated, made pursuant to section 54(1) of the Modern Slavery Act 2015 (UK). It mandates that all suspicions are reported and are then reviewed and investigated by the Ethics and Compliance Investigation Unit and the Safeguarding Case Team.

In 2017 International Medical Corps revised the vendor Code of Conduct which must be signed by any supplier before entering into business with International Medical Corps. It includes a chapter on the prohibition of human trafficking. Provisions are also inserted in procurement Master Terms and Conditions. Failure to comply constitutes a breach of an essential term of the Contract, leading to revoking the

vendor's registration with International Medical Corps and inclusion of the company on the watch list maintained by our Ethics & Compliance department.

KEY MANAGEMENT PERSONNEL

The key management team of the Charity consists of the trustees, the Managing Director and the senior management team. The trustees have delegated management of the Charity's operations to the Managing Director, who is supported by the senior management team as follows:

International Medical Corps (UK)-contracted staff:

- Senior Director of International Programmes
- Senior Director of Finance, Grants and Contracts
- Senior Director of Human Resources

International Medical Corps-contracted staff:

- Chief Operating Officer
- Vice President, Finance and Administration
- Chief Advancement Officer
- Vice President, Humanitarian Leadership and Partnerships, Domestic and International Affairs

For the purposes of setting employee remuneration, delegation has been given to the Charity's Managing Director, who is also the Administrative Director for this purpose. In setting the pay and benefits of the UK-contracted senior management team, the Managing Director refers to the company's pay policy, which is periodically reviewed. Salaries and benefits are benchmarked against reliable industry data. The salary scale, including the pay policy, is approved by the Managing Director and in line with the Charity's pay policy.

The remuneration of the Managing Director is set by the trustees and in line with the Charity's pay policy and scale.

TRUSTEES' RESPONSIBILITIES

The Trustees, who are also Directors of International Medical Corps (UK) for the purposes of company law, are responsible for preparing the Trustees' Report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practices, or GAAP).

Company law requires the trustees to prepare financial statements for each financial year that give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of such resources, including the income and expenditure of the charitable company for that period. Under company law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure of the charitable company for that period.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice Accounting and Reporting by Charities;
- make judgements and estimates that are reasonable and prudent; state whether applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Each trustee confirms that:

- so far as the trustee is aware, there is no relevant audit information of which the charitable company's auditor is unaware; and,
- the trustee has taken all the steps that they ought to have taken as a trustee to make themselves aware of any relevant audit information, and to establish that the charitable company's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of S418 of the Companies Act 2006.

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

OBJECTIVES AND ACTIVITIES

PUBLIC BENEFIT

In reviewing the Charity's aims and in planning future activities, the trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit. The trustees believe that the Charity

benefits the public through the achievement of its goals and objectives by:

- providing timely and appropriate humanitarian aid to vulnerable victims of wars and disasters;
- building the capacity of local healthcare providers to improve the standards of healthcare for local communities and create more sustainable systems;
- contributing to the UK's agenda for international development and, in particular, the achievement of the Sustainable Development Goals, including the prevention of and response to violence against women and girls;
- contributing to the containment and reduction of infectious diseases globally; and
- contributing to the understanding of the impact of various health issues affecting the vulnerable, through the UK/EU media and humanitarian networks.

INTERNATIONAL MEDICAL CORPS (UK)'S GOALS

To mobilise sufficient resources to realise International Medical Corps (UK)'s charitable objectives and humanitarian mission.

As per International Medical Corps (UK)'s Memorandum of Association, the objectives of the organisation are to:

a. relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and programmes, and to promote good health and preserve lives by providing medical supplies and trained medical professionals particularly, in areas that have suffered through war and conflict; and

b. further the activities of International Medical Corps, a non-profit corporation registered in California USA, as are exclusively charitable and that may advance the objective set in to (a) above.

International Medical Corps (UK)'s mission is to provide humanitarian assistance, healthcare and training to communities affected by disasters, conflict and poverty, so they can return to self-reliance.

During the reporting period, the Charity continued to report on six main areas of work:

- strengthening health capacity
- emergency response and preparedness
- mental health and psychosocial support
- woman and children's health
- clean water, sanitation and hygiene
- nutrition and food security

MONITORING OF ACTIVITIES

Monitoring of project activities at International Medical Corps aims to achieve three objectives: 1) assess progress of project activities/outputs; 2) identify deviations and gaps/ weaknesses during project implementation and any problems or obstacles encountered; and 3) provide targeted and relevant monitoring data that allows International Medical Corps to develop an action plan to overcome gaps and weaknesses throughout the life of the project.

International Medical Corps (UK) continuously monitors programme activities through effective internal monitoring, supervision and reporting mechanisms. It provides regular programmatic and financial reports on project activities and progress as required by all its institutional donors and other stakeholders. Additional internal programme reports and departmental updates supplement this information for day-to-day management. The Charity also maintains automated recruitment, financial and programme records to track performance and grant compliance.

Routine project monitoring is conducted at the field levels by the project technical and Monitoring & Evaluation (M&E) teams through standard monitoring and reporting procedures and forms to monitor services and goods provided by International Medical Corps. Monitoring activities include monitoring the quantity and quality of services and goods provided, either through supportive supervision, observation, record review, alternative methods, and teams use standardised checklists and tools that are appropriate for the context. Some activities that are particularly sensitive may be monitored indirectly, such as through client satisfaction surveys or review of anonymised case management files by the appropriate and authorised personnel. The project team focuses more on the technical aspects of services provision to ensure quality and compliance with minimum international standards. However, the M&E team conducts independent monitoring of services International Medical Corps provides at various facilities, including health facilities, child friendly spaces, and women and girls safe spaces. The findings from monitoring are regularly shared with the project team for their follow-up and corrective measures. Monitoring of activities also considers issues around patient or case privacy and ensures that personal identifiable information is handled in a sensitive manner to preserve the dignity and safety of all beneficiaries.

The International Programmes team through the technical teams reinforces supportive supervision and monitoring and communications systems and procedures to track results. International Programmes collaborates with the Global Monitoring, Evaluation (M&E) unit in the collection

and analysis of programme achievements and addresses constraints to progress in real time through visits, calls and written communications. Monthly calls with country teams also review the achievement of project targets and progress, spending and procurement, as presented by project managers and their technical, financial and logistics colleagues. In addition, International Programme Senior Directors, Directors, Programme Managers and Programme Officers maintain regular communications with country teams to identify and address risks and provide support, working with regional platform department focal points.

Outcome level monitoring is conducted at the beginning or end of the projects and/or on a need basis to assess indicators such as measures of access to services, knowledge, attitude and practices, well-being and goal achievement of beneficiaries participating in services and activities. International Medical Corps (UK) uses standardised and culturally appropriate age and gender specific well-being measures and systematically gauges skill-building prior to and after interventions. In line with donor requirements, International Medical Corps (UK) also carries out internal or external evaluations to assess the effectiveness of our projects and programmes.

Staff, in various capacities, visited country programmes during the year to provide relevant technical support. During the reported period, countries visited included Afghanistan, Ethiopia, Cameroon, Central African Republic (CAR), Mali, Democratic Republic of the Congo (DRC), Chad, Venezuela, Syria, Lebanon, Gaza, Jordan, Ukraine, Yemen, Poland, Pakistan, South Sudan, and Zimbabwe where we provided field teams with programmatic and technical support.

The Charity's affiliate delivers programmes through four geographical, cross-functional platforms (Middle East and Europe, Central & Southern Africa, North & East Africa and Asia, and Global), which include dedicated interdisciplinary teams of specialists in programmes, technical, finance, resource development, communications, logistics and supply chains, human resources and security. Functional specialists provide effective and efficient business support to field programmes and facilitate speedy and effective responses to disasters in the respective regions.

International Medical Corps (UK)'s Managing Director is a member of the global executive leadership team, and advises and helps evaluate opportunities, challenges and risks associated with implementation of programmes undertaken by the Charity's US affiliate. In addition, International Medical Corps (UK) relies on its US affiliate's Internal Audit, Compliance and Safeguarding Task Force's independent field reviews, evaluations and reports. Risk assessment and compliance issues are flagged in various functional units' regular reviews, and critical issues are reported back to the senior leadership team. Senior International Medical Corps' staff brief the trustees during board meetings on key developments and on risk mitigation measures that have been put in place.

STATEMENT ON CONTRIBUTIONS BY VOLUNTEERS

International Medical Corps (UK) continues to actively encourage members of the public to become involved in its work, both in the UK, to raise awareness of international development issues, and overseas, to support its operations.

STRATEGIC REPORT

ACHIEVEMENTS AND PERFORMANCE

Organisational Performance

Over the course of the financial year to June 2025, International Medical Corps (UK) provided assistance valued at $164,733,296 (2024: $135,518,451) to vulnerable populations in 26 countries (2024: 23). This included the donated medical and other supplies received for distribution.

International Medical Corps (UK) supported, through its US affiliate, 1,541 staff positions in 26 countries (2024: 2,538 staff positions in 23 countries), providing essential services to beneficiaries. Globally, International Medical Corps' activities served 15,185,025 unique beneficiaries in 2024. Globally, International Medical Corps' activities served 6,678,728 direct beneficiaries between 1 July 2024 and 31 December 2024 and 8,037,937 direct beneficiaries between 1 January 2025 and 30 June 2025.*

International Medical Corps (UK) contributed 37% of global funding to this mutual achievement.

*Please note that beneficiary totals may overlap across calendar years

SUMMARY OF MEASURES USED TO ASSESS INTERNATIONAL MEDICAL CORPS (UK)'S PERFORMANCE

International Medical Corps (UK) continues to use a Balanced Business Scorecard specifying the following main objectives.

GOAL	COMMENT
Timely and efficient delivery of programme activities	The Charity successfully delivered activities of the value of $164M (2024: $135M).
Control over corporate costs	The Charity has managed corporate expenditure within the provisions of its annual budget and according to the terms specified by its donors.
Diversification of income	The Charity continued to be funded by a wide range of government and UN agencies, as well as private sector donors.

PEOPLE: 'Always supporting its people to develop professionally whilst delivering the Charity's mission.'

GOAL	COMMENT
Staff are motivated to achieve and exceed performance expectations	Charity continues to use performance management and development system that provide a platform for managers and their employees to engage in goal setting, performance discussions and provide feedback. The Charity believes that managing employee performance effectively is fundamental to staff motivation, engagement and helping them realise their full potential. Staff continue to receive in-house and external trainings on donor regulations and industry best practices to ensure appropriate oversight. Wellbeing and engagement initiatives including flexible working and specifically remote working arrangements are in place to ensure staff safety and wellbeing.
Improve on the creation of opportunities for effective intercompany collaboration and improved quality of programmes	Intercompany, interdepartmental, HQ and field collaborations were enhanced to consider opportunities and challenges in wider contexts. Each International Medical Corps (UK) team worked closely with its peers in the US to ensure alignment where appropriate.

RISK: 'Minimise risk whilst anticipating threats'

GOAL	COMMENT
Strengthened systems for identifying and raising areas of concern in a timely manner to the senior management team	The Charity continued to maintain its risk register and controlled the field operations through regular reviews, cross-team participation and reference to the Charity's scorecard mechanism. The Charity's US affiliate continues to implement, at field and HQ levels, Logistics Management Software to strengthen assets, procurement and inventory management and controls. Systems enable the creation of exception reports highlighting any potential gaps or risks to be addressed. In addition, HQ Logistics & Supply Chain team is maintaining, in collaboration with the field teams, a register to anticipate, map potential risks and determine / implement mitigation measures. Risks identified as major are elevated to the appropriate management group. Procurement above set thresholds are reviewed through a system called PRAMS (Procurement Review & Approval Management System) at the field and HQ levels. The system enables teams to identify procurements requiring corrections or improvements prior to signing contracts with vendors, and support the analysis of potential capacity building requirements, or business clarifications. In addition, the Charity has worked with its US affiliate to administer and reinforce its safeguarding mechanisms. The Charity's implementing affiliate also implemented a Human Resources Information System (HRIS) for talent acquisition, staff performance management and training. The HRIS is a global integrated platform used to streamline recruitment, learning, performance management and compensation process and management.
Cyber risk is a concern as it involves the potential for data breaches, unauthorised access, and other cyber threats that can compromise systems and confidential data	To mitigate against these risks and limit exposure, the organisation has implemented robust security measures such as encryption, multi-factor authentication, and vulnerability scanning to safeguard and protect its cloud infrastructure. International Medical Corps (UK) has modernised its infrastructure by migrating to the cloud its applications and data.
Mitigate financial loss through strict controls Strict controls were maintained and updated as necessary to ensure adherence to internal procedures, requirements of donors and the requirements of the Charity Commission	Automation and strict control over the treasury platform have ensured minimisation of foreign exchange and currency exposure risks during turbulent global economic environment.

OPERATIONS: 'Delivering the mission efficiently, through discipline and thoroughness.'

GOAL	COMMENT
Regular review of programme performance	Programme, M&E and Technical Unit staff at all levels monitor risks to implementation on an ongoing basis through organisational systems and direct field visits with local stakeholders to ensure effective programme delivery. The Charity's affiliate's cross-functional platforms continue to improve the effectiveness and efficiency of operational support to field programmes, as well as facilitate speedy and effective responses to disasters in the respective regions.
Increased monitoring and evaluation activities, training and programme development	Programme staff collaborate with other departments within the cross-functional platforms in decision making related to country programme issues. During the reporting period, the Charity, in collaboration with its US affiliate, submitted 197 proposals. The Charity's US affiliate's Internal Audit conducted in-country audits in Somalia, Nigeria, Ethiopia.
Secure multi-year grants from donors	Ongoing discussions were had with FCDO, Global Affairs Canada (GAC), Ministry of Foreign Affairs France and other donors on multi-year grants.

DONORS: 'Accountable to a growing group of donors'

The Global Programme Unit continued to provide due diligence on the Charity's grants and contracts to ensure compliance with the standards and regulations specified by its donors, with support from the US affiliate's Compliance team and the Internal Audit. Additionally, International Medical Corps continues to be a member of the Core Humanitarian Standard (CHS) Alliance and continues to monitor its compliance with the Humanitarian Accountability Framework.

GOAL	COMMENT
Improve high-level donor interaction	Robust interaction with International Medical Corps (UK)'s donors continued at all levels throughout the year.
To improve on effective donor intelligence	Regular communications with donor agencies were maintained, to ensure that relevant opportunities were pursued. Active participation in UK NGO forums and direct communication with FCDO were prioritised, to ensure that humanitarian relief is prioritised following the UK's exit from the European Union and other governmental efforts to shape the sector.
Compliance with reporting deadlines and improved performance on complementary information requests	The Charity remains compliant with donor reporting requirements.

INNOVATION: 'Challenging the norm to minimise inefficiency and maximise impact'

GOAL	COMMENT
Encouraging a culture of creativity and problem solving	Organisation-wide information management systems are being used to obtain real-time reports integrating key indicators across finance, programme delivery, human resources and logistics, to ensure effective implementation of programmes. A variety of projects continue, with the aim of improving the efficiency of key areas affecting delivery of programme activities. Cross-functional platforms also ensure that real-time information is available and applied in decision making and operations.

External representation and engagement

International Medical Corps (UK)'s Technical Unit members continued to represent the Charity in forums both within the UK and abroad, and make contributions to global discussions on sectoral issues.

INTERNATIONAL MEDICAL CORPS (UK)'S HUMANITARIAN ASSISTANCE FOR THE FINANCIAL YEAR 2024/2025

EMERGENCY RESPONSE AND PREPAREDNESS

Escalating conflict, economic crises and mass displacement have intensified humanitarian needs across the Middle East and Europe. International Medical Corps continued large-scale emergency responses across the region. In Gaza, we operated two field hospitals offering trauma, surgical and maternal care, and offered mobile triage near displacement sites. Our teams reached 477,468 patients in these field hospitals with lifesaving services amidst the ongoing conflict and displacement. In Syria, mobile medical teams provided emergency care to 425,097 people and supported referrals to fixed facilities. Additionally, we provided immediate medical assistance and non-food items to hundreds of thousands of people across the region.

NUTRITION AND FOOD SECURITY

In Cameroon, Ethiopia, Jordan, Mali, Nigeria and Syria, we screened 273,937 children under 5 for malnutrition, whilst in Ethiopia and Jordan, we also screened 24,625 pregnant and lactating women for malnutrition. In Syria and Yemen, we admitted 20,177 children under 5 to our therapeutic and supplementary-feeding programme. In Cameroon, Chad, Ethiopia, Nigeria, Syria and Yemen, we provided infant and young-child feeding counselling to 475,185 caregivers. In Venezuela, we delivered 92,613 food baskets to more than 46,300 people across 55 schools in Delta Amacuro state, strengthening food security and improving school attendance. In Chad, we provided food and cash assistance to 113,242 people in 31,514 households every month, strengthening nutrition and food security for Sudanese refugees.

HEALTH SERVICES SUPPORT

In Cameroon, Jordan, Lebanon and Mali, we provided primary healthcare consultations to 243,513 people. Additionally, in Jordan's Azraq and Zaatari refugee camps, we conducted 630 surgeries and 69,350 laboratory tests whilst providing 25,981 paediatric consultations. In Ukraine, we provided 11 health facilities with 7,584 items of medical supplies and essential pharmaceutical equipment and operated four mobile medical teams to restore services in frontline areas. In the Central African Republic, we conducted 2,872,934 malaria tests and treated 1,984,495 cases of uncomplicated malaria. In Afghanistan, we screened 2,462 people for drug addiction through outreach and drug addiction treatment centres.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)

We integrated MHPSS into primary healthcare across Cameroon, Jordan, Lebanon and Ukraine, providing more than 63,000 mental health consultations. In Afghanistan, we reached 23,531 people with MHPSS awareness messaging, and in Mali, 5,536 women participated in psychosocial support activities in safe spaces for women and girls.

WATER, SANITATION AND HYGIENE

In Syria, we repaired and rehabilitated water systems, delivering 25 million litres of safe water. This intervention, paired with infection prevention and control support in field hospitals and health centres, helped prevent disease outbreaks. In Gaza, Yemen and Zimbabwe, rehabilitation of water systems helped 89,016 people access safe water, whilst in Cameroon, Gaza, Yemen and Zimbabwe, we reached 115,763 people with hygiene-promotion activities.

MATERNAL AND CHILD HEALTH

In Cameroon, Gaza, the Central African Republic and Yemen, we supported 12,631 deliveries through skilled birth attendants, and provided antenatal consultations to

23,347 women. In both countries, we vaccinated 56,958 children against common childhood illnesses, such as polio and measles. In the Central African Republic, we supported 69 students in a two-year Auxiliary Midwifery Certification program, providing them with uniforms and classroom supplies. In Jordan and Lebanon, we strengthened access to maternal and newborn health services in primary healthcare centres and refugee settings by coordinating 17,762 referrals for secondary and tertiary services.

VIOLENCE AGAINST WOMEN AND GIRLS (VAWG)

In Cameroon, Gaza, Lebanon, Nigeria and Yemen, we provided awareness sessions on prevention of VAWG to 183,920 people, and in Cameroon, Lebanon and Nigeria, we provided dignity kits to 1,116 women and girls. In South Sudan, we engaged with more than 65,000 women and girls across 17 women's and girls' safe spaces between January and June 2025. In Nigeria, 180 girls completed a 12-week life-skills session to build their confidence and interpersonal skills, whilst we engaged with 100 men and 120 adolescent boys to foster behavioural change. In Mali, we trained 280 women in VAWG prevention, and supported 11,686 married teenage girls and women with income-generating activities.

INSTITUTIONAL DONOR SUPPORT FOR INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

To fulfil its mission and undertake the aforementioned activities, International Medical Corps (UK) received grants from the following private and international donor agencies during the year. The Charity gratefully acknowledges their support.

ACF Canada	Action Against Hunger, Canada
ACF US	Action Against Hunger, US
CDCS	REPUBLIQUE FRANÇAISE MINISTERE DE L'EUROPE ET DES AFFAIRES ETRANGERES - Centre de crise et de soutien
DAHW	Deutsche Lepra- und Tuberkulosehilfe e.V.
DRC	Danish Refugee Council
FCDO	Foreign, Commonwealth & Development Office
EC	European Commission
France MOFA	REPUBLIQUE FRANÇAISE MINISTERE DE L'EUROPE ET DES AFFAIRES ETRANGERES (France Ministry of Europe and Foreign Affairs)
GAC	Global Affairs Canada
GCC	Grand Challenges Canada
GIZ	The Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
IOM	International Organisation for Migration
IRC	The International Rescue Committee
Islamic Development Bank	Islamic Development Bank
King Salman Humanit. Aid	King Salman Humanitarian Aid and Relief Center
MCMDO	Mothers and Children Multisectoral Development Organisation
Ministry of Health CAR	Ministry of Health Central African Republic
UAE MoFA	Ministry of Foreign Affairs and International Cooperation, UAE
Save the Children	Save the Children
RCSI	Royal College of Surgeons in Ireland
The Power of Nutrition	The Power of Nutrition
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WFP	World Food Programme
WHO	World Health Organisation
WV	World Vision
ZOA Netherlands	Stichting ZOA

PRIVATE DONOR SUPPORT OF INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES	
Dr. Fahad Abdul Jabbar	GM Morrison Charitable Trust
Church of Jesus Christ Latter Day Saints (LDS)	LDS Charities Australia
Context Consulting Limited	AstraZenca
Bloomberg	Microsoft
Fitch Group	Mr Naif AlObaid
Cvetanka Dimoska Radosavljevic	One4Humanity

FUNDRAISING, COMMUNICATIONS AND MARKETING ACTIVITIES

During the year, International Medical Corps (UK) has received donations from institutional donors, corporates, trusts and foundations, as well as private individuals. International Medical Corps (UK) and its US affiliate seek to raise funds to sustain its programmes across all countries where they work, as well as funds to fill gaps, support immediate emergency responses and implement innovative programmes.

The Charity responds to requests for proposals issued by institutional donors such as FCDO, UN agencies and by private sector donors. The Charity works closely with its affiliate to raise funds from corporations and foundations for emergency response activities and ongoing programmes. International Medical Corps (UK) undertakes due diligence on both the financial and reputational dealings of potential partners before accepting donations.

International Medical Corps (UK) also utilises multiple fundraising channels, with the goal of raising funds from as diversified a base of supporters as possible. These channels include annual giving programmes and online appeals, in addition to outreach through social media, the website and other reputable online platforms that display clear terms and conditions, including General Data Privacy Regulations (GDPR) compliance.

International Medical Corps (UK) and its affiliate did not employ any commercial fundraising firm to solicit individuals via telephone or door to door during the reported period. Protecting vulnerable people and other members of the public is a key consideration in cultivating a supporter base for the Charity's work. The Charity and its US affiliate actively monitor all efforts to raise funds from the public, in particular vulnerable people. International Medical Corps (UK) did not receive any complaints about its fundraising activities during the reported period.

Although International Medical Corps (UK) is not registered with the UK Fundraising Regulator, the Charity has regard for and adheres to the principles and practices set out in the Code of Fundraising Practices. International Medical Corps (UK) and its affiliate are in compliance with GDPR and protect individuals' personal information. The communications team of International Medical Corps (UK) monitors and moderates our email and social media accounts, and any complaints or concerns regarding fundraising activities are reviewed and responded to by senior management. Fundraising activities also are monitored by the senior leadership of International Medical Corps (UK), which shares regular reporting with trustees.

INVESTMENT POLICY

Due to the nature of the Charity's programmes and funding cycles of its major donors, the Charity keeps its financial assets liquid.

RISK MANAGEMENT

A culture of risk management and mitigation is embedded in the organisation. A risk register is used by management and the trustees to examine and monitor risks to the organisation.

The register identifies and prioritises risk in relation to the likelihood and the level of impact it would have on the organisation and outlines measures in place to safeguard the company's assets against such risk. The risk categories are defined below:

- organisational risk;
- strategic and management risk;
- operational risk;
- people;
- financial risk.

The board of trustees seeks to ensure that systems are in place to monitor, manage and mitigate International Medical

Corps (UK)'s exposure to major risks which are reviewed periodically. It is also recognised that the nature of the Charity's work requires active acceptance and management of risks when undertaking activities in order to achieve the objectives of the Charity.

The key business risks to the Charity continue to include the unexpected loss of funding from key donor organisations and major disruptions to programmes in countries resulting from factors either within or beyond the organisation's control. The Board of Trustees for International Medical Corps (UK) continues to implement measures to mitigate these risks, including review of the reserves policy, the introduction of new technology to ensure that assets are safeguarded to the extent possible, the continued reference to a balanced business scorecard and reviews into the Charity's funding base. These are further summarised in the table below:

KEY RISKS	TRUSTEES' PLANS TO MITIGATE THE RISK
Insufficient unrestricted reserves	The Charity continues to make sustained efforts to expand its supporter base. The Charity intends to continue to work with its institutional donors to continue delivering activities in the most hard-to-reach areas, thereby receiving contributions towards its corporate costs, and work with its US affiliate to keep effective control of its cost structure.
Adverse payment terms offered by donors affecting the liquidity of the Charity	The Charity's liquidity position is closely monitored, and close collaborations are maintained with donor stakeholders to ensure life-saving activities are not impacted by liquidity issues.
Future funding opportunities affected by Brexit and developments in the UK's Foreign and Development policies	International Medical Corps (UK) continues to pursue European Union funding streams where eligible. At the same time the Charity continues to engage with FCDO & other institutional donors on existing and potential portfolios.
Inadequate assessment, resulting in poor programming decisions and implementations	International Medical Corps continues to invest in country-specific assessments, to ensure a relevant and quality orientated programme design.
Exposure to movement in foreign currency rates, affecting international operations	The Charity's principal currency exposures arise from translations of European and other donor monies received into US dollars, the main operational currency advanced to its field missions overseas. The continued fluctuations of currencies against USD can adversely affect International Medical Corps (UK)'s ability to deliver programmes sustainably. Within this context, global treasury management, consisting of International Medical Corps' and International Medical Corps (UK)'s senior staff, created in July 2018, continues to ensure effective use of donor funds.
Operations in sanctioned countries through the Charity's US affiliate	Donors and stakeholders are kept up to date with developments and emerging risks affecting programme implementation in sanctioned countries.

FINANCIAL REVIEW

Statement of Principal Financial Management Policies Adopted in the Year

It is the policy of International Medical Corps (UK) to maintain effective financial and other programmatic management systems with its US affiliate. Efficient controls, budgeting, accounting, financial reporting and auditing systems are employed throughout the organisation, to meet the management and programmatic objectives at various levels, and to be accountable to its donors and supporters.

This year, International Medical Corps (UK)'s total income was $176,473,643 (2024: $123,269,954). Of this, the total cash income received from institutional donors and supporter base was $119,154,087 (2024: $100,502,430). International Medical Corps (UK) was able to secure $55,129,159 (2024: $19,490,270) of gifts-in-kind, comprising food, medicines and supplies.

During the reporting period, International Medical Corps (UK) supported training and assistance programmes in 26 (2024: 23) countries through its US affiliate. The Charity's programme expenditures can be disaggregated into the following humanitarian contexts.

	FY 2025	FY 2024
Strengthening health capacity	20%	28%
Emergency response and preparedness	23%	34%
Mental health and psychosocial support	2%	4%
Women & children's health	10%	9%
Water, sanitation and hygiene	6%	5%
Nutrition & food security	39%	20%

Financial Position

The Charity had restricted funds of $28,721,485 as of 30 June 2025 (2024: $16,909,499) and unrestricted funds of $1,060,017 as of the same date (2024: $1,166,039). International Medical Corps (UK) receives relevant institutional funding in meeting its restricted charitable expenditure. The balance of free reserves as of 30 June 2025 is $1,036,530 (2024: $1,115,947). Free reserves are unrestricted funds less the net book value of the fixed assets.

International Medical Corps (UK) committed resources from unrestricted reserves to provide adequate support for growth in charitable activities and to ensure compliance with growing donor regulations. International Medical Corps (UK) continues to rely on its US affiliate's commitment to meet shortfalls in programmes that do not provide full overhead cost recovery.

Reserves Policy

International Medical Corps (UK) requires reserves to:

- fund working capital requirements in the event of unexpected delays in receiving donor funds, to ensure continuity in implementation in the field;
- fund unplanned expenditures arising from programme-related contingencies, such as unforeseen events delaying implementation and leading to no–cost-extensions, and to manage exposure to exchange rate fluctuations;
- finance any gap in funding for projects of strategic importance to the Charity and its US affiliate; and
- fund requirements for additional corporate costs to maintain high-quality assurance over the organisation's programmes.

The Charity aims to maintain a level of unrestricted reserves equivalent to six month's operating expenditure of the Charity's HQ offices, which is $1,036,530 for FY 2024–25 and this is currently being achieved. Available unrestricted-fund balances in excess of the operational reserves' requirements are utilised to meet the other purposes as outlined above. Operating expenditure considered for reserves excludes transfers made for overseas programmes.

International Medical Corps (UK) continues to apply assessment of new opportunities and accepts projects that support its overhead costs required to maintain acceptable oversight of programme implementation, therefore mitigating the risk of insufficiently resourced projects. International Medical Corps (UK) considers accepting projects that do not fully cover its costs with its US affiliate to ensure sustainability of coverage of any gap in funding. As of 30 June 2025, the Charity held restricted reserves of $28,721,485 (2024: $16,909,499). This represents the total funds received for specific projects that are yet to be spent at 30 June 2025, including projects responding to Syria and various other crises. The decrease in restricted funds in the reported period is due to timing difference of receiving donor funds with a number of projects starting in the last months of the previous reported period and continued in the current reporting period. These funds have been excluded from specific reserves policy, as they are not for the purposes of general working capital.

As of 30 June 2025, the balance of free reserves was $1,036,530 (2024: $1,115,947). The Charity is resolved to maintain an adequate level of reserves and is working with its affiliate to implement a feasible strategy for marketing and public awareness of its work, to cultivate support, but accepts that in the current economic climate this may be difficult. The Charity will respond to the risks identified above as follows.

- in collaboration with its affiliate, the Charity profiles income streams and undertakes projects with acceptable terms. Also, it looks to its affiliate to cover programme funding gaps that the affiliate has reviewed and considered as acceptable.
- the Charity and its affiliate continue to closely monitor the implementation context of quality programmes around the world and resolve operational challenges with its supporters and partners.
- the Charity is part of global treasury platform.
- the Charity's operational flexibility has enabled it to address risks caused by political changes, including Brexit and the effects of the pandemic.

Section 172 Statement

International Medical Corps (UK) complies with section 172 under the Companies Act 2006. It requires our Board of Trustees act in the way that they consider, in good faith, what would be most likely to promote International Medical Corps (UK)'s impact for our beneficiaries, whilst considering the long-term effect of decisions on International Medical Corps (UK)'s stakeholders, including its beneficiaries, employees, suppliers, partners, the communities with which it works and their environment.

Engagement with employees.

International Medical Corps (UK)'s internal stakeholders are its employees. Enhancing employee engagement is an integral part of the culture of the Charity and its implementing affiliates. Senior management are actively

involved in the engagement of colleagues through regular electronic communications, staff meetings and periodic Town Hall meetings that include employees working across the world. The trustees receive updates on employee matters from the Managing Director during board meetings. International Medical Cops (UK) undertakes regular salary reviews to ensure that salaries for the UK contracted staff are competitive within the sector in the UK.

Engagement with Other Stakeholders

- our beneficiaries. As a recognised first responder, we provide emergency relief, often within hours, to those hit by disaster, disease and conflict, no matter where they are, no matter what the conditions. International Medical Corps (UK) continuously monitors programme activities through effective internal reporting. We have a strict Code of Conduct and safeguarding processes in place to ensure the security and safety of our beneficiaries.
- our partners in project delivery. Our partnerships are critical to ensuring that we deliver programmes in the most hard-to-reach locations. We collaborate with other international and local NGOs when these partnerships bring greater benefits to the people we serve.
- our supporters and donors. Our donors are primarily institutional, including the UK Foreign, Commonwealth and Development Office (FCDO), UN agencies, Global Affairs Canada and many others. We are committed to delivering timely, high-quality, lifesaving humanitarian assistance, and to reporting on the impact of our work. We report to our donors, and publicise our work on our website, social media and other platforms.
- our suppliers. We are committed to eradicating modern slavery and trafficking in persons and engage with our suppliers to promote the highest standards.
- our wider communities and the environment. Our policies and procedures include safe environmental protection in the different countries where we work. Our programmes aim to reduce excess morbidity and mortality associated with potential exposure to environmental factors. For example, on a project-by-project basis, our teams assess the risks associated with healthcare waste and with the disposal of expired medicines.

INTERNATIONAL MEDICAL CORPS (UK) PLANS FOR 2025/2026

International Medical Corps (UK) plans are to:

1. expand opportunities for applied research to improve the impact of providing healthcare for vulnerable communities, in line with its mission;
2. achieve institutional income of $139 million during the 12-month period to 30 June 2026;
3. continue to expand the organisation's number of partnerships and non-traditional donors;
4. expand the organisation's global profile through increased awareness of its activities;
5. review and strengthen current internal processes employed by its US affiliate, with a view to increasing organisational efficiency; and
6. continue to work with its US affiliate to apply new technology and systems that mitigate risks specific to the sector in general.

The Trustees' Report incorporating the strategic report is approved by the trustees and signed on their behalf by:



Approved by the Board Of Trustees on:

15 December 2025

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF INTERNATIONAL MEDICAL CORPS (UK)

OPINION

We have audited the financial statements of International Medical Corps (UK) (the 'charitable company') for the year ended 30 June 2025 which comprise the statement of financial activities, the balance sheet, and statement of cash flows, the principal accounting policies and the notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 30 June 2025 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfiled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

CONCLUSIONS RELATING TO GOING CONCERN

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

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

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

OTHER INFORMATION

The trustees are responsible for the other information. The other information comprises the impact report for International Medical Corps and its affiliates worldwide included in pages 6 to 27, together with information included in the trustees' report, including the strategic report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

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

We have nothing to report in this regard.

OPINIONS ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006

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

- the information given in the trustees' report, which is also the directors' report for the purposes of company law and includes the strategic report, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report, which is also the directors' report for the purposes of company law and

includes the strategic report, has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report including the strategic report. We have nothing to report in respect of the following matters in relation to which the 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.

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the trustees' responsibilities statement, the trustees (who are also the directors of the charitable company 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, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- the engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities, and skills to identify or recognise non-compliance with applicable laws and regulations;
- we identified the laws and regulations applicable to the charitable company through discussions with management and from our knowledge and experience of the charity sector;
- we focused on specific laws and regulations in both the UK and overseas, which we considered may have a direct material effect on the financial statements or the activities of the charitable company. These included but were not limited to the Charities Act 2011, the Companies Act 2006, Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable to the United Kingdom and Republic of Ireland (FRS 102) (effective 1 January 2019);
- we have assessed the processes in place to ensure that the implementors of programmes are aware of and comply with UK laws and regulations;
- we have assessed the processes in place to ensure that in country laws and regulations are followed; and
- we assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and review of minutes of trustees' meetings.

We assessed the susceptibility of the charitable company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- making enquiries of management as to where they considered there was susceptibility to fraud,
- their knowledge of actual, suspected, and alleged fraud; and
- considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.

To address the risk of fraud through management bias and override of controls, we:

- performed analytical procedures to identify any unusual or unexpected relationships;
- tested and reviewed journal entries to identify unusual transactions;
- tested the authorisation of expenditure;
- assessed whether judgements and assumptions made in determining the accounting estimates were indicative of potential bias; and
- investigated the rationale behind significant or unusual transactions.

In response to the risk of irregularities and noncompliance with laws and regulations, we designed procedures which included, but were not limited to:

- agreeing financial statements disclosures to underlying supporting documentation;
- reading the minutes of meetings of trustees; and
- enquiring of management as to actual and potential litigation and claims.

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance. Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities is available on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

USE OF OUR REPORT

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 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 auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Buzzacott Audit LLP

Catherine Biscoe (Senior Statutory Auditor)

Date: 16 December 2025

For and on behalf of Buzzacott Audit LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING THE INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 30 JUNE 2025

	Notes	**Unrestricted funds $**	**Restricted funds $**	**2025 Total funds $**	Unrestricted funds $	Restricted funds $	2024 Total funds $
Income and expenditure							
Income from:							
Donations and legacies	1	69,896	57,249,660	**57,319,556**	1,741,342	21,026,182	22,767,524
Charitable activities	2	–	119,154,087	**119,154,087**	–	100,502,430	100,502,430
Total income		**69,896**	**176,403,747**	**176,473,643**	1,741,342	121,528,612	123,269,954
Expenditure on:							
Raising funds	3	34,383	-	**34,383**	8,465	672	9,137
Charitable activities	4	141,535	164,591,761	**164,733,296**	1,452,688	134,065,763	135,518,451
Total expenditure		**175,918**	**164,591,761**	**164,767,679**	1,461,153	134,066,435	135,527,588
Net income/(expenditure)		(106,022)	11,811,986	11,705,964	280,189	(12,537,823)	(12,257,634)
Net movement in funds		(106,022)	11,811,986	**11,705,964**	280,189	(12,537,823)	(12,257,634)
Fund balances brought forward at 1 July 2024		1,166,039	16,909,499	**18,075,538**	885,850	29,447,322	30,333,172
Fund balances carried forward at 30 June 2025		1,060,017	28,721,485	**29,781,502**	1,166,039	16,909,499	18,075,538

All of the Charity's activities derived from continuing operations during the above two financial periods.

The Charity has no recognised gains and losses other than those shown above.

BALANCE SHEET
AS AT 30 JUNE 2025

	Notes	2025 $	2025 $	2024 $	2024 $
Fixed Assets					
Tangible assets	8		23,487		50,092
Current assets					
Stock	9	747,195		1,325,503	
Debtors	10	6,716,015		8,140,497	
Cash at bank and in hand		22,585,517		8,818,268	
		30,048,727		18,284,268	
Creditors: amounts falling due within one year	11	(290,712)		(258,822)	
Net current assets			29,758,015		18,025,446
Total net assets			**29,781,502**		18,075,538
The funds of the charity					
Restricted funds	12		28,721,485		16,909,499
Unrestricted funds			1,060,017		1,166,039
			29,781,502		**18,075,538**

Approved by the trustees and signed on their behalf by:

Andrew Géczy, Chair



Approved on: 15 December 2025

International Medical Corps (UK): A company limited by guarantee, Company Registration No. 04474904 (England and Wales)

STATEMENT OF CASH FLOWS
YEAR TO 30 JUNE 2025

	Notes	2025 $	2024 $
Cash flows from operating activities:			
Net cash provided by / (used in) operating activities	A	13,777,939	(9,220,066)
Cash flows from investing activities:			
Purchase of tangible fixed assets		(10,690)	(17,284)
Net cash used in investing activities		(10,690)	(17,284)
Change in cash and cash equivalents in the year		**13,767,249**	(9,237,350)
Cash and cash equivalents at 1 July 2024	B	**8,818,268**	18,055,618
Cash and cash equivalents at 30 June 2025	B	**22,585,517**	8,818,268

Notes to the statement of cash flows for the year to 30 June 2025

A Reconciliation of net movement in funds to net cash used in operating activities

	2025 $	2024 $
Net movement in funds (as per the statement of financial activities)	11,705,964	(12,257,633)
Adjustments for:		
Depreciation charge	37,297	38,041
Decrease in stocks	578,308	699,792
Decrease in debtors	1,424,480	2,305,999
Increase/(decrease) in creditors	31,890	(6,265)
Net cash provided by / (used in) operating activities	**13,777,939**	(9,220,066)

B Analysis of cash and cash equivalents

	2025 $	2024 $
Cash at bank and in hand	**22,585,517**	8,818,268
Total cash and cash equivalents	**22,585,517**	8,818,268

PRINCIPAL ACCOUNTING POLICIES 30 JUNE 2025

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are laid out below.

BASIS OF PREPARATION

These financial statements have been prepared for the year to 30 June 2025.

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to these financial statements.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (Charities SORP FRS 102) ((effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The accounts are presented in US dollars and rounded to the nearest dollar. The charity constitutes a public benefit entity as defined by FRS 102.

CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGEMENT

Preparation of the financial statements requires the trustees to make significant judgements and estimates.

The items in the financial statements where these judgements and estimates have been made include:

- the estimation of the value of donated goods distributed in the year and undistributed at the year-end.
- the estimation of the recoverability of accrued income balances.
- the estimation of unrealised foreign exchange difference.
- the treatment of intercompany balances with the charity's implementing affiliates.

ASSESSMENT OF GOING CONCERN

The trustees have assessed whether the use of the going-concern assumption is appropriate in preparing these financial statements. The trustees have made this assessment in respect of a period of one year from the date of approval of these financial statements.

The Charity has free reserves of $1,036,530 (2024: $1,115,947), which is as per the reserves policy. The trustees have continued to use the going-concern assumption based on the relationship with its affiliate to cover programme funding gaps and provide cash-flow bridging. The trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

INCOME

Income is recognised in the statement of financial activities when the charity is entitled to the income, the amount can be measured with accuracy and it is probable that the income will be received.

Donations and gifts in kind are included in full in the statement of financial activities when receivable.

Grants receivable are credited to the statement of financial activities in the year in which they are receivable.

DONATED GOODS AND SERVICES

Donated goods, typically comprising medical and food supplies, are recognised as income when the goods are received. Amounts are included in expenditure when the goods are distributed. The balance of goods received but not distributed are included as a stock balance at the year end.

Food and other non-pharmaceutical stocks are valued according to the value placed on the items by the donor.

Pharmaceutical goods received are accounted for at fair value to the Charity with reference to market sources.

EXPENDITURE AND THE BASIS OF APPORTIONING COSTS

Expenditure is included in the statement of financial activities when incurred and includes attributable VAT, which cannot be recovered.

Expenditure comprises the following:

a) costs of raising funds include the salaries, direct costs and overheads with generating donated income.

b) costs of charitable activities comprise expenditure on the charity's primary charitable purposes as described in the trustees' report. Such costs include:

   i. technical advisory services

   ii. programme management services

   iii. gifts in kind of donated goods and services

   The majority of costs are directly attributable to specific activities. Certain shared costs are apportioned to activities in furtherance of the objects of the charity. These costs are allocated in the same proportion as directly attributable expenditure.

c) support costs comprise the costs incurred by finance, human resources, communications and IT departments, and the trustee costs, which are directly attributable to the management of the Charity's assets, organisational procedures and the necessary legal procedures for compliance with statutory requirements.

TANGIBLE FIXED ASSETS

Items of equipment are capitalised when the purchase price exceeds $500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets capitalised are reviewed for impairment if circumstances indicate that their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life:

- computers – three years
- furniture, fixtures and fittings – five years
- servers – five years

Vehicles and equipment for use in overseas operational programmes are not capitalised but charged in full to expenditure when purchased. This is because the expected useful life is significantly reduced in such programmes and is generally less than one year for the majority of these assets.

FUND ACCOUNTING

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund together with a fair allocation of management and support costs.

Unrestricted funds are donations and other income raised for the objects of the charity.

OTHER OPERATIONAL CURRENCIES

Transactions in US dollars are recorded at transaction value, with no exchange-rate gain or loss. Transactions in other operational currencies are recorded at the calculated monthly average rate. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. Differences arising on retranslation are charged to the statement of financial activities.

LEASED ASSETS

Rentals payable under operating leases, where substantially all the risks and reward of ownership remain with the lessor, are charged to the statement of financial activities over the period of the lease term.

PENSION COSTS

International Medical Corps (UK) sponsors a group personal pension plan. All eligible employees can participate in the scheme and contributions are based on a percentage of annual gross salary.

International Medical Corps (UK) contributes between 4% to 10% of eligible employees' gross earnings. Employees are immediately fully vested in contributions made on their behalf. The Charity is fully staged in its auto-enrolment obligations. Employees make additional contributions to meet legal requirements and should they wish to do so. Pension costs represent the employer's contributions payable during the year.

DEBTORS

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. They have been discounted to the present value of the future cash receipt where such discounting is material.

CASH AT BANK AND IN HAND

Cash at bank and in hand represents such accounts and instruments that are available on demand or have a maturity of less than three months from the date of acquisition. Deposits for more than three months but less than one year have been disclosed as short-term deposits. Cash placed on deposit for more than one year is disclosed as a fixed asset investment.

CREDITORS AND PROVISIONS

Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

FINANCIAL INSTRUMENTS

The Charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the Charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

BASIC FINANCIAL ASSETS

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price, including transaction costs, and are subsequently carried at amortised cost using the effective interest method, unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts, discounted at a market rate of interest, if material. Financial assets classified as receivable within one year are not amortised.

BASIC FINANCIAL LIABILITIES

Basic financial liabilities, including creditors, bank loans, loans from fellow group companies. Financial liabilities classified as payable within one year are not amortised.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

1 Donations and legacies

	Unrestricted funds $	Restricted funds $	**2025 Total $**
Donation from International Medical Corps	–	2,079,752	2,079,752
Restricted Donations	–	40,749	40,749
Other Unrestricted Donations	44,693	–	44,693
Donated supplies	–	55,063,923	55,063,923
Donated services	–	65,236	65,236
Interest Income	25,203	–	25,203
2025 Total funds	**69,896**	**57,249,660**	**57,319,556**

	Unrestricted funds $	*Restricted funds $*	*2024 Total $*
Donation from International Medical Corps	*1,539,048*	*380,520*	*1,919,568*
Restricted Donations	*–*	*1,155,392*	*1,155,392*
Other Unrestricted Donations	*62,581*	*–*	*62,581*
Donated supplies	*–*	*19,490,270*	*19,490,270*
Donated services	*111,481*	*–*	*111,481*
Interest Income	*28,232*	*–*	*28,232*
2024 Total funds	*1,741,342*	*21,026,182*	*22,767,524*

2 Income from charitable activities

	Unrestricted funds $	Restricted funds $	**2025 Total $**
Strengthening health capacity	–	40,323,816	**40,323,816**
Emergency response and preparedness	–	40,386,598	**40,386,598**
Mental health and psychosocial support	–	3,079,123	**3,079,123**
Women & children's health	–	18,188,396	**18,188,396**
Water, sanitation and hygiene	–	8,667,296	**8,667,296**
Nutrition and food security	–	8,508,858	**8,508,858**
2025 Total funds	–	119,154,087	**119,154,087**

	Unrestricted funds $	*Restricted funds $*	*2024 Total $*
Strengthening health capacity	–	*35,087,033*	*35,087,033*
Emergency response and preparedness	–	*36,180,602*	*36,180,602*
Mental health and psychosocial support	–	*2,810,283*	*2,810,283*
Women & children's health	–	*10,059,754*	*10,059,754*
Water, sanitation and hygiene	–	*6,364,109*	*6,364,109*
Nutrition and food security	–	*10,000,649*	*10,000,649*
2024 Total funds	–	*100,502,430*	*100,502,430*

3 Expenditure on raising funds

	Unrestricted funds $	Restricted funds $	**2025 Total $**
Fundraising staff costs	–	–	–
Other fundraising costs	34,383	–	**34,383**
2025 Total funds	34,383	–	**34,383**

	Unrestricted funds $	*Restricted funds $*	*2024 Total $*
Fundraising staff costs	–	–	–
Other fundraising costs	*8,465*	*672*	*9,137*
2024 Total funds	*8,465*	*672*	*9,137*

4 Expenditure on charitable activities

	Unrestricted funds $	Restricted funds $	**2025 Total $**
Strengthening health capacity	28,935	33,648,148	**33,677,083**
Emergency response and preparedness	32,525	37,823,502	**37,856,027**
Mental health and psychosocial support	2,588	3,009,575	**3,012,163**
Women & children's health	13,646	15,869,511	**15,883,157**
Water, sanitation and hygiene	8,880	10,326,432	**10,335,312**
Nutrition and food security	54,961	63,914,593	**63,969,554**
2025 Total funds	141,535	164,591,761	**164,733,296**

	Unrestricted funds $	*Restricted funds $*	*2024 Total $*
Strengthening health capacity	*411,412*	*37,968,389*	*38,379,801*
Emergency response and preparedness	*497,704*	*45,932,166*	*46,429,870*
Mental health and psychosocial support	*54,375*	*5,018,179*	*5,072,554*
Women & children's health	*129,295*	*11,932,380*	*12,061,675*
Water, sanitation and hygiene	*69,530*	*6,416,795*	*6,486,325*
Nutrition and food security	*290,372*	*26,797,854*	*27,088,226*
2024 Total funds	*1,452,688*	*134,065,763*	*135,518,451*

4 Charitable activities (continued)

Support costs are allocated to projects in line with the level of direct expenditure as this best reflects the level of support required by each project.

Costs of charitable activities can further be analysed as follows:

	Activities undertaken directly $	Support costs $	**2025 Total $**
Staff costs	36,146,488	2,646,579	**38,793,067**
Donated supplies and services	55,707,466	–	**55,707,466**
Auditor's remuneration			
• Statutory audit	–	63,143	**63,143**
Other costs	63,599,149	6,570,471	**70,169,620**
2025 Total	155,453,103	9,280,193	**164,733,296**

	Activities undertaken directly $	*Support costs $*	*2024 Total $*
Staff costs	*41,940,582*	*2,526,379*	*44,466,961*
Donated supplies and services	*20,301,543*	–	*20,301,543*
Auditor's remuneration			
• *Statutory audit*	–	*54,999*	*54,999*
Other costs	*64,525,231*	*6,169,717*	*70,694,948*
2024 Total	*126,767,356*	*8,751,095*	*135,518,451*

4 Charitable activities (continued)

	Activities undertaken directly $	Support costs $	**2025 Total $**
Strengthening health capacity	31,779,897	1,897,186	**33,677,083**
Emergency response and preparedness	35,723,421	2,132,606	**37,856,027**
Mental health and psychosocial support	2,842,473	169,690	**3,012,163**
Women & children's health	14,988,385	894,772	**15,883,157**
Water, sanitation and hygiene	9,753,076	582,236	**10,335,312**
Nutrition and food security	60,365,851	3,603,703	**63,969,554**
2025 Total funds	155,453,103	9,280,193	**164,733,296**

	Activities undertaken directly $	*Support costs $*	*2024 Total $*
Strengthening health capacity	*35,901,428*	*2,478,373*	*38,379,801*
Emergency response and preparedness	*43,431,664*	*2,998,206*	*46,429,870*
Mental health and psychosocial support	*4,744,994*	*327,560*	*5,072,554*
Women & children's health	*11,282,793*	*778,882*	*12,061,675*
Water, sanitation and hygiene	*6,067,471*	*418,854*	*6,486,325*
Nutrition and food security	*25,339,006*	*1,749,220*	*27,088,226*
2024 Total funds	*126,767,356*	*8,751,095*	*135,518,451*

5 Employees and staff costs

Staff costs during the year were as follows:

	2025 Total $	*2024 Total $*
Wages and salaries	**2,216,897**	*2,181,058*
Social security costs	**221,346**	*222,363*
Other pension costs	**201,844**	*122,958*
Severance costs	**6,492**	–
Total UK staff costs	**2,646,579**	*2,526,379*
International Medical Corps Worldwide on International Medical Corps (UK) projects	**36,146,488**	*41,940,582*
Total staff costs	**38,793,067**	*44,466,961*

The average number of employees during the year, analysed by function, was as follows:

	2025 No	*2024 No*
UK Staff	**34**	*33*

5 Employees and staff costs (continued)

International Medical Corps (UK) contributes towards the salaries of a number of staff overseas and on local projects. Such staff may have only part of their salaries charged to projects; however, it is not meaningful to provide a full-time equivalent figure. The estimated number of such staff employed in the year was 1,541 (2024 - 2,538).

The number of employees who earned £60,000 or more (including taxable benefits but excluding employer pension contributions) during the year was as follows:

	2025 No	2024 No
£60,000 – £70,000	**3**	*–*
£70,001 – £80,000	*–*	*2*
£80,001 - £90,000	**2**	*2*
£90,001 - £100,000	**2**	*2*
£100,001 - £110,000	**2**	*1*
£150,001 - £160,000	*–*	*1*

Key management personnel comprise those set out on page 33. The total remuneration paid to key management personnel in the year was $534,480 (2024 - $691,617).

	2025 $	2024 $
Wages and salaries	**406,027**	*569,251*
Social security costs	**51,150**	*72,107*
Employer pension costs	**77,303**	*50,259*
Total costs	**534,480**	*691,617*

6 Trustees' remuneration

None of the trustees received any remuneration in respect of their services during either of the years under review.

No trustees expenses were incurred during the period (2024 - nil).

7 Taxation

International Medical Corps (UK) is a registered charity and therefore is not liable to corporation tax on income or capital gains derived from its charitable activities or use of assets, as it falls within the various exemptions available to registered charities.

The Charity is not registered for VAT and, accordingly, all expenditure is recorded inclusive of any VAT incurred.

8 Tangible fixed assets

	Office equipment $
Cost	
Total cost at 1 July 2024	219,045
Additions	10,690
Disposals	*(72,116)*
Total cost and 30 June 2025	**157,619**
Depreciation	
Aggregate depreciation as at 1 July 2024	168,953
Charge for the year	37,296
Disposals	*(72,117)*
Aggregate depreciation as at 30 June 2025	**134,132**
Net book values	
As at 30 June 2025	**23,487**
As at 30 June 2024	50,092

9 Stocks

	2025 $	2024 $
Donated goods received but not distributed	**747,195**	1,325,503

10 Debtors

Due within one year	2025 $	2024 $
Prepayments and deposits	**102,969**	*91,487*
Accrued income	**5,402,778**	*7,618,150*
Other debtors – Accounts Receivable	**–**	*1,105*
Amount receivable from International Medical Corps Croatia	**26,992**	*25,580*
Amount receivable from International Medical Corps	**1,180,543**	*397,925*
Emergency response stock	**2,733**	*6,250*
	6,716,015	*8,140,497*

11 Creditors: amounts falling due within one year

	2025 $	2024 $
Trade creditors	**16,748**	*43,050*
Accruals	**273,964**	*215,772*
	290,712	*258,822*

12 Restricted funds

The funds of the Charity include restricted funds comprising the following unexpended balances of donations held on trusts for specific purposes:

	At 1 July 2024 $	Income $	Expenditure $	**At 30 June 2025 $**
Strengthening health capacity	5,532,988	40,787,013	32,965,381	**13,354,620**
Emergency response and preparedness	4,284,517	41,072,902	37,056,010	**8,301,409**
Mental health & psychosocial support	548,742	3,090,448	2,948,506	**690,684**
Women & children's health	514,980	19,377,293	15,547,496	**4,344,777**
Water, sanitation and hygiene	1,451,930	8,990,305	10,116,895	**325,340**
Nutrition and food security	2,032,797	60,900,049	62,617,677	**315,169**
Restricted by country	2,543,545	2,185,737	3,339,796	**1,389,486**
	16,909,499	176,403,747	164,591,761	**28,721,485**

Restricted funds are analysed by the type of activity to which the funds relate. All restricted funds are held to carry out activities under these headings.

13 Analysis of net assets between funds

	Unrestricted funds $	Restricted funds $	**Total 2025 $**
Fund balances at 30 June 2025 are represented by:			
Fixed assets	23,487	_	23,487
Current assets	1,036,530	29,012,197	30,048,727
Creditors: amounts falling due within one year	–	(290,712)	(290,712)
2025 Total net assets	**1,060,017**	**28,721,485**	**29,781,502**

	Unrestricted funds $	*Restricted funds $*	*Total 2024 $*
Fund balances at 30 June 2024 are represented by:			
Fixed assets	*50,092*	–	*50,092*
Current assets	*1,115,947*	*17,168,321*	*18,284,268*
Creditors: amounts falling due within one year	–	*(258,822)*	*(258,822)*
2024 Total net assets	*1,166,039*	*16,909,499*	*18,075,538*

14 International Medical Corps (UK) flagship areas

International Medical Corps (UK) continued to operate during the financial year to 30 June 2025 under the main flag ship areas of strengthening health capacity, emergency response and preparedness, mental health & psychosocial support, women and children's health, water, sanitation and hygiene (WASH) and nutrition and food security.

15 Related party transactions

On 1 July 2023 International Medical Corps (UK) renewed its new Administrative Services Agreement with International Medical Corps, a US-based non-profit organisation to share certain services in connection with its operations. International Medical Corps agreed to assist International Medical Corps (UK) in the achievement of its charitable objectives: to relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and healthcare projects.

On 1 July 2019 International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps Croatia, a Croatian based non-profit organisation, to share certain services in connection with its operations.

Given the close operating relationship between International Medical Corps and International Medical Corps (UK) there are a number of connected persons between the two organisations at trustee level. These connected persons include Nancy A Aossey, who is a founding Trustee of International Medical Corps (UK), and the President and CEO of International Medical Corps, as well as a member of its board. C. William Sundblad, a Trustee of International Medical Corps (UK) is also the Chief Knowledge Officer of International Medical Corps.

During the year ended 30 June 2025 International Medical Corps billed International Medical Corps (UK) $7,841,155 (2024: $7,246,146) in lieu of Service fee as per Article 5 of the Administrative Services Agreement. During the same period, International Medical Corps (UK) has rendered services to International Medical Corps of $978,241 (2024: $1,054,335).

During the year ended 30 June 2025 International Medical Corps Croatia billed International Medical Corps (UK) $64,588 (2024: $56,132). During the same period International Medical Corps (UK) has rendered services to International Medical Corps Croatia of $306,874 (2024: $256,121).

16 Liability of members

The charity is constituted as a company limited by guarantee. Each member has undertaken to contribute £1 to the assets of the company to meet its liabilities if called on to do so.

17 Contingent liability

Due to the nature of the Charity’s agreement with donors, the Charity’s expenditure is often subject to audit or other review by representatives of donors in a subsequent accounting period. There is a possibility that these audits or reviews would identify expenditure that does not fall within the terms of the grant agreements, and so the Charity would be required to repay the monies received. The trustees are not aware of any material circumstances in the year to 30 June 2025 that could give raise to such liability (2024: none).

18 Operating leases

The total of future minimum lease payments under non-cancellable operating leases is as follows:

	Land and buildings $	*Equipment* $	**Total 2025 $**
Due within one year	85,170	854	**86,024**
Due between 2 and 5 years	–	–	–
	85,170	**854**	**86,024**

	Land and buildings $	*Equipment $*	*Total 2024 $*
Due within one year	*77,611*	*1,576*	*79,187*
Due between 2 and 5 years	*16,576*	*788*	*17,364*
	94,187	*2,364*	*96,551*

CHARITABLE ACTIVITIES DETAILED ANALYSIS FOR THE YEAR ENDED 30 JUNE 2025

The following pages (pages 66-73) do not form part of the statutory financial statements.

For certain projects, closeout adjustments have resulted in negative charitable Income and expenditure adjustments

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNOCHA	204439	(15,039)	120
Afghanistan	UNOCHA	204483	(12,826)	(12,826)
Afghanistan	UNOCHA	204558	(12,319)	(12,319)
Afghanistan	UNOCHA	204772	(29,702)	(29,701)
Central African Republic	EC	204406	1,778,353	1,145,933
Central African Republic	Ministry of Health CAR	204819	-	80,243
Central African Republic	UNOCHA	204248	(3,853)	(3,853)
Central African Republic	UNOCHA	204416	(73)	-
Central African Republic	WV	204891	1,401,611	1,249,135
Democratic Rep of Congo	LDS	204790	-	358,687
Democratic Rep of Congo	Save the Children	204571	466,610	466,610
Ethiopia	GAC	204636	(54)	(5,362)
Global	UNICEF	204747	121,594	121,594
Global	UNICEF	205134	1,531	1,531
Global ERU	KSRelief	204533	-	-
Iraq	French MOFA	204808	457	3,534,031
Iraq	French MOFA	205091	2,184,600	589,237
Jordan	UNHCR	204563	(7)	37
Jordan	UNHCR	204812	5,883,727	5,883,727
Jordan	UNHCR	205029	7,088,529	4,534,583
Jordan	UNICEF	204811	403,272	403,272
Lebanon	EC	203528	(5,155)	(5,155)
Lebanon	EC	203696	(727)	(727)
Lebanon	GAC	204375	(454)	-
Lebanon	GAC	204914	1,880,125	1,098,086
Mali	ACF Spain	203973	(4,975)	-
Mali	UNFPA	204850	570,639	648,959
Mali	UNICEF	204504	-	188,263
Pakistan	IOM	204960	136,301	136,301
Somalia	ACF US	205142	22,717	-
Somalia	KSRelief	205013	388,000	129,404
South Sudan	Columbia University	203426	(1,253)	(1,253)
South Sudan	Crown Agents	203050	(3,283)	(3,283)

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY (CONTD.)

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
South Sudan	Crown Agents	203051	(7,109)	(7,109)
South Sudan	Crown Agents	203052	(5,890)	(5,890)
South Sudan	Crown Agents	203053	(2,911)	(2,911)
South Sudan	Crown Agents	203116	(7,666)	(7,666)
South Sudan	Crown Agents	203117	-	(22,441)
South Sudan	Crown Agents	203118	-	(24,356)
South Sudan	Crown Agents	203119	-	(13,589)
South Sudan	Crown Agents	203149	-	(10,460)
South Sudan	Crown Agents	203259	(1,409)	(1,409)
South Sudan	Crown Agents	203260	(5,280)	(5,280)
South Sudan	Crown Agents	203261	(3,238)	(3,238)
South Sudan	Crown Agents	203262	(3,488)	(3,488)
South Sudan	Crown Agents	203263	(3,412)	(3,412)
South Sudan	ECHO	203424	-	(88,709)
South Sudan	KIT	202236	-	(20,638)
South Sudan	UNDP	203120	(1,502)	(1,502)
South Sudan	UNDP	203463	(2,515)	(2,515)
South Sudan	UNFPA	203060	-	(143,349)
South Sudan	UNFPA	205053	589,240	517,434
South Sudan	UNHCR	203308	-	(10,190)
South Sudan	UNICEF	202887	(1,008)	(1,008)
South Sudan	UNICEF	203432	(3,922)	(3,922)
South Sudan	UNOCHA	205034	506,472	379,992
Sudan	Save the Children	205038	375,163	375,163
Sudan	UNOCHA	204494	(15,599)	-
Sudan	UNOCHA	204733	392,239	622,279
Sudan	UNOCHA	204873	154,066	693,556
Syria	DAHW	205022	626,840	626,840
Syria	DRC	204880	949,675	949,675
Syria	DRC	205033	762,581	314,345
Syria	DRC	205064	236,545	127,640
Syria	UNOCHA	205002	305,280	232,101
Ukraine	GAC	204911	4,357,126	2,335,590
Venezuela	LDS	204854	4,498	302,461
Yemen	GAC	204910	1,767,695	832,074
Yemen	MOFAIC	204319	(1,531)	-
Yemen	MOFAIC	204662	7,500,000	4,434,414
Yemen	UNOCHA	204109	(1,637)	(1,637)
Zimbabwe	UNICEF	204856	89,369	111,267
Total Strengthening health capacity			**40,787,018**	**32,965,386**

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Cameroon	UNHCR	204566	-	13,805
Cameroon	UNHCR	205042	884,135	466,322
Central African Republic	French MOFA	204951	110,690	110,690
Central African Republic	UNOCHA	204527	(1,504)	-
Democratic Rep of Congo	LDS Charities Australia	205008	80,000	80,000
Democratic Rep of Congo	UNOCHA	204947	750,000	715,366
Ethiopia	GAC	204912	2,634,892	1,576,560
Ethiopia	MCMDO	204958	195,395	194,321
Ethiopia	UNOCHA	204907	1,130,917	1,130,917
Ethiopia	UNOCHA	204948	804,054	512,845
Ethiopia	UNOCHA	204999	707,518	707,254
Global	French MOFA	204529	(6,842)	249
Global ERU	KSRelief	204898	(1,234,552)	8,300
Iraq	FCDO	204620	17,644,283	17,745,637
Iraq	French MOFA	204564	(370)	-
Jamaica	LDS Charities Australia	204959	300,000	222,337
Lebanon	LDS Charities Australia	204985	300,000	293,813
Libya	LDS	204726	-	85,888
Libya	ZOA Netherlands	204766	(920)	(920)
Libya	ZOA Netherlands	204968	186,500	186,500
Middle East	Donor A	204689	(8,391)	-
Middle East	GAC	204378	(2,547)	3
Middle East	Plan Int. Australia	204634	(13)	15,728
Morocco	LDS	204744	-	-
Myanmar	LDS Charities Australia	205107	300,000	-
Palestinian Territory	Donor B	205075	999,000	126,031
Palestinian Territory	Donor 5	205021	36,752	18,054
Palestinian Territory	KSRelief	204898	494,740	494,740
Palestinian Territory	LDS	205084	1,000,000	487
Palestinian Territory	LDS Charities Australia	204885	-	602,940
Palestinian Territory	Donor C	205024	48,830	48,657
Palestinian Territory	RCSI	205005	311,910	-
Somalia	ACF US	204770	91,972	91,607
Somalia	ACF US	205009	395,853	395,853
South Sudan	ECHO	203047	-	(173,207)

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS (CONTD.)

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
South Sudan	UNDP	203078	-	(15,407)
South Sudan	UNDP	203255	(7,395)	(7,395)
South Sudan	UNDP	203632	(910)	(910)
South Sudan	UNFPA	203054	-	(56,336)
South Sudan	UNICEF	203128	(2,776)	(2,776)
South Sudan	UNICEF	204577	16,693	16,693
South Sudan	UNOCHA	204675	(657)	-
South Sudan	UNOCHA	204696	113,002	113,002
South Sudan	UNOCHA	204838	(12,395)	76,375
Sudan	CDCS	204991	861,993	616,892
Sudan	KSRelief	204898	499,412	499,412
Sudan	LDS	204679	(267)	97,787
Sudan	LDS Charities Australia	205098	1,000,000	93,822
Syria	Donor A	204688	8,196	12,269
Syria	DAHW	204705	272,110	429,444
Syria	FCDO	204620	7,643,213	7,643,213
Syria	GAC	204378	(57)	(57)
Syria	LDS	204594	(758)	7,674
Ukraine	AstraZeneca	204965	200,000	200,000
Ukraine	LDS	204637	-	55,924
Ukraine	LDS Charities Australia	205039	300,000	257,287
US&T - Continental US	LDS	204746	-	76,361
US&T - Continental US	LDS	204974	300,000	300,000
US&T - Continental US	LDS	205006	300,000	64,266
US&T - Continental US	LDS	205049	300,000	246,668
US&T - Puerto Rico	LDS	204941	300,000	260,418
Venezuela	LDS Charities Australia	205015	300,000	164,800
Venezuela	LDS Charities Australia	205102	300,000	-
Yemen	GAC	204374	(7,361)	(122)
Yemen	KSRelief	204898	240,400	240,400
Yemen	UNOCHA	203868	(7,137)	(7,137)
Yemen	UNOCHA	204245	-	(2,629)
Yemen	UNOCHA	205129	5,297	5,297
Total Emergency response and preparedness			**41,072,905**	**37,056,012**

PROJECTS CATEGORISED UNDER MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	WHO	204933	789,589	789,589
Afghanistan	WHO	204953	379,228	378,224
Jordan	KSRelief	204694	50,953	152,519
Pakistan	GIZ	204731	324,245	384,615
Pakistan	IOM	205113	67,328	36,322
Pakistan	UNHCR	204809	329,908	443,433
Pakistan	UNHCR	205041	317,437	317,437
Ukraine	GIZ	205018	831,760	194,383
Ukraine	LDS	204813	-	251,984
Total Mental Health and Psychosocial Support			**3,090,448**	**2,948,506**

PROJECTS CATEGORISED UNDER WATER, SANITATION AND HYGIENE

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	Islamic Development Bank	204649	(9,863)	2
Afghanistan	LDS Charities Australia	204934	300,000	296,834
Ethiopia	UNHCR	204822	1,792,409	1,147,177
Ethiopia	UNHCR	204824	526,545	452,885
Ethiopia	UNHCR	204825	3,511,003	2,806,842
Ethiopia	UNHCR	205060	569,761	1,436,325
Ethiopia	UNHCR	205061	255,567	954,798
Ethiopia	UNHCR	205062	39,389	99,272
Ethiopia	UNICEF	205025	505,812	313,584
Libya	GIZ	204433	(32,073)	(32,785)
Libya	UNICEF	204745	-	2,259
Nigeria	UNOCHA	204691	(59,914)	(61)
Pakistan	UNICEF	204785	265,920	268,837
Somalia	UNOCHA	204940	400,000	400,000
South Sudan	UNDP	203230	(5,050)	(5,050)
Syria	UNOCHA	204789	120,000	192,773
Yemen	GCC	205103	147,324	17,294
Yemen	UNOCHA	204117	(268)	(268)
Yemen	UNOCHA	204732	417,944	649,632
Yemen	UNOCHA	204805	190,642	889,736
Zimbabwe	UNICEF	204869	55,155	226,807
Total Water, Sanitation and Hygiene			**8,990,305**	**10,116,893**

PROJECTS CATEGORISED UNDER WOMEN & CHILDREN'S HEALTH

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNFPA	204814	2,811,110	2,805,411
Afghanistan	UNFPA	205044	2,579,318	2,594,873
Cameroon	UNHCR	204800	738,547	881,421
Cameroon	UNICEF	204771	156,142	222,333
Central African Republic	IRC	204214	(7,373)	(7,373)
Ethiopia	UNFPA	204569	-	(275)
Ethiopia	UNFPA	204837	597,796	597,796
Ethiopia	UNFPA	205063	200,482	171,184
Ethiopia	UNHCR	204823	-	27,502
Jordan	UNICEF	205027	386,177	352,941
Lebanon	French MOFA	204666	(875)	(41)
Lebanon	Plan Int.Australia	204684	(683)	(145)
Mali	GAC	204353	3,956,646	3,290,696
Mali	UNFPA	205083	101,349	101,349
Nigeria	UNICEF	204876	224,939	230,653
Pakistan	IOM	204902	200,498	200,498
Palestinian Territory	UNFPA	205115	312,630	312,630
South Sudan	DFID	202698	-	(10,375)
South Sudan	DFID	203190	-	(379,267)
South Sudan	FCDO	204990	2,800,970	2,507,599
South Sudan	UNDP	203077	(9,957)	(9,957)
South Sudan	UNDP	203461	(9,288)	(9,288)
South Sudan	UNFPA	203307	-	(185,809)
South Sudan	UNFPA	203521	-	(200,115)
South Sudan	UNFPA	204575	-	29
South Sudan	UNFPA	204807	542,664	538,422
South Sudan	UNICEF	203043	-	(15,654)
South Sudan	UNICEF	203163	(3,905)	(3,905)
South Sudan	UNICEF	203580	-	(39,123)
South Sudan	UNICEF	203620	(1,762)	(1,762)
South Sudan	UNICEF	203636	(958)	(958)
South Sudan	UNICEF	204845	425,177	411,126
South Sudan	Private	200029	83,462	83,462
Sudan	UNFPA	205087	193,454	144,947
Syria	GAC	204913	1,645,732	729,426
Yemen	KSRelief	205089	1,455,000	207,247
Total Women and Children's Health			**19,377,292**	**15,547,498**

PROJECTS CATEGORISED UNDER NUTRITION AND FOOD SECURITY

Country	Donor	International Medical Corps (UK) Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	ACF Canada	204550	42,151	42,151
Cameroon	WFP	204881	272,382	272,382
Cameroon	WFP	205119	36,944	36,944
Chad	WFP	205090	3,094,332	3,094,332
Ethiopia	LDS	204709	-	116,911
Ethiopia	The Power of Nutrition	204681	(1,005)	49,650
Ethiopia	UNICEF	204886	711,578	737,641
Ethiopia	WFP	204030	924,175	991,273
Ethiopia	WFP	204704	10,976,156	11,509,685
Ethiopia	WFP	204851	3,091,859	3,117,285
Ethiopia	WFP	204954	29,828,723	29,803,223
Ethiopia	WFP	204993	1,015,880	1,012,521
Global	ACF Canada	204550	121,549	121,549
Global	ELRHA	204915	19,169	19,169
Jordan	WFP	205003	74,079	74,079
Nigeria	WFP	204648	(293)	(293)
Nigeria	WFP	204840	223,937	215,284
Nigeria	WFP	204841	54,522	54,522
Nigeria	WFP	205072	141,311	141,311
Nigeria	WFP	205073	41,149	41,149
Somalia	UNICEF	204491	389,923	467,221
Somalia	WFP	204872	1,705,456	1,705,456
Somalia	WFP	205096	135,556	135,556
South Sudan	ACF Canada	204550	10,732	10,732
South Sudan	UNDP	202937	(1,105)	(1,105)
South Sudan	UNDP	203145	(7,807)	(7,807)
South Sudan	UNDP	203256	-	(22,002)
South Sudan	UNDP	203429	-	(14,840)
South Sudan	UNDP	203635	(2,781)	(2,781)
South Sudan	UNHCR	203035	(4,668)	(4,668)
South Sudan	UNHCR	203520	-	(12,644)
South Sudan	UNICEF	203155	-	(21,601)
South Sudan	UNICEF	204562	1,882,204	1,818,851
South Sudan	UNICEF	205095	87,534	44,379
South Sudan	WFP	203540	(1,509)	(1,509)
South Sudan	WFP	203544	(1,524)	(1,524)
South Sudan	WFP	203545	(1,052)	(1,052)
South Sudan	WFP	204810	2,249,440	2,167,997
Venezuela	WFP	204767	3,232,614	3,232,614
Yemen	LDS	204630	(545)	32,392
Yemen	LDS Charities Australia	204905	58,063	793,471
Yemen	UNOCHA	204111	(6,592)	(6,592)
Yemen	UNOCHA	204906	61,779	410,630
Yemen	UNOCHA	205014	445,733	445,733
Total Nutrition and Food Security			**60,900,049**	**62,617,675**

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HOW YOU CAN HELP

Give hope, give health

There are many ways you can help International Medical Corps (UK) provide lifesaving care and help communities gain self-reliance after a disaster.

INTERNATIONALMEDICALCORPS.ORG.UK/DONATE

WAYS TO GIVE

Become a monthly donor

Make a one-time gift via cheque, credit card, wire transfer or online

Make a gift in honour of a loved one

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Accounts



INTERNATIONAL MEDICAL CORPS (UK) 2023/2024 ANNUAL REPORT

Company Registration No. 04474904



AFGHANISTAN


40 YEARS OF
HOPE



INTERNATIONAL MEDICAL CORPS (UK)

2023/2024 ANNUAL REPORT

ZIMBABWE

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International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

Throughout the document, where references to "affiliates" (in plural) are made, they refer to International Medical Corps and International Medical Corps Croatia.

Unless otherwise stated, projects and their statistics referred to in the first part of this report (pages 1-37) are the results of combined International Medical Corps (UK), International Medical Corps and International Medical Corps Croatia global efforts in calendar year 2023 and do not form part of the statutory annual report. Projects and their statistics referred to in the second part of this report (pages 38-88) represent the work of International Medical Corps (UK) only, and covers the 12-month period to 30 June 2024 and forms part of the statutory financial statements and trustees report.

TO OUR SUPPORTERS

International Medical Corps has operated in 80 countries worldwide, reaching millions through our services and training since our founding in 1984. Since 2002, International Medical Corps (UK) has played a critical role in these lifesaving activities. Today, we remain steadfast in our mission to save lives, relieve suffering and foster self-reliance for crisis-affected people around the world.



GAZA

With your generous contributions, we responded to the world's most pressing crises, providing urgently needed support to nearly 16.5 million people in 2023.

In Ukraine, we've continued to support civilians and healthcare infrastructure by providing essential healthcare and mental health services, rehabilitating hospitals and offering in-person and virtual training in various fields such as emergency care and infection prevention and control. What began as a team of 30 people in Mariupol in 2022 has now expanded to some 400 humanitarians based in cities throughout the country. As the conflict continues, our work ensures the continuity of healthcare for Ukraine's most vulnerable communities.

We also are responding to the crises in Israel and Gaza. In Israel, we are working with a longtime partner to support those who have been hardest-hit, including vulnerable younger, disabled and older citizens. In Gaza, where we have worked since 2008, we deployed two fully equipped field hospitals in early 2024. Our staff provides lifesaving care to civilians affected by the war, including by providing surgical care for trauma, emergency obstetric and newborn care, physical rehabilitation, mental health services and more. We have also launched widespread, community-based nutrition and vaccination campaigns to save children's lives.

In Sudan, the ongoing civil war has caused the world's largest displacement crisis, and our teams are working throughout the country, delivering vital health services amid the turmoil. We also are helping refugees and returnees affected by the crisis who have fled to the Central African Republic, Chad and South Sudan.

As usual, in 2023 our staff responded rapidly to natural disasters around the world, while continuing to provide ongoing support to those affected by earlier disasters in Afghanistan, Libya, Morocco, Somalia, Syria and Türkiye. And in the Middle East and East Africa, we're providing healthcare services to refugees and ensuring that children have access to clean water and nutrition support in drought-stricken Ethiopia, Somalia and Yemen.

Of course, since the founding of International Medical Corps 40 years ago, training local people to be their own best first responders has remained at the heart of our mission. From teaching women to screen children for malnutrition in Yemen's remotest villages to training Ukrainian frontline workers to safeguard their own—and others'—mental health, we're helping the communities that need it most to build their resilience.

Finally, we would like to remember one person who embodied this spirit of teamwork, compassion and dedication: Ognjen "Oggie" Radosavljevic, who sadly passed away in August 2024. A long-time member of the International Medical Corps family and, most recently, the Managing Director of International Medical Corps (UK), his memory will live on in our staff and in the lives of the thousands of people he helped during his humanitarian career. We will miss his warm smile and unwavering commitment to helping others.

And we would like to thank you. None of the work we do to help others would be possible without your support. Together, we will continue to strive for a world where children never go hungry, mothers always survive childbirth and families can access the care and support they need.

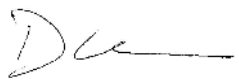
Thank you for being part of our global humanitarian efforts to help those in need.



Andrew W. Géczy
Chairman
International Medical Corps (UK)







David Eastman
Acting Managing Director
International Medical Corps (UK)


40 YEARS OF
HEALTH



PAKISTAN

OUR MISSION

WE ARE A GLOBAL FIRST RESPONDER

We deliver emergency healthcare and related services to those affected by conflict, natural disaster and disease. We do this no matter where they are in the world, whatever the conditions may be. At the same time, we train people in their own communities, providing them with the skills they need to recover, build self-reliance and shape their own future, enabling them to become effective first responders themselves.





ETHIOPIA



SPEED SAVES LIVES

Our emergency response teams deploy quickly to help those in great need—often arriving within hours—even in the most remote, challenging environments.



DEMOCRATIC REPUBLUC OF THE CONGO



GAZA FIELD HOSPITAL

We draw on our experience gained over 40 years of responding to disasters in more than 80 countries on six continents. Our staff includes physicians and nurses trained in emergency medicine, supported by specialists in essential healthcare services that range from women and children's health, to nutrition services, to water, sanitation and hygiene, to mental health and psychosocial support, and to gender-based violence protection services.

We maintain our capacity to respond quickly because, in the initial hours following a disaster, speed saves lives. As conditions ease, we remain and partner with survivors to build a better future for their community. The key to our approach is training—an essential component of all our programmes, used to transfer the latest knowledge and skills into local hands, to help build a brighter future. We strengthen local health systems and work with community leaders, hire and train local staff, develop partnerships and constantly evaluate progress to ensure quality outcomes.

With a staff that numbers more than 8,000 worldwide, 96% of whom are recruited locally, our strategy ensures that the knowledge and tools required to prepare for—and respond to—future emergencies are culturally compatible and remain available in the community. We work to ensure that if disaster strikes again, residents can be their own first responders.

OUR PROGRAMMES

In 2023, our teams worldwide faced humanitarian crises head-on, from conflict and hunger to drought and disease. In the face of these challenges, we delivered critical services and training to underserved communities in hard-to-reach areas, often under dangerous conditions.



EMERGENCY RESPONSE AND PREPAREDNESS

In Syria, International Medical Corps' mobile medical teams responded rapidly since the devastating February 2023 earthquakes. We're continuing to provide healthcare services and tackle emerging crises—such as cholera outbreaks—and simultaneously building local capacity through training for local health workers and volunteers.

HEALTH SERVICES SUPPORT

In Yemen, where around half of the country's health facilities are no longer functioning after a decade-long civil war, we're rehabilitating these essential services. We're also delivering essential medical and non-medical supplies, including specialist diagnostic equipment.

FAMILY AND COMMUNITY HEALTH

In Jordan's Azraq and Zaatari refugee camps, we're providing comprehensive health and nutrition services for women and children. In the first half of 2024, we provided 14,716 paediatric consultations, gave inpatient care for 720 children, and counselled 482 mothers in infant and young-child feeding practices.



WOMEN'S AND CHILDREN'S HEALTH

In South Sudan, where conflict and displacement have led to widespread violence against women and girls, our GBV prevention and response work and livelihoods assistance programmes are empowering communities. Over the past eight years, we've also distributed 79,451 dignity kits.

NUTRITION AND FOOD SECURITY

In Ethiopia, where malnutrition is widespread, we're treating vulnerable people, raising awareness and distributing food in schools and communities. We have screened 471,818 people for malnutrition, providing lifesaving care to 56,782 children under five and 56,213 pregnant and lactating women.

WATER, SANITATION AND HYGIENE

In Ukraine, where the conflict has damaged infrastructure, we're rehabilitating water systems. This includes protecting access to safe water for 86,500 people in Sumy and 69,000 in Kharkiv and Mykolaiv by installing new water supply and sewerage pumps.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)

In Afghanistan, we're providing crucial MHPSS services. This includes supporting a drug addiction treatment centre in Kabul, where we've helped 401 women and children with integrated evidence-based treatment, rehabilitation and psychosocial support.



40 YEARS OF TRAINING

SOUTH SUDAN



TRAINING FOR LASTING IMPACT

Training is the foundation of our work, providing people with the support they need to move from relief to self-reliance. For example, we provide in-person trauma-care and mass-casualty management training to thousands of healthcare professionals in countries plagued by conflict.



UKRAINE



GLOBALLY, IN 2023, WE TRAINED

107,202

people through 5,611 training sessions covering a range of health-related issues.

3,042

people in the basics of administering psychological first aid.

1,743

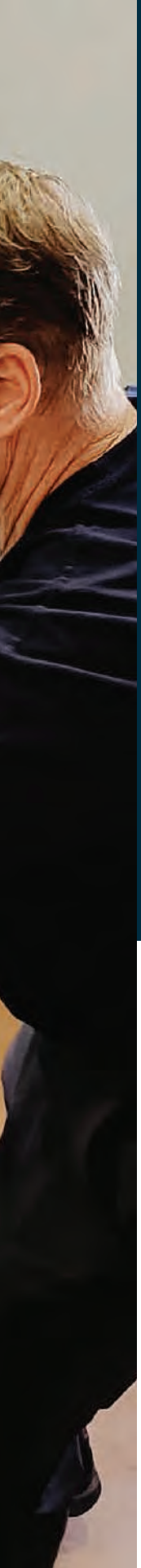
people to participate in community-based WASH and health committees.

2,589

people in child protection topics, including case management.



UKRAINE



UKRAINE

Currently, 9 million people in Ukraine are living with non-communicable diseases (NCDs). Two million people live with diabetes, while approximately 22% of the population lives with high blood pressure. Many residents who lived in areas affected by conflict have not received ongoing, sufficient medical care, so doctors who are treating patients in newly liberated areas are facing a rise in heart attacks and strokes caused by NCDs.

In response, International Medical Corps has partnered with the Family Doctor's Association of Southern Ukraine and professors from the Odesa National Medical University to provide training for family doctors and general practitioners in Kherson and Mykolaiv, helping them to better address NCDs in their practices. The training sessions covered such topics as hypertension, diabetes, high cholesterol, the effects of obesity, beneficial lifestyle changes and how to improve nutrition.

In addition, International Medical Corps has continued to partner with the Harvard Humanitarian Initiative to provide trauma-care training to Ukrainian nurses, doctors and other first responders, so far reaching almost 6,000 people with in-person classes. Last year, universities across Ukraine sent faculty to our training courses, helping to strengthen their skills and teaching them to conduct the courses themselves—ensuring that first responders in Ukraine are better prepared to handle trauma and emergency care in their own communities.



SOMALIA

SOMALIA

In Somalia, armed conflict and attacks on groups of civilians are far too common. After such mass-casualty events, hospitals can be overrun with patients—and chaos.

To address this, the World Health Organisation developed mass-casualty management (MCM) standards and a training course for hospital emergency units. In addition, it developed a Basic Emergency Care (BEC) course for health workers who are challenged by the need to provide lifesaving care with limited resources. In October, International Medical Corps provided both MCM and BEC training to Somali health workers, and helped hospitals in the country create MCM plans, enabling them to be ready for surges in demand caused by the fighting.

EGYPT, JORDAN AND THE WEST BANK

We provided training in Jordan and Egypt to our staff members to prepare them to deploy with our field hospitals in Gaza.

We also provided training to medical professionals in Egypt to help them treat trauma victims brought there from Gaza. In the West Bank, we trained International Medical Corps staff and Palestinian health workers to become instructors, and provided training to local health workers who are treating an increasing number of trauma patients there.



EGYPT


International Medical Corps



40 YEARS OF RESILIENCE

In 2023, International Medical Corps responded directly to the needs of nearly 16.5 million people in 29 countries on five continents.



AMONG THE RESULTS OF OUR WORK

16.5 MILLION

DIRECT BENEFICIARIES

Of these, nearly 3 MILLION were children under 5. Our work also reached more than 55 MILLION others who benefited indirectly from our programmes and work.

107,202

PARTICIPANTS TRAINED

This included clinical and non-clinical health staff, government and non-government staff, community health workers and volunteers.

9.3 MILLION PRIMARY HEALTH CONSULTATIONS

Of these, more than 2 MILLION were for children under 5.

1,392

HEALTH FACILITIES SUPPORTED

In 2023, we provided vital assistance to 954 primary health facilities and 113 hospitals, and enabled 323 mobile clinics to reach people in underserved and remote areas.

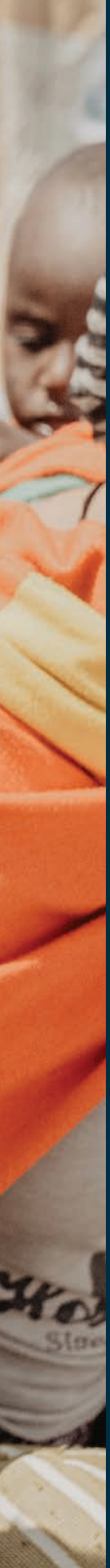
141,004

CHILDREN VACCINATED AGAINST MEASLES

Vaccinating children protects future generations from the dangers of measles and builds more resilient immune systems.



ETHIOPIA



WOMEN'S AND CHILDREN'S HEALTH

The key to our future

Ensured that 102,006 births were assisted by a trained birth attendant.

NUTRITION

The foundation of life

Provided 2,375,098 people with critical nutrition support and treated 282,385 children for acute and severe malnutrition.

WATER, SANITATION AND HYGIENE

The essence of good health

Helped more than 2.8 million people with water, sanitation and hygiene needs, and supported the delivery of 127,734,898 liters of clean, safe water.

MENTAL HEALTH CARE AND PSYCHOSOCIAL SUPPORT

The invisible wounds

Provided services to 1,138,993 people through hundreds of facilities, mobile teams and other means of delivery.

GENDER-BASED VIOLENCE

A violation of fundamental human rights

Offered protection and support to 1,748,080 people living with the threat—or reality—of gender-based violence.

WHERE WE WORK



In 2023, we provided urgently needed healthcare and related services to nearly 16.5 million people in some 29 countries on five continents.

AMERICAS

United States & Territories*

Venezuela*

AFRICA

Cameroon*

Central African Republic*

Chad

Democratic Republic of the Congo*

Ethiopia*

Libya*

Mali*

Nigeria*

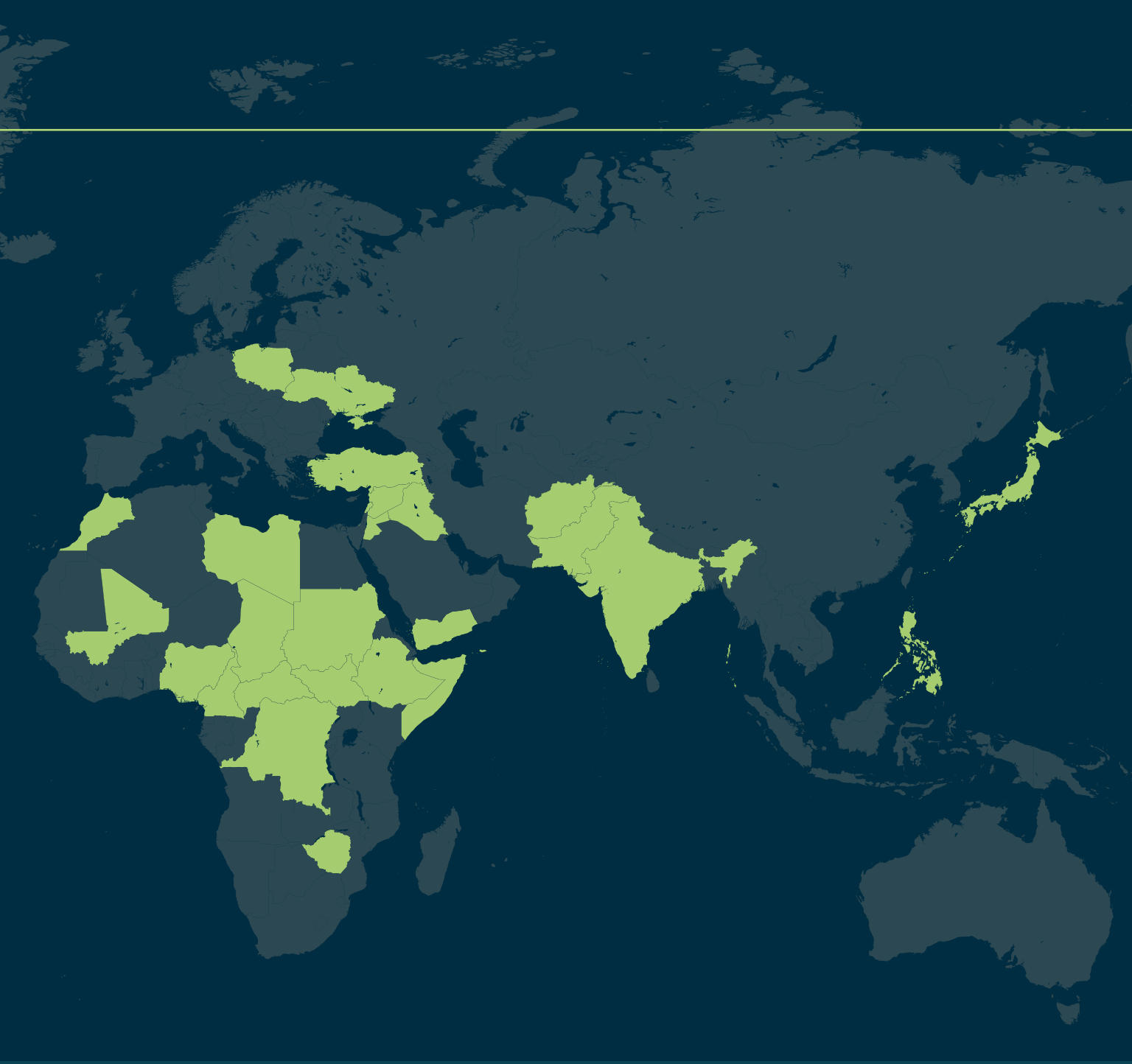
Morocco*

Somalia*

South Sudan*

Sudan*

Zimbabwe*



EUROPE

Poland*
Ukraine*

MIDDLE EAST

Gaza*
Iraq*
Jordan*
Lebanon*
Syria*
Türkiye
Yemen*

ASIA

Afghanistan*
India
Japan
Pakistan*
Philippines*

**Countries where International Medical Corps (UK) programmes were funded during the 12 months to 30 June 2024.*


40 YEARS OF
SELF-
RELIANCE



ETHIOPIA

STRENGTHENING HUMANITARIAN RESPONSES TO INFECTIOUS DISEASE OUTBREAKS

International Medical Corps is leading the Local Engagement and Response Network (LEARN) programme, working in partnership with Africa Humanitarian Action, Brigham Women's Hospital/ Harvard Humanitarian Initiative, the International Council of Voluntary Agencies and Veterinaires Sans Frontieres International.

Over the next five years, the programme—funded by the United States Agency for International Development's Bureau for Humanitarian Assistance—will collaborate with 80 local and national organisations across 14 countries to build preparedness for infectious disease outbreaks and expand the capacity to respond to humanitarian crises. The collaboration will strengthen local networks of first responders and support their engagement and participation in regional and international coordination as valued, frontline responders and stakeholders.



GUINEA



CORE GROUP PARTNERS PROJECT

International Medical Corps is a consortium member of the Core Group Partners Project (CGPP), in Borno and Kano states, Nigeria. As members of the CGPP, we work to protect children and interrupt the transmission of the polio virus through vaccinations, outbreak response, case surveillance and community engagement programmes that reduce vaccine hesitancy. We also foster interdisciplinary collaboration among stakeholders, including Nigerian government agencies, the WHO and UNICEF.

While Nigeria attained polio-free status in 2020, the wild poliovirus is still transmitted from other endemic countries. To protect Nigerian children, CGPP is working with the Nigerian government to focus on border communities where large populations of displaced children are at high risk of contracting and spreading polio. CGPP volunteers are working with local community leaders to reach vaccine-hesitant families through door-to-door campaigns, building trust among community members and vaccinating children.

Our CGPP partners also work with International Medical Corps security personnel, alongside the Nigerian Civilian Joint Task Force and military to gather intelligence and staff vaccination teams in remote areas.

LEADERSHIP

International Medical Corps (UK) is an international humanitarian nongovernmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

INTERNATIONAL MEDICAL CORPS-UK BOARD OF DIRECTORS

Andrew W. Géczy
CHAIRMAN
London

Hendrik Cornelis
SECRETARY
London

Nancy A. Aossey
TREASURER
Los Angeles, CA

Reto Braun
Switzerland

Dominic J. O'Hagan
United States

C. William Sundblad
Santa Monica, CA



Global Ambassador Lily Donaldson works with Somali refugee children in Ethiopia as part of our Photo Camp project with National Geographic.

Global Ambassador Kevin Curry provides nutrition education to residents at a senior citizens center in Puerto Rico.



GLOBAL AMBASSADORS

Kevin Curry
Influencer, Activist

Lily Donaldson
Model, Activist

Judy Greer
Actress, Activist

Maz Jobrani
Comedian, Actor

Sanaa Lathan
Actress, Humanitarian

Sienna Miller
Actress, Activist

Ashley Park
Actress, Humanitarian

Inanna Sarkis
Actress, Activist

Stacy Twilley
Founder and CEO
iVolunteer.org

CELEBRITY FIRST RESPONDERS

Muna AbuSulayman
Genevieve Angelson
Bob Crawford
Jay Ellis
Paul Forman
Nikki Glaser
Ben Harper
Jaclyn Harper
Jihae
David Koechner
Heidi Murkoff
Yvonne Orji
Robert Pattinson
Jeff Probst
Nina Senicar
Tom Sturridge
Tara Summers

ADMINISTRATIVE DETAILS OF THE CHARITY, THE TRUSTEES AND ADVISORS

TRUSTEES

Andrew W. Géczy
CHAIRMAN

Nancy A. Aossey

Reto Braun

Hendrik Cornelis
SECRETARY

Dominic J. O'Hagan

C. William Sundblad

MANAGING DIRECTOR

Ognjen Radosavljevic
(to 4 August 2024)

David Eastman
(Acting Managing Director
from 5 August 2024)

FINANCE DIRECTOR

Fahmida Wadud-Muhit

REGISTERED OFFICE

Workspace 4, Mode
1-6 Centric Close
Oval Road, Camden
London
NW1 7EP

TELEPHONE
WEBSITE

0207 253 0001
https://www.internationalmedicalcorps.org.uk

COMPANY REGISTRATION NUMBER

04474904 (England and Wales)

CHARITY REGISTRATION NUMBER

1093861

AUDITOR

Buzzacott LLP
130 Wood Street London
EC2V 6DL

BANKERS

Barclays Bank PLC
5th Floor
Level 27
1 Churchill Place London
E14 5HP

TRUSTEES' REPORT (INCLUDING STRATEGIC REPORT) 30 JUNE 2024

The trustees, who are also directors of the company for the purposes of the Companies Act 2006, present their report along with the financial statements of the charity for the year ended 30 June 2024. The financial statements have been prepared under the accounting policies set out therein and comply with applicable law and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102).

The report as a whole has been prepared in accordance with Part 8 of the Charities Act 2011. The information in the sections headed 'Strategic Report' constitutes the strategic report as required by the Companies Act 2006 (strategic report and directors' report) Regulations 2013.

The required information to be presented in a directors' report under the Companies Act 2006 is incorporated in the remaining sections of the report.

STRUCTURE, GOVERNANCE AND MANAGEMENT

TRUSTEES AND ORGANISATIONAL STRUCTURE

International Medical Corps (UK) ('the Charity') was incorporated as a company limited by guarantee in England and Wales on 2 July 2002 and registered as a charitable organisation with the Charity Commission on 19 September 2002. Activities commenced on 1 November 2002.

International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation that shares the same mission, and International Medical Corps Croatia, an association registered in Croatia. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes on the ground in accordance with the terms and conditions of its grants. During the year, more than $135 million of the Charity's programmes were delivered in partnership with International Medical Corps (2023: $121 million). This represents an 11% increase (2023: 10% increase compared to 2022) in activities worldwide over the previous year. International Medical Corps (UK) also maintains an Administrative Services Agreement with International Medical Corps Croatia to share certain services in connection with its operation.

For ease of reference, International Medical Corps (the non-profit organisation registered in California) will be referred to as International Medical Corps. The UK charity will be referred to as International Medical Corps (UK).

The trustees govern in accordance with the Memorandum and Articles of Association of International Medical Corps (UK) and all subsequent amendments.

The trustees of the Charity have the powers to appoint and remove a trustee. The Board of Directors of International Medical Corps has the right to appoint one trustee (and any successor) by notice in writing addressed to the Secretary of the Charity, and any person so appointed shall become a trustee immediately upon receipt by the Secretary of such notice.

International Medical Corps (UK) adheres to and supports the development of the Sphere Project's Minimum Standards in any disaster response. International Medical Corps (UK) is also informed by the guiding principles of CHS Alliance's Code of Good Practice for the Management and Support of Field Staff.

The Board of Trustees is the governing body for International Medical Corps (UK) and currently comprises six members who aim to meet several times each year. Additional meetings can be called at the request of the Chair. For the 2023–24 financial year, the board of trustees met in December 2023 and June 2024. The list of trustees who served in the year is shown on page 38.

Risk, compliance and external audit functions sit with the board.

As the governing body for the Charity, the trustees take decisions and approvals on a board level regarding strategic and operational risks, as follows:

- **Strategy.** Determine and approve International Medical Corps (UK)'s strategic direction and annual business plan, scrutinising the extent to which the Charity has been able to meet its charitable objectives.
- **Management.** Review and provide oversight of the implementation of the Charity's country programmes.
- **Financial Management and Compliance Requirements.** Review and approve annual budgets, statutory statements and ensure full compliance with all constitutional, legal, regulatory and statutory requirements.
- **Risk.** Review and approve International Medical Corps (UK)'s procedures for risk management, and

ensure there is a framework of structures, policies and processes in place for the organisation and the board of trustees.

STATEMENT ON APPROACH TO SAFEGUARDING

International Medical Corps (UK) and its affiliates are committed to delivering programming that is safe, accountable, and inclusive in order to address the inherent inequities of power that can exist in humanitarian settings, by putting the people affected by crisis at the centre of assistance and ensuring there are systems in place to elevate the needs of people and communities affected by crises. Safeguarding is a means of risk prevention and mitigation, which reflects our responsibility to ensure our personnel, operations, and programmes do no harm to the people with whom we work, with a particular focus on protecting those people who may be most vulnerable to exploitation and/or abuse. International Medical Corps (UK) receives all relevant reports of safeguarding violations from its US affiliate. As per the Charity's governance structure, the Managing Director and senior staff manage all safeguarding matters.

The Charity's US affiliate continues to reinforce its safeguarding capacity and capability through an organisation-wide approach, which includes incorporation of guidance received from the Foreign, Commonwealth & Development Office (FCDO) of the UK Government, other donors, and the Charity Commission.

The following policies of International Medical Corps (UK) outline the Charity's approach to managing safeguarding matters. The policies are reviewed and updated periodically.

- Code of Conduct and Ethics
- Safeguarding Policy, encompassing child safeguarding, protection from sexual exploitation and abuse, safeguarding adults at risk, prevention of trafficking in persons
- Whistleblower Policy
- Guidance on Sub-Recipient Safeguarding and Ethical Conduct requirements
- Anti-Harassment and Bullying Policy
- Conflict of Interest Policy/Staff Integrity Policy
- Disciplinary Rules, including grievance procedures
- Recruitment and Selection Process
- Health and Safety Policy
- Modern Slavery Statement

In addition to the policies, staff are also required to complete mandatory training and awareness-raising courses that include:

- Code of Conduct and Ethics
- Prevention of Trafficking in Persons
- Child Safeguarding
- Preventing Harassment in the Workplace
- Prevention of Sexual Exploitation and Abuse

This training is completed at induction, and refresher training is completed on an annual basis.

The Charity's US affiliate continues to reinforce the following key safeguarding actions taken during the recent years.

THE SAFEGUARDING TASK FORCE

The Safeguarding Task Force provides focus, leadership and oversight over all global safeguarding initiatives. The Safeguarding Task Force is a multi-disciplinary team comprising staff from key departments, including Domestic and International Affairs, Legal, Human Resources, Ethics and Compliance, Technical Unit and International Programmes. The Safeguarding Task Force workplan covers the development and implementation of safeguarding initiatives, including policy review and updates, prevention and protection, survivor assistance guidance, capacity strengthening, training and country support.

POLICY DEVELOPMENT AND IMPLEMENTATION

The umbrella Safeguarding Policy encompasses:

- Child Safeguarding
- Protection from Sexual Exploitation and Abuse
- Safeguarding Adults at Risk
- Prevention of Trafficking in Persons

Sexual harassment in the workplace is covered under the Policy for Protection from Harassment, Bullying and Sexual Misconduct. All policies are reviewed and updated periodically.

SAFEGUARDING POLICY IMPLEMENTATION GUIDE AND TOOLKIT

The Safeguarding Task Force has developed a guide to support understanding and implementation of the International Medical Corps' Safeguarding Policy. The guide describes priority actions that need to be undertaken by country teams to ensure the full implementation of the Safeguarding Policy at the country and programme/project level.

Each priority action has a brief explanation of its importance, an overview of the action itself, how to document or demonstrate that an action has been completed, and guidance on where further tools and information can be found within the accompanying Safeguarding Implementation Toolkit, in order to implement the actions.

The accompanying Toolkit contains tools, information and guidance to support the implementation of the Safeguarding Policy. Examples of the tools include a Safeguarding Action Plan Template, the Terms of Reference for the Safeguarding Focal Points and the Survivor Assistance Guidelines.

TALENT ACQUISITION

Safeguarding is included in the corporate staff-recruitment process, from advertisement to hiring.

Key actions include the following steps:

- Safeguarding risks are considered for each role.
- Behavioural-based safeguarding questions are included in the headquarters level interview process for all positions, including field recruitments.
- Managers' responsibilities for ensuring safeguarding measures for volunteers, employees and partners are now routinely included in job descriptions for international staff and are part of the management and staff performance-appraisal process.

International Medical Corps UK and its affiliate International Medical Corps participate in the Inter-Agency Misconduct Disclosure Scheme from the Steering Committee for Humanitarian Response. In accordance with this, we will request information from an applicant's previous employers about any findings of sexual exploitation, sexual abuse and/or sexual harassment during employment, or incidents under investigation when the applicant left employment.

SAFEGUARDING FOCAL POINTS

More than 150 Safeguarding Focal Points are identified at the country level. Safeguarding Focal Points are nominated by the Country Director. Training resources, materials and support include regular orientation sessions, terms of reference, extensive trainings and regular webinars, and a resource library on our intranet.

Safeguarding Focal Points' responsibilities include training, programme support as related to Safeguarding (e.g. proposal development), coordinating with the Headquarters Safeguarding Taskforce, and liaising with other focal points from partner agencies and working groups.

Staff globally receive an annual refresher training that covers Safeguarding. Our Safeguarding Focal Points are responsible for ensuring that this training is completed, in coordination with our Learning & Development team at Headquarters.

SAFEGUARDING VIOLATIONS—CASE MANAGEMENT

Reports of violations of International Medical Corps' safeguarding policies are referred to the Ethics and Compliance Department, which conducts investigations in consultation with the Safeguarding Case Team, an interdisciplinary group of senior leaders. Individuals who are found to have violated International Medical Corps' policies are subject to disciplinary action, up to and including termination. As well as considering individual cases, the Safeguarding Case Team analyses safeguarding data over time to identify risks and emerging themes. Key lessons learned through this process inform future safeguarding policy updates and practice, as part of an institutional culture of constantly striving to improve.

SURVIVOR/VICTIM SUPPORT

International Medical Corps works to ensure that survivors of safeguarding violations receive appropriate and timely support, including medical, psychosocial and other services, according to their needs and wishes. Survivors are also informed of their rights to report incidents to police and/or other relevant authorities. In contexts where reporting to authorities may be indicated, International Medical Corps' Safeguarding Case Team advises survivors and consults with Legal Counsel to determine the best course of action. To the extent possible, survivors' wishes guide decisions about the types of support received, and survivors are fully informed of their options and rights.

SAFEGUARDING RISKS OF DOWNSTREAM PARTNERS

Downstream partners are required to conduct all activities under sub-agreements in a manner consistent with international laws, humanitarian principles and donor regulations. Subrecipients are prohibited from engaging in any type of harmful misconduct, including but not limited to sexual exploitation, abuse, harassment and trafficking. Subrecipients are required to inform International Medical Corps of any safeguarding issues that arise under the sub-agreement. Safeguarding-specific requirements are included in the downstream partner risk-assessment guidelines.

DEFINING RISK OWNERS

Ownership of safeguarding risks is documented in the organisational risk register of the Charity and its US affiliate, explicitly stating that the risks are owned by executive staff. The Charity's trustees are updated at least twice a year.

SAFEGUARDING—PREVENTION MEASURES

A comprehensive approach to maintaining and strengthening prevention measures includes incorporating protection mainstreaming into programme design and implementation and training of staff to enhance this approach, as well as the utilisation of a risk mitigation approach to dealing with safeguarding violations.

THE ENVIRONMENT

International Medical Corps (UK) actively promotes policies that support the inclusion of safe environmental protection at HQ and country levels. International Medical Corps (UK) emphasises environmental management for the success of our projects. The organisation is committed to upholding national and international standards for sound environmental practices. At the country-level programme implementation, the charity aims to reduce excess morbidity and mortality associated with potential

exposure to environmental factors. International Medical Corps coordinates globally with other stakeholders to deliver integrated approaches addressing environmental, social, public health-related, climate-adaptive and climate-resilient interventions in multiple sectors. The organisation acknowledges the challenges and significance of addressing environmental issues and risks. International Medical Corps collaborates closely with local communities and authorities to ensure a comprehensive understanding and minimal environmental impact. International Medical Corps (UK)'s US affiliate, International Medical Corps, is working to integrate a commitment to maintaining environmental standards in its Code of Conduct, which is subscribed to by all employees, volunteers, suppliers, and sub-partners.

International Medical Corps, recognised as a leader in the field, has taken the proactive step of developing checklists for monitoring ECHO MER (Minimum Environmental Requirements) compliance in WASH and is currently implementing them across country programmes. Country teams conduct risk and impact assessments related to healthcare waste and expired medicine disposal on a project-specific basis and provide recommendations for controlling and mitigating these impacts through tailored interventions. These interventions encompass capacity building, utilisation of alternative energies, prevention of environmental degradation through sustainable groundwater use, greening and solarization of groundwater resources, health facility-based cold chains, soaking water, open defecation prevention, and environmental health (safe domestic and medical waste management at the health facility and community levels). These initiatives aim to positively influence the targeted communities' knowledge, attitude, and behaviour.

The organisation has proudly committed to co-signing the global pledge on Energy and Infrastructure, emphasising our dedication to adopting cost-efficient, environmentally sustainable solutions. Our primary focus lies in supporting climate adaptive, climate resilient and sustainable WASH (Water, Sanitation, and Hygiene) systems designed to effectively address water scarcity and floods and mitigate climate change while harnessing the potential of renewable energy options. Notably, the successful implementation of alternative energy and green initiatives for International Medical Corps-supported solar-powered communal water systems has resulted in sustained access to water for more than 432,626 community members, preserving over 1,650,384 litres of fuel in 2023. Furthermore, in Damboa, Nigeria, International Medical Corps' innovative rainwater harvesting initiative utilising a surface dam has significantly impacted the community, providing multiple benefits, including clean water to an IDP camp, contributing to groundwater recharge, and alleviating stress on scarce groundwater resources.

The Charity is dedicated to upholding high environmental compliance standards and will persist in supporting a cautious approach to environmental challenges. The organisation will undertake initiatives to encourage greater environmental responsibility and promote developing and disseminating environmentally friendly technologies. The organisation contributed to the development of donor minimum environmental requirements, and implemented environmental assessment guidance for the International Medical Corps (UK) donors of Global Affairs Canada and UNICEF for Climate Resilience. International Medical Corps' strategy is designed to comply with various policies, global standards, and management practices. It addresses explicitly environmentally sensitive activities such as water supply, sanitation, and biomedical waste management.

The International Medical Corps has developed comprehensive guidelines to reduce its environmental impact, especially in logistics, the supply chain, and WASH infrastructure interventions. This includes transporting goods and staff, sourcing, packaging, and power supply. The organisation is committed to implementing best practices and recommendations from esteemed agencies such as Groupe URD, IFRC, WHO, and WFP. Additionally, International Medical Corps is actively involved in initiatives like "WREC" (Waste Management And Measuring, Reverse Logistics, Environmentally Sustainable Procurement And Transport, And Circular Economy) and WORM (the "Joint Initiative" that involves collaborating with other humanitarian organisations to review, develop, and share tools and methodologies aimed at reducing the carbon footprint of operations. The Waste in Humanitarian Operations: Reduction and Minimisation (WORM) EU-funded project focuses on waste management during emergencies. International Medical Corps is leading efforts to identify best practices for waste management during Emergency Medical Team deployments.

Since 2022, International Medical Corps measure its CO2 emissions generated globally by transport (international shipment and vehicles) and power production (including since 2023 power grid – scope 2 emissions), and also international travels emissions. The results are used to identify improvement opportunities and initiatives to be developed in close collaboration with country teams (such as carpooling or solarization of facilities).

International Medical Corps, as member of the Fleet Forum, has committed to report fleet related emissions on annual basis (enabling comparison with other organisations), promote vehicle sharing with other INGO and transition to vehicles with lower negative impact on the environment (i.e., EURO 3 or higher).

International Medical Corps continues to develop and disseminate eLearning to improve awareness and provide solutions for emissions reduction. In 2024, an additional training module was developed promoting sustainable practices in warehouse and stock management.

The Charity offers staff environmentally friendly initiatives such as the Cycle to Work Scheme, which is about promoting an alternative way to travel to work and allowing staff to work from home on some days as part of its flexible working policy, contributing to staff welfare and less pollution due to reduced daily commute to work.

The Charity was a low-energy user during the reported period and is not reporting under the UK Government's Streamlined Energy and Carbon Reporting (SECR) requirements.

STATEMENT ON MODERN SLAVERY

International Medical Corps (UK) publishes its modern slavery statement every year, committing to prevent modern-day slavery and human trafficking within the organisation and its supply chains. The Charity actively and continuously works with its affiliates to reduce and eliminate this risk. New employees are informed about organisational policies that contribute towards eliminating modern day slavery by the Human Resources function during staff onboarding orientation. Additionally, all employees are provided with annual training about the prevention of trafficking in persons, sexual exploitation and abuse, and child labour. Related information is made available to employees on the organisation's intranet, as well as through posters displayed in all field and headquarters offices. In addition, International Medical Corps' Global Safeguarding Policy has been updated, made pursuant to section 54(1) of the Modern Slavery Act 2015 (UK). It mandates that all suspicions are reported and are then reviewed and investigated by the Ethics and Compliance Investigation Unit and the Safeguarding Case Team.

In 2017 International Medical Corps revised the vendor Code of Conduct which must be signed by any supplier before entering into business with International Medical Corps. It includes a chapter on the prohibition of human trafficking. Provisions are also inserted in procurement Master Terms and Conditions. Failure to comply constitutes a breach of an essential term of the Contract, leading to revoking the vendor's registration with International Medical Corps and inclusion of the company on the watch list maintained by our Ethics & Compliance department.

KEY MANAGEMENT PERSONNEL

The key management team of the Charity consists of the trustees, the Managing Director and the senior management team. The trustees have delegated management of the Charity's operations to the Managing Director, who is supported by the senior management team as follows:

International Medical Corps (UK)-contracted staff:

- Senior Director of International Programmes
- Senior Director of Finance, Grants and Contracts
- Senior Director of Human Resources

International Medical Corps-contracted staff:

- Chief Operating Officer
- Vice President, Finance and Administration
- Chief Advancement Officer
- Vice President, Domestic and International Affairs

For the purposes of setting employee remuneration, delegation has been given to the Charity's Managing Director, who is also the Administrative Director for this purpose. In setting the pay and benefits of the UK-contracted senior management team, the Managing Director refers to the company's pay policy, which is periodically reviewed. Salaries and benefits are benchmarked against reliable industry data. The salary scale, including the pay policy, is approved by the Managing Director and in line with the Charity's pay policy.

The remuneration of the Managing Director is set by the trustees and in line with the Charity's pay policy and scale.

TRUSTEES' RESPONSIBILITIES

The Trustees, who are also Directors of International Medical Corps (UK) for the purposes of company law, are responsible for preparing the Trustees' Report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practices, or GAAP).

Company law requires the trustees to prepare financial statements for each financial year that give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of such resources, including the income and expenditure of the charitable company for that period. Under company law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure of the charitable company for that period.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice Accounting and Reporting by Charities;
- make judgements and estimates that are reasonable and prudent; state whether applicable United Kingdom Accounting Standards have been followed,

subject to any material departures disclosed and explained in the financial statements; and

- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Each trustee confirms that:

- so far as the trustee is aware, there is no relevant audit information of which the charitable company's auditor is unaware; and,
- the trustee has taken all the steps that they ought to have taken as a trustee to make themselves aware of any relevant audit information, and to establish that the charitable company's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of S418 of the Companies Act 2006.

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

OBJECTIVES AND ACTIVITIES

PUBLIC BENEFIT

In reviewing the Charity's aims and in planning future activities, the trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit. The trustees believe that the Charity benefits the public through the achievement of its goals and objectives by:

- providing timely and appropriate humanitarian aid to vulnerable victims of wars and disasters;
- building the capacity of local healthcare providers to improve the standards of healthcare for local communities and create more sustainable systems;
- contributing to the UK's agenda for international development and, in particular, the achievement of the Sustainable Development Goals, including the prevention of and response to violence against women and girls;
- contributing to the containment and reduction of infectious diseases globally; and
- contributing to the understanding of the impact of various health issues affecting the vulnerable, through the UK/EU media and humanitarian networks.

INTERNATIONAL MEDICAL CORPS (UK)'S GOALS

To mobilise sufficient resources to realise International Medical Corps (UK)'s charitable objectives and humanitarian mission.

As per International Medical Corps (UK)'s Memorandum of Association, the objectives of the organisation are to:

a. relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and programmes, and to promote good health and preserve lives by providing medical supplies and trained medical professionals particularly, in areas that have suffered through war and conflict; and

b. further the activities of International Medical Corps, a non-profit corporation registered in California USA, as are exclusively charitable and that may advance the objective set in to (a) above.

International Medical Corps (UK)'s mission is to provide humanitarian assistance, healthcare and training to communities affected by disasters, conflict and poverty, so they can return to self-reliance.

During the reporting period, the Charity continued to report on six main areas of work:

- Strengthening health capacity
- Emergency response and preparedness
- Mental health and psychosocial support
- Woman and children's health
- Clean water, sanitation and hygiene
- Nutrition and food security

MONITORING OF ACTIVITIES

Monitoring of project activities at International Medical Corps aims to achieve three objectives: 1) assess progress of project activities/outputs; 2) identify deviations and gaps/ weaknesses during project implementation and any problems or obstacles encountered; and 3) provide targeted and relevant monitoring data that allows International Medical Corps to develop an action plan to overcome gaps and weaknesses throughout the life of the project.

International Medical Corps (UK) continuously monitors programme activities through effective internal monitoring, supervision and reporting mechanisms. It provides regular programmatic and financial reports on project activities and progress as required by all its institutional donors and other stakeholders. Additional internal programme reports

and departmental updates supplement this information for day-to-day management. The Charity also maintains automated recruitment, financial and programme records to track performance and grant compliance.

Routine project monitoring is conducted at the field levels by the project technical and Monitoring & Evaluation (M&E) teams through standard monitoring and reporting procedures and forms to monitor services and goods provided by International Medical Corps. Monitoring activities include monitoring the quantity and quality of services and goods provided, either through supportive supervision, observation, record review, alternative methods, and teams use standardised checklists and tools that are appropriate for the context. Some activities that are particularly sensitive may be monitored indirectly, such as through client satisfaction surveys or review of anonymised case management files by the appropriate and authorised personnel. The project team focuses more on the technical aspects of services provision to ensure quality and compliance with minimum international standards. However, the M&E team conducts independent monitoring of services International Medical Corps provides at various facilities, including health facilities, child friendly spaces, and women and girls spaces. The findings from monitoring are regularly shared with the project team for their follow-up and corrective measures.

The International Programmes team through the technical teams reinforces supportive supervision and monitoring and communications systems and procedures to track results. International Programmes collaborates with the Global Monitoring, Evaluation and Learning (MEAL) unit in the collection and analysis of programme achievements and addresses constraints to progress in real time through visits, calls and written communications. Monthly calls with country teams also review the achievement of project targets and progress, spending and procurement, as presented by project managers and their technical, financial and logistics colleagues. In addition, International Programme Senior Directors, Directors, Programme Managers and Programme Officers maintain regular communications with country teams to identify and address risks and provide support, working with regional platform department focal points.

Staff, in various capacities, visited country programmes during the year to provide relevant technical support. During the reported period, countries visited included Afghanistan, Ethiopia, Egypt, Gaza, Jordan, Libya, Kenya, Morrocco, Pakistan, Somalia, South Sudan, Tunisia, Poland, Ukraine, and Zimbabwe where we provided field teams with programmatic and technical support.

The Charity's affiliate delivers programmes through four geographical, cross-functional platforms (Middle East and Europe, Central & Southern Africa, North & East Africa and Asia, and Global), which include dedicated interdisciplinary teams of specialists in programmes, technical, finance, resource development, communications, logistics and supply chains, human resources and security. Functional specialists provide effective and efficient business support to field programmes and facilitate speedy and effective responses to disasters in the respective regions.

International Medical Corps (UK)'s Managing Director is a member of the global executive leadership team, and advises and helps evaluate opportunities, challenges and risks associated with implementation of programmes undertaken by the Charity's US affiliate. In addition, International Medical Corps (UK) relies on its US affiliate's Internal Audit, Compliance and Safeguarding Task Force's independent field reviews, evaluations and reports. Risk assessment and compliance issues are flagged in various functional units' regular reviews, and critical issues are reported back to the senior leadership team. Senior International Medical Corps' staff brief the trustees during board meetings on key developments and on risk mitigation measures that have been put in place.

STATEMENT ON CONTRIBUTIONS BY VOLUNTEERS

International Medical Corps (UK) continues to actively encourage members of the public to become involved in its work, both in the UK, to raise awareness of international development issues, and overseas, to support its operations.

STRATEGIC REPORT

ACHIEVEMENTS AND PERFORMANCE

Organisational Performance

Over the course of the financial year to June 2024, International Medical Corps (UK) provided assistance valued at $135,518,451 (2023: $121,596,255) to vulnerable populations in 23 countries (2023: 23). This included the donated medical and other supplies received for distribution.

International Medical Corps (UK) supported, through its US affiliate, 2,538 staff positions in 23 countries (2023: 2,760 staff positions in 23 countries), providing essential services to beneficiaries. Globally, International Medical Corps' activities served 16,417,440 unique beneficiaries in 2023. Globally, International Medical Corps' activities served 8.5 million direct beneficiaries between 1 July 2023 and 31 December 2023 and 8.7 million direct beneficiaries between 1 January 2024 and 30 June 2024.*

International Medical Corps (UK) contributed 32% of global funding to this mutual achievement.

*Please note that beneficiary totals may overlap across calendar years

SUMMARY OF MEASURES USED TO ASSESS INTERNATIONAL MEDICAL CORPS (UK)'S PERFORMANCE

International Medical Corps (UK) continues to use a Balanced Business Scorecard specifying the following main objectives.

GOAL	COMMENT
Timely and efficient delivery of programme activities	The Charity successfully delivered activities of the value of $135M (2023: $121M).
Control over corporate costs	The Charity has managed corporate expenditure within the provisions of its annual budget and according to the terms specified by its donors.
Diversification of income	The Charity continued to be funded by a wide range of government and UN agencies, as well as private sector donors.

PEOPLE: 'Always supporting its people to develop professionally while delivering the Charity's mission.'

GOAL	COMMENT
Staff are motivated to achieve and exceed performance expectations	Charity continues to use performance management and development system which provides platform for managers and their employees to engage in goal setting, performance discussions and provide feedback. The Charity believes that managing employee performance effectively is fundamental to staff motivation, engagement and helping them realise their full potential. Staff continue to receive in-house and external trainings on donor regulations and industry best practices to ensure appropriate oversight. Wellbeing and engagement initiatives including flexible working and specifically remote working arrangements are in place to ensure staff safety and wellbeing.
Improve on the creation of opportunities for effective intercompany collaboration and improved quality of programmes	Intercompany, interdepartmental, HQ and field collaborations were enhanced to consider opportunities and challenges in wider contexts. Each International Medical Corps (UK) team worked closely with its peers in the US to ensure alignment where appropriate.

RISK: 'Minimise risk whilst anticipating threats'

GOAL	COMMENT
Strengthened systems for identifying and raising areas of concern in a timely manner to the senior management team	The Charity continued to maintain its risk register and controlled the field operations through regular reviews, cross-team participation and reference to the Charity's scorecard mechanism. The Charity's US affiliate continues to implement, at field and HQ levels, Logistics Management Software to strengthen assets, procurement and inventory management and controls. Systems enable the creation of exception reports highlighting any potential gaps or risks to be addressed. In addition, HQ Logistics & Supply Chain team is maintaining, in collaboration with the field teams, a register to anticipate, map potential risks and determine / implement mitigation measures. Risks identified as major are elevated to the appropriate management group. Procurement above set thresholds are reviewed through a system called PRAMS (Procurement Review & Approval Management System) at the field and HQ levels. The system enables teams to identify procurements requiring corrections or improvements prior to signing contracts with vendors, and support the analysis of potential capacity building requirements, or business clarifications. In addition, the Charity has worked with its US affiliate to administer and reinforce its safeguarding mechanisms. The Charity's implementing affiliate also implemented a Human Resources Information System (HRIS) for talent acquisition, staff performance management and training. The HRIS is a global integrated platform used to streamline recruitment, learning, performance management and compensation process and management.
Cyber risk is a concern as it involves the potential for data breaches, unauthorized access, and other cyber threats that can compromise systems and confidential data	To mitigate against these risks and limit exposure, the organisation has implemented robust security measures such as encryption, multi-factor authentication, and vulnerability scanning to safeguard and protect its cloud infrastructure. International Medical Corps UK has modernised its infrastructure by migrating to the cloud its applications and data.
Mitigate financial loss through strict controls Strict controls were maintained and updated as necessary to ensure adherence to internal procedures, requirements of donors and the requirements of the Charity Commission	Automation and strict control over the treasury platform have ensured minimisation of foreign exchange and currency exposure risks during turbulent global economic environment.

OPERATIONS: 'Delivering the mission efficiently, through discipline and thoroughness.'

GOAL	COMMENT
Regular review of programme performance	Programme, MEAL and Technical Unit staff at all levels monitor risks to implementation on an ongoing basis through organisational systems and direct field visits with local stakeholders to ensure effective programme delivery. The Charity's affiliate's cross-functional platforms continue to improve the effectiveness and efficiency of operational support to field programmes, as well as facilitate speedy and effective responses to disasters in the respective regions.
Increased monitoring and evaluation activities, training and programme development	Programme staff collaborate with other departments within the cross-functional platforms in decision making related to country programme issues. During the reporting period, the Charity, in collaboration with its US affiliate, submitted 167 proposals. The Charity's US affiliate's Internal Audit conducted in-country audits in Zimbabwe, Ethiopia, Central African Republic, Yemen and Cameroon.
Secure multi-year grants from donors	Ongoing discussions were had with FCDO, Global Affairs Canada (GAC), Ministry of Foreign Affairs France and other donors on multi-year grants.

DONORS: 'Accountable to a growing group of donors'

The Global Programme Unit continued to provide due diligence on the Charity's grants and contracts to ensure compliance with the standards and regulations specified by its donors, with support from the US affiliate's Compliance team and the Internal Audit. Additionally, International Medical Corps continues to be a member of the Core Humanitarian Standard (CHS) Alliance and continues to monitor its compliance with the Humanitarian Accountability Framework.

GOAL	COMMENT
Improve high-level donor interaction	Robust interaction with International Medical Corps (UK)'s donors continued at all levels throughout the year.
To improve on effective donor intelligence	Regular communications with donor agencies were maintained, to ensure that relevant opportunities were pursued. Active participation in UK NGO forums and direct communication with FCDO were prioritised, to ensure that humanitarian relief is prioritised following the UK's exit from the European Union and other governmental efforts to shape the sector.
Compliance with reporting deadlines and improved performance on complementary information requests	The Charity remains compliant with donor reporting requirements.

INNOVATION: 'Challenging the norm to minimise inefficiency and maximise impact'

GOAL	COMMENT
Encouraging a culture of creativity and problem solving	Organisation-wide information management systems are being used to obtain real-time reports integrating key indicators across finance, programme delivery, human resources and logistics, to ensure effective implementation of programmes. A variety of projects continue, with the aim of improving the efficiency of key areas affecting delivery of programme activities. Cross-functional platforms also ensure that real-time information is available and applied in decision making and operations.

External representation and engagement

International Medical Corps (UK)'s Technical Unit members continued to represent the Charity in forums both within the UK and abroad, and make contributions to global discussions on sectoral issues.

INTERNATIONAL MEDICAL CORPS (UK)'S HUMANITARIAN ASSISTANCE FOR THE FINANCIAL YEAR 2023/2024

EMERGENCY RESPONSE AND PREPAREDNESS

In Syria, International Medical Corps' mobile medical teams responded rapidly since the devastating February 2023 earthquakes. We're continuing to provide healthcare services and tackle emerging crises—such as cholera outbreaks—and simultaneously building local capacity through training for local health workers and volunteers.

HEALTHCARE SERVICES SUPPORT

In Yemen, where around half of the country's health facilities are no longer functioning after a decade-long civil war, we're rehabilitating these essential services. We're also delivering essential medical and non-medical supplies, including specialist diagnostic equipment.

NUTRITION AND FOOD SECURITY

In Ethiopia, where malnutrition is widespread, we're treating vulnerable people, raising awareness and distributing food in schools and communities. We have screened 471,818 people for malnutrition, providing lifesaving care to 56,782 children under five and 56,213 pregnant and lactating women.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

In Afghanistan, we're providing crucial MHPSS services. This includes supporting a drug addiction treatment centre in Kabul, where we've helped 401 women and children with integrated evidence-based treatment, rehabilitation and psychosocial support.

WATER, SANITATION AND HYGIENE (WASH)

In Ukraine, where the conflict has damaged infrastructure, we're rehabilitating water systems. This includes protecting access to safe water for 86,500 people in Sumy and 69,000 in Kharkiv and Mykolaiv by installing new water supply and sewerage pumps.

FAMILY AND COMMUNITY HEALTH

In Jordan's Azraq and Zaatari refugee camps, we're providing comprehensive health and nutrition services for women and children. In the first half of 2024, we provided 14,716 paediatric consultations, gave inpatient care for 720 children, and counselled 482 mothers in infant and young-child feeding practices.

WOMEN'S AND CHILDREN'S HEALTH AND PROTECTION

In South Sudan, where conflict and displacement have led to widespread violence against women and girls, our GBV prevention and response work and livelihoods assistance programmes are empowering communities. Over the past eight years, we've also distributed 79,451 dignity kits.

INSTITUTIONAL DONOR SUPPORT FOR INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

To fulfil its mission and to undertake the abovementioned activities, International Medical Corps (UK) received grants from the following private and international donor agencies during the year. The Charity gratefully acknowledges their support.

ACF Canada	Action Against Hunger, Canada
ACF US	Action Against Hunger, US
DAHW	Deutsche Lepra- und Tuberkulosehilfe e.V.
DRC	Danish Refugee Council
FCDO	Foreign, Commonwealth & Development Office
EC	European Commission
France MOFA	France Ministry of Europe and Foreign Affairs
GAC	Global Affairs Canada
GIZ	The Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
IOM	International Organization for Migration
IRC	The International Rescue Committee
Islamic Development Bank	Islamic Development Bank
King Salman Humanit. Aid	King Salman Humanitarian Aid and Relief Center
Ministry of Health CAR	Ministry of Health CAR
UAE MoFA	Ministry of Foreign Affairs and International Cooperation, UAE
Plan Int. Australia	Plan International Australia
Plan Int. Netherlands	Plan International Netherlands
Save the Children	Save the Children
The Power of Nutrition	The Power of Nutrition
The Start Fund	The Start Fund
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WFP	World Food Programme
WHO	World Health Organisation
WV	World Vision
ZOA Netherlands	Stichting ZOA

PRIVATE DONOR SUPPORT OF INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES	
Andor Charitable Trust	AstraZeneca UK Limited
Church of Jesus Christ Latter Day Saints (LDS)	GM Morrison Charitable Trust
Pocklington School	Thea Pharmaceuticals Ltd
Alwaleed Philanthropies	Vitol Foundation
GDS Services International Limited (GDSSIL)	

FUNDRAISING, COMMUNICATIONS AND MARKETING ACTIVITIES

During the year, International Medical Corps (UK) has received donations from institutional donors, corporates, trusts and foundations, as well as private individuals. International Medical Corps (UK) and its US affiliate seek to raise funds to sustain its programmes across all countries where they work, as well as funds to fill gaps, support immediate emergency responses and implement innovative programmes.

The Charity responds to requests for proposals issued by institutional donors such as FCDO, UN agencies and by private sector donors. The Charity works closely with its affiliate to raise funds from corporations and foundations for emergency response activities and ongoing programmes. International Medical Corps (UK) undertakes due diligence on both the financial and reputational dealings of potential partners before accepting donations.

International Medical Corps (UK) also utilises multiple fundraising channels, with the goal of raising funds from as diversified a base of supporters as possible. These channels include annual giving programmes and online appeals, in addition to outreach through social media, the website and other reputable online platforms that display clear terms and conditions, including General Data Privacy Regulations (GDPR) compliance.

International Medical Corps (UK) and its affiliate did not employ any commercial fundraising firm to solicit individuals via telephone or door to door during the reported period. Protecting vulnerable people and other members of the public is a key consideration in cultivating a supporter base for the Charity's work. The Charity and its US affiliate actively monitor all efforts to raise funds from the public, in particular vulnerable people. International Medical Corps (UK) did not receive any complaints about its fundraising activities during the reported period.

Although International Medical Corps (UK) is not registered with the UK Fundraising Regulator, the Charity has regard for and adheres to the principles and practices set out in the Code of Fundraising Practices. International Medical Corps (UK) and its affiliate are in compliance with GDPR and protect individuals' personal information. The communications team of International Medical Corps (UK) monitors and moderates our email and social media accounts, and any complaints or concerns regarding fundraising activities are reviewed and responded to by senior management. Fundraising activities also are monitored by the senior leadership of International Medical Corps (UK), which shares regular reporting with the trustees.

INVESTMENT POLICY

Due to the nature of the Charity's programmes and funding cycles of its major donors, the Charity keeps its financial assets liquid.

RISK MANAGEMENT

A culture of risk management and mitigation is embedded in the organisation. A risk register is used by management and the trustees to examine and monitor risks to the organisation.

The register identifies and prioritises risk in relation to the likelihood and the level of impact it would have on the organisation and outlines measures in place to safeguard the company's assets against such risk. The risk categories are defined below:

- Organisational risk;
- Strategic and management risk;
- Operational risk;
- People;
- Financial risk.

The board of trustees seeks to ensure that systems are in place to monitor, manage and mitigate International Medical Corps (UK)'s exposure to major risks which are reviewed periodically. It is also recognised that the nature of the Charity's work requires active acceptance and management of risks when undertaking activities in order to achieve the objectives of the Charity.

The key business risks to the Charity continue to include the unexpected loss of funding from key donor organisations and major disruptions to programmes in countries resulting from factors either within or beyond the organisation's control. The Board of Trustees for International Medical Corps (UK) continues to implement measures to mitigate these risks, including review of the reserves policy, the introduction of new technology to ensure that assets are safeguarded to the extent possible, the continued reference to a balanced business scorecard and reviews into the Charity's funding base. These are further summarised in the table below:

KEY RISKS	TRUSTEES' PLANS TO MITIGATE THE RISK
Insufficient unrestricted reserves	The Charity continues to make sustained efforts to expand its supporter base. The Charity intends to continue to work with its institutional donors to continue delivering activities in the most hard-to-reach areas, thereby receiving contributions towards its corporate costs, and work with its US affiliate to keep effective control of its cost structure.
Adverse payment terms offered by donors affecting the liquidity of the Charity	The Charity's liquidity position is closely monitored, and close collaborations are maintained with donor stakeholders to ensure life-saving activities are not impacted by liquidity issues.
Future funding opportunities affected by Brexit and developments in the UK's Foreign and Development policies	International Medical Corps (UK) continues to pursue European Union funding streams where eligible. At the same time the Charity continues to engage with FCDO & other institutional donors on existing and potential portfolios.
Inadequate assessment, resulting in poor programming decisions and implementations	International Medical Corps continues to invest in country-specific assessments, to ensure a relevant and quality orientated programme design.
Exposure to movement in foreign currency rates, affecting international operations	The Charity's principal currency exposures arise from translations of European and other donor monies received into US dollars, the main operational currency advanced to its field missions overseas. The continued fluctuations of currencies against USD can adversely affect International Medical Corps (UK)'s ability to deliver programmes sustainably. Within this context, global treasury management, consisting of International Medical Corps' and International Medical Corps (UK)'s senior staff, created in July 2018, continues to ensure effective use of donor funds.
Operations in sanctioned countries through the Charity's US affiliate	Donors and stakeholders are kept up to date with developments and emerging risks affecting programme implementation in sanctioned countries.

FINANCIAL REVIEW

Statement of Principal Financial Management Policies Adopted in the Year

It is the policy of International Medical Corps (UK) to maintain effective financial and other programmatic management systems with its US affiliate. Efficient controls, budgeting, accounting, financial reporting and auditing systems are employed throughout the organisation, to meet the management and programmatic objectives at various levels, and to be accountable to its donors and supporters.

This year, International Medical Corps (UK)'s total income was $123,269,954 (2023: $125,352,674). Of this, the total cash income received from institutional donors and supporter base was $100,502,430 (2023: $112,677,278). International Medical Corps (UK) was able to secure $19,490,270 (2023: $12,315,666) of gifts-in-kind, comprising food, medicines and supplies.

During the reporting period, International Medical Corps (UK) supported training and assistance programmes in 23 (2023: 23) countries through its US affiliate. The Charity's programme expenditures can be disaggregated into the following humanitarian contexts.

	FY 2024	FY 2023
Strengthening health capacity	28%	30%
Emergency response and preparedness	34%	34%
Mental health and psychosocial support	4%	3%
Women & children's health	9%	12%
Water, sanitation and hygiene	5%	8%
Nutrition & food security	20%	13%

Financial Position

The Charity had restricted funds of $16,909,499 as of 30 June 2024 (2023: $29,447,322) and unrestricted funds of $1,166,039 as of the same date (2023: $885,850). International Medical Corps (UK) receives relevant institutional funding in meeting its restricted charitable expenditure. The balance of free reserves as of 30 June 2024 is $1,115,947 (2023: $815,000). Free reserves are unrestricted funds less the net book value of the fixed assets.

International Medical Corps (UK) committed resources from unrestricted reserves to provide adequate support for growth in charitable activities and to ensure compliance with growing donor regulations. International Medical Corps (UK) continues to rely on its US affiliate's commitment to meet shortfalls in programmes that do not provide full overhead cost recovery.

Reserves Policy

International Medical Corps (UK) requires reserves to:

- fund working capital requirements in the event of unexpected delays in receiving donor funds, to ensure continuity in implementation in the field;
- fund unplanned expenditures arising from programme-related contingencies, such as unforeseen events delaying implementation and leading to no–cost-extensions, and to manage exposure to exchange rate fluctuations;
- finance any gap in funding for projects of strategic importance to the Charity and its US affiliate; and
- fund requirements for additional corporate costs to maintain high-quality assurance over the organisation's programmes.

The Charity aims to maintain a level of unrestricted reserves equivalent to six month's operating expenditure of the Charity's HQ offices, which is $1,115,900 for FY 2023–24 and this is currently being achieved. Available unrestricted-fund balances in excess of the operational reserves' requirements are utilised to meet the other purposes as outlined above. Operating expenditure considered for reserves excludes transfers made for overseas programmes.

International Medical Corps (UK) continues to apply assessment of new opportunities and accepts projects that support its overhead costs required to maintain acceptable oversight of programme implementation, therefore mitigating the risk of insufficiently resourced projects. International Medical Corps (UK) considers accepting projects that do not fully cover its costs with its US affiliate to ensure sustainability of coverage of any gap in funding. As of 30 June 2024, the Charity held restricted reserves of $16,909,499 (2023: $29,447,322). This represents the total funds received for specific projects that are yet to be spent at 30 June 2024, including projects responding to Syria and various other crises. The decrease in restricted funds in the reported period is due to timing difference of receiving donor funds with a number of projects starting in the last months of the previous reported period and continued in the current reporting period. These funds have been excluded from specific reserves policy, as they are not for the purposes of general working capital.

As of 30 June 2024, the balance of free reserves was $1,115,947 (2023: 815,000). The Charity is resolved to maintain an adequate level of reserves and is working with its affiliate to implement a feasible strategy for marketing and public awareness of its work, to cultivate support, but accepts that in the current economic climate this may be difficult. The Charity will respond to the risks identified above as follows.

- In collaboration with its affiliate, the Charity profiles income streams and undertakes projects with acceptable terms. Also, it looks to its affiliate to cover programme funding gaps that the affiliate has reviewed and considered as acceptable.
- The Charity and its affiliate continue to closely monitor the implementation context of quality programmes around the world and resolve operational challenges with its supporters and partners.
- The Charity is part of global treasury platform.
- The Charity's operational flexibility has enabled it to address risks caused by political changes, including Brexit and the effects of the pandemic.

Section 172 Statement

International Medical Corps (UK) complies with section 172 under the Companies Act 2006. It requires our Board of Trustees act in the way that they consider, in good faith, what would be most likely to promote International Medical Corps (UK)'s impact for our beneficiaries, while considering the long-term effect of decisions on International Medical Corps (UK)'s stakeholders, including its beneficiaries, employees, suppliers, partners, the communities with which it works and their environment.

Engagement with employees.

International Medical Corps (UK)'s internal stakeholders are its employees. Enhancing employee engagement is an integral part of the culture of the Charity and its

implementing affiliates. Senior management are actively involved in the engagement of colleagues through regular electronic communications, staff meetings and periodic Town Hall meetings that include employees working across the world. The trustees receive updates on employee matters from the Managing Director during board meetings. International Medical Cops (UK) undertakes regular salary reviews to ensure that salaries for the UK contracted staff are competitive within the sector in the UK.

Engagement with Other Stakeholders

- Our beneficiaries. As a recognised first responder, we provide emergency relief, often within hours, to those hit by disaster, disease and conflict, no matter where they are, no matter what the conditions. International Medical Corps (UK) continuously monitors programme activities through effective internal reporting. We have a strict Code of Conduct and safeguarding processes in place to ensure the security and safety of our beneficiaries.
- Our partners in project delivery. Our partnerships are critical to ensuring that we deliver programmes in the most hard-to-reach locations. We collaborate with other international and local NGOs when these partnerships bring greater benefits to the people we serve.
- Our supporters and donors. Our donors are primarily institutional, including the UK Foreign, Commonwealth and Development Office (FCDO), UN agencies, Global Affairs Canada and many others. We are committed to delivering timely, high-quality, lifesaving humanitarian assistance, and to reporting on the impact of our work. We report to our donors, and publicise our work on our website, social media and other platforms.
- Our suppliers. We are committed to eradicating modern slavery and trafficking in persons and engage with our suppliers to promote the highest standards.
- Our wider communities and the environment. Our policies and procedures include safe environmental protection in the different countries where we work. Our programmes aim to reduce excess morbidity and mortality associated with potential exposure to environmental factors. For example, on a project-by-project basis, our teams assess the risks associated with healthcare waste and with the disposal of expired medicines.

INTERNATIONAL MEDICAL CORPS (UK) PLANS FOR 2024/2025

International Medical Corps (UK) plans are to:

1. expand opportunities for applied research to improve the impact of providing healthcare for vulnerable communities, in line with its mission;
2. achieve institutional income of $128 million during the 12-month period to 30 June 2025;
3. continue to expand the organisation's number of partnerships and non-traditional donors;
4. expand the organisation's global profile through increased awareness of its activities;
5. review and strengthen current internal processes employed by its US affiliate, with a view to increasing organisational efficiency; and
6. continue to work with its US affiliate to apply new technology and systems that mitigate risks specific to the sector in general.

The Trustees' Report incorporating the strategic report is approved by the trustees and signed on their behalf by:



Approved by the board of trustees on:

13 December 2024

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF INTERNATIONAL MEDICAL CORPS (UK)

OPINION

We have audited the financial statements of International Medical Corps (UK) (the 'charitable company') for the year ended 30 June 2024 which comprise the statement of financial activities, the balance sheet, and statement of cash flows, the principal accounting policies and the notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 30 June 2024 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

CONCLUSIONS RELATING TO GOING CONCERN

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

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

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

OTHER INFORMATION

The trustees are responsible for the other information. The other information comprises the impact report for International Medical Corps and its affiliates worldwide included in pages 8 to 37, together with information included in the trustees' report, including the strategic report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

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

We have nothing to report in this regard.

OPINIONS ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006

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

- the information given in the trustees' report, which is also the directors' report for the purposes of company law and includes the strategic report, for the financial year for which the financial statements are prepared is consistent with the financial statements; and

- the trustees' report, which is also the directors' report for the purposes of company law and includes the strategic report, has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report including the strategic report. We have nothing to report in respect of the following matters in relation to which the 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.

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the trustees' responsibilities statement, the trustees (who are also the directors of the charitable company 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, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- The engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities, and skills to identify or recognise non-compliance with applicable laws and regulations;
- We identified the laws and regulations applicable to the charitable company through discussions with management and from our knowledge and experience of the charity sector;
- We focused on specific laws and regulations in both the UK and overseas, which we considered may have a direct material effect on the financial statements or the activities of the charitable company. These included but were not limited to the Charities Act 2011, the Companies Act 2006, Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable to the United Kingdom and Republic of Ireland (FRS 102) (effective 1 January 2019);
- We have assessed the processes in place to ensure that the implementors of programmes are aware of and comply with UK laws and regulations;
- We have assessed the processes in place to ensure that in country laws and regulations are followed; and
- We assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and review of minutes of trustees' meetings.

We assessed the susceptibility of the charitable company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- Making enquiries of management as to where they considered there was susceptibility to fraud,

- their knowledge of actual, suspected, and alleged fraud; and
- Considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.
- To address the risk of fraud through management bias and override of controls, we:
- Performed analytical procedures to identify any unusual or unexpected relationships;
- Tested and reviewed journal entries to identify unusual transactions;
- Tested the authorisation of expenditure;
- Assessed whether judgements and assumptions made in determining the accounting estimates were indicative of potential bias; and
- Investigated the rationale behind significant or unusual transactions.
- In response to the risk of irregularities and noncompliance with laws and regulations, we designed procedures which included, but were not limited to:
- Agreeing financial statements disclosures to underlying supporting documentation;
- Reading the minutes of meetings of trustees; and
- Enquiring of management as to actual and potential litigation and claims.

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance. Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities is available on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

USE OF OUR REPORT

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 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 auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Edward Finch (Senior Statutory Auditor)



17 December 2024

For and on behalf of Buzzacott LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL

STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 30 JUNE 2024

	Notes	**Unrestricted funds $**	**Restricted funds $**	**2024 Total funds $**	Unrestricted funds $	Restricted funds $	2023 Total funds $
Income and expenditure							
Income from:							
Donations and legacies	1	1,741,342	21,026,182	**22,767,524**	811,526	13,033,107	13,844,633
Charitable activities	2	–	100,502,430	**100,502,430**	–	111,508,041	111,508,041
Total income		**1,741,342**	**121,528,612**	**123,269,954**	811,526	124,541,148	125,352,674
Expenditure on:							
Raising funds	3	8,465	672	**9,137**	13,598	1,381	14,979
Charitable activities	4	1,452,688	134,065,763	**135,518,451**	662,059	120,934,196	121,596,255
Total expenditure		**1,461,153**	**134,066,435**	**135,527,588**	675,657	120,935,577	121,611,234
Net income/(expenditure)		280,189	(12,537,823)	(12,257,634)	135,869	3,605,571	3,741,440
Net movement in funds		280,189	(12,537,823)	**(12,257,634)**	135,869	3,605,571	3,741,440
Fund balances brought forward at 1 July 2024		885,850	29,447,322	**30,333,172**	749,981	25,841,751	26,591,732
Fund balances carried forward at 30 June 2024		1,166,039	16,909,499	**18,075,538**	885,850	29,447,322	30,333,172

All of the Charity's activities derived from continuing operations during the above two financial periods.

The Charity has no recognised gains and losses other than those shown above.

BALANCE SHEET
AS AT 30 JUNE 2024

	Notes	2024 $	2024 $	2023 $	2023 $
Fixed Assets					
Tangible assets	8		50,092		70,850
Current assets					
Stock	9	1,325,503		2,025,295	
Debtors	10	8,140,497		10,446,496	
Cash at bank and in hand		8,818,268		18,055,618	
		18,284,268		30,527,409	
Creditors: amounts falling due within one year	11	(258,822)		(265,087)	
Net current assets			18,025,446		30,262,322
Total net assets			18,075,538		30,333,172
The funds of the charity					
Restricted funds	12		16,909,499		29,447,322
Unrestricted funds			1,166,039		885,850
			18,075,538		30,333,172

Approved by the trustees and signed on their behalf by:

Andrew Géczy, Chair



Approved on: 13 December 2024

International Medical Corps (UK): A company limited by guarantee, Company Registration No. 04474904 (England and Wales)

STATEMENT OF CASH FLOWS
YEAR TO 30 JUNE 2024

	Notes	2024 $	2023 $
Cash flows from operating activities:			
Net cash provided by operating activities	A	(9,220,066)	6,433,031
Cash flows from investing activities:			
Purchase of tangible fixed assets		(17,284)	(43,150)
Net cash used in investing activities		(17,284)	(43,150)
Change in cash and cash equivalents in the year		**(9,237,350)**	6,389,881
Cash and cash equivalents at 1 July 2023	B	**18,055,618**	11,665,737
Cash and cash equivalents at 30 June 2024	B	**8,818,268**	18,055,618

Notes to the statement of cash flows for the year to 30 June 2024

A Reconciliation of net movement in funds to net cash used in operating activities

	2024 $	2023 $
Net movement in funds (as per the statement of financial activities)	(12,257,633)	3,741,440
Adjustments for:		
Depreciation charge	38,041	33,340
(Increase)/decrease in stocks	699,792	(1,495,628)
(Increase)/decrease in debtors	2,305,999	4,135,896
Increase/(decrease) in creditors	(6,265)	17,983
Net cash provided by / (used in) operating activities	**(9,220,066)**	6,433,031

B Analysis of cash and cash equivalents

	2024 $	2023 $
Cash at bank and in hand	**8,818,268**	18,055,618
Total cash and cash equivalents	**8,818,268**	18,055,618

PRINCIPAL ACCOUNTING POLICIES 30 JUNE 2024

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are laid out below.

BASIS OF PREPARATION

These financial statements have been prepared for the year to 30 June 2024.

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to these financial statements.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (Charities SORP FRS 102) ((effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The accounts are presented in US dollars and rounded to the nearest dollar. The charity constitutes a public benefit entity as defined by FRS 102.

CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGEMENT

Preparation of the financial statements requires the trustees to make significant judgements and estimates.

The items in the financial statements where these judgements and estimates have been made include:

- The estimation of the value of donated goods distributed in the year and undistributed at the year-end.
- The estimation of the recoverability of accrued income balances.
- The estimation of unrealised foreign exchange difference.
- The treatment of intercompany balances with the charity's implementing affiliates.

ASSESSMENT OF GOING CONCERN

The trustees have assessed whether the use of the going-concern assumption is appropriate in preparing these financial statements. The trustees have made this assessment in respect of a period of one year from the date of approval of these financial statements.

The Charity has free reserves of $1,115,947 (2023: $815,000), which is as per the reserves policy. The trustees have continued to use the going-concern assumption based on the relationship with its affiliate to cover programme funding gaps and provide cash-flow bridging. The trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

INCOME

Income is recognised in the statement of financial activities when the charity is entitled to the income, the amount can be measured with accuracy and it is probable that the income will be received.

Donations and gifts in kind are included in full in the statement of financial activities when receivable.

Grants receivable are credited to the statement of financial activities in the year in which they are receivable.

DONATED GOODS AND SERVICES

Donated goods, typically comprising medical and food supplies, are recognised as income when the goods are received. Amounts are included in expenditure when the goods are distributed. The balance of goods received but not distributed are included as a stock balance at the year end.

Food and other non-pharmaceutical stocks are valued according to the value placed on the items by the donor.

Pharmaceutical goods received are accounted for at fair value to the Charity with reference to market sources.

EXPENDITURE AND THE BASIS OF APPORTIONING COSTS

Expenditure is included in the statement of financial activities when incurred and includes attributable VAT, which cannot be recovered.

Expenditure comprises the following:

a) Costs of raising funds include the salaries, direct costs and overheads with generating donated income.

b) Costs of charitable activities comprise expenditure on the charity's primary charitable purposes as described in the trustees' report. Such costs include:

   i. Technical advisory services

   ii. Programme management services

   iii. Gifts in kind of donated goods and services

   The majority of costs are directly attributable to specific activities. Certain shared costs are apportioned to activities in furtherance of the objects of the charity. These costs are allocated in the same proportion as directly attributable expenditure.

c) Support costs comprise the costs incurred by finance, human resources, communications and IT departments, and the trustee costs, which are directly attributable to the management of the Charity's assets, organisational procedures and the necessary legal procedures for compliance with statutory requirements.

TANGIBLE FIXED ASSETS

Items of equipment are capitalised when the purchase price exceeds $500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets capitalised are reviewed for impairment if circumstances indicate that their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life:

- Computers – three years
- Furniture, fixtures and fittings – five years
- Servers – five years

Vehicles and equipment for use in overseas operational programmes are not capitalised but charged in full to expenditure when purchased. This is because the expected useful life is significantly reduced in such programmes and is generally less than one year for the majority of these assets.

FUND ACCOUNTING

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund together with a fair allocation of management and support costs.

Unrestricted funds are donations and other income raised for the objects of the charity.

OTHER OPERATIONAL CURRENCIES

Transactions in US dollars are recorded at transaction value, with no exchange-rate gain or loss. Transactions in other operational currencies are recorded at the calculated monthly average rate. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. Differences arising on retranslation are charged to the statement of financial activities.

LEASED ASSETS

Rentals payable under operating leases, where substantially all the risks and reward of ownership remain with the lessor, are charged to the statement of financial activities over the period of the lease term.

PENSION COSTS

International Medical Corps (UK) sponsors a group personal pension plan. All eligible employees can participate in the scheme and contributions are based on a percentage of annual gross salary.

International Medical Corps (UK) contributes between 3% to 7% of eligible employees' gross earnings. Employees are immediately fully vested in contributions made on their behalf. The Charity is fully staged in its auto-enrolment obligations. Employees make additional contributions to meet legal requirements and should they wish to do so. Pension costs represent the employer's contributions payable during the year.

DEBTORS

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. They have been discounted to the present value of the future cash receipt where such discounting is material.

CASH AT BANK AND IN HAND

Cash at bank and in hand represents such accounts and instruments that are available on demand or have

a maturity of less than three months from the date of acquisition. Deposits for more than three months but less than one year have been disclosed as short-term deposits. Cash placed on deposit for more than one year is disclosed as a fixed asset investment.

CREDITORS AND PROVISIONS

Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

FINANCIAL INSTRUMENTS

The Charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the Charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

BASIC FINANCIAL ASSETS

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price, including transaction costs, and are subsequently carried at amortised cost using the effective interest method, unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts, discounted at a market rate of interest, if material. Financial assets classified as receivable within one year are not amortised.

BASIC FINANCIAL LIABILITIES

Basic financial liabilities, including creditors, bank loans, loans from fellow group companies. Financial liabilities classified as payable within one year are not amortised.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

1 Donations and legacies

	Unrestricted funds $	Restricted funds $	**2024 Total $**
Donation from International Medical Corps	1,539,048	380,520	1,919,568
Restricted Donations	–	1,155,392	1,155,392
Other Unrestricted Donations	62,581	–	62,581
Donated supplies	–	19,490,270	19,490,270
Donated services	111,481	–	111,481
Interest Income	28,232	–	28,232
2024 Total funds	**1,741,342**	**21,026,182**	**22,767,524**

	Unrestricted funds $	*Restricted funds $*	*2023 Total $*
Donation from International Medical Corps	*87,217*	*237,632*	*324,849*
Restricted Donations	*–*	*473,861*	*473,861*
Other Unrestricted Donations	*695,376*	*–*	*695,376*
Donated supplies	*–*	*12,315,666*	*12,315,666*
Donated services	*–*	*5,948*	*5,948*
Interest Income	*28,933*	*–*	*28,933*
2023 Total funds	*811,526*	*13,033,107*	*13,844,633*

2 Income from charitable activities

	Unrestricted funds $	Restricted funds $	**2024 Total $**
Strengthening health capacity	–	35,087,033	**35,087,033**
Emergency response and preparedness	–	36,180,602	**36,180,602**
Mental health and psychosocial support	–	2,810,283	**2,810,283**
Women & children's health	–	10,059,754	**10,059,754**
Water, sanitation and hygiene	–	6,364,109	**6,364,109**
Nutrition and food security	–	10,000,649	**10,000,649**
2024 Total funds	–	100,502,430	**100,502,430**

	Unrestricted funds $	*Restricted funds $*	*2023 Total $*
Strengthening health capacity	–	*35,661,830*	*35,661,830*
Emergency response and preparedness	–	*39,141,374*	*39,141,374*
Mental health and psychosocial support	–	*5,497,404*	*5,497,404*
Women & children's health	–	*15,024,516*	*15,024,516*
Water, sanitation and hygiene	–	*9,074,931*	*9,074,931*
Nutrition and food security	–	*7,107,986*	*7,107,986*
2023 Total funds	–	*111,508,041*	*111,508,041*

3 Expenditure on raising funds

	Unrestricted funds $	Restricted funds $	**2024 Total $**
Fundraising staff costs	–	–	–
Other fundraising costs	8,465	672	**9,137**
2024 Total funds	8,465	672	**9,137**

	Unrestricted funds $	*Restricted funds $*	*2023 Total $*
Fundraising staff costs	–	–	–
Other fundraising costs	*13,598*	*1,381*	*14,979*
2023 Total funds	*13,598*	*1,381*	*14,979*

4 Expenditure on charitable activities

	Unrestricted funds $	Restricted funds $	**2024 Total $**
Strengthening health capacity	411,412	37,968,389	**38,379,801**
Emergency response and preparedness	497,704	45,932,166	**46,429,870**
Mental health and psychosocial support	54,375	5,018,179	**5,072,554**
Women & children's health	129,295	11,932,380	**12,061,675**
Water, sanitation and hygiene	69,530	6,416,795	**6,486,325**
Nutrition and food security	290,372	26,797,854	**27,088,226**
2024 Total funds	1,452,688	134,065,763	**135,518,451**

	Unrestricted funds $	*Restricted funds $*	*2023 Total $*
Strengthening health capacity	*200,041*	*36,540,274*	*36,740,315*
Emergency response and preparedness	*221,965*	*40,545,013*	*40,766,978*
Mental health and psychosocial support	*19,403*	*3,544,304*	*3,563,707*
Women & children's health	*82,197*	*15,014,291*	*15,096,488*
Water, sanitation and hygiene	*54,757*	*10,002,082*	*10,056,839*
Nutrition and food security	*83,696*	*15,288,232*	*15,371,928*
2023 Total funds	*662,059*	*120,934,196*	*121,596,255*

4 Charitable activities (continued)

Support costs are allocated to projects in line with the level of direct expenditure as this best reflects the level of support required by each project.

Costs of charitable activities can be further analysed as follows:

	Activities undertaken directly $	Support costs $	**2024 Total $**
Staff costs	41,940,582	2,526,379	**44,466,961**
Donated supplies and services	20,301,543	–	**20,301,543**
Auditor's remuneration			
• Statutory audit	–	54,999	**54,999**
Other costs	64,525,231	6,169,717	**70,694,948**
2024 Total	126,767,356	8,751,095	**135,518,451**

	Activities undertaken directly $	*Support costs $*	*2023 Total $*
Staff costs	*38,375,943*	*2,077,019*	*40,452,962*
Donated supplies and services	*10,820,038*	*10,826*	*10,830,864*
Auditor's remuneration			
• *Statutory audit*	–	*53,475*	*53,475*
Other costs	*63,876,806*	*6,382,148*	*70,258,954*
2023 Total	*113,072,787*	*8,523,468*	*121,596,255*

4 Charitable activities (continued)

	Activities undertaken directly $	Support costs $	**2024 Total $**
Strengthening health capacity	35,901,428	2,478,373	**38,379,801**
Emergency response and preparedness	43,431,664	2,998,206	**46,429,870**
Mental health and psychosocial support	4,744,994	327,560	**5,072,554**
Women & children's health	11,282,793	778,882	**12,061,675**
Water, sanitation and hygiene	6,067,471	418,854	**6,486,325**
Nutrition and food security	25,339,006	1,749,220	**27,088,226**
2024 Total funds	126,767,356	8,751,095	**135,518,451**

	Activities undertaken directly $	*Support costs $*	*2023 Total $*
Strengthening health capacity	*34,164,949*	*2,575,366*	*36,740,315*
Emergency response and preparedness	*37,909,357*	*2,857,621*	*40,766,978*
Mental health and psychosocial support	*3,313,904*	*249,803*	*3,563,707*
Women & children's health	*14,038,277*	*1,058,211*	*15,096,488*
Water, sanitation and hygiene	*9,351,890*	*704,949*	*10,056,839*
Nutrition and food security	*14,294,410*	*1,077,518*	*15,371,928*
2023 Total funds	*113,072,787*	*8,523,468*	*121,596,255*

5 Employees and staff costs

Staff costs during the year were as follows:

	2024 Total $	*2023 Total $*
Wages and salaries	**2,181,058**	*1,778,658*
Social security costs	**222,363**	*207,527*
Other pension costs	**122,958**	*90,834*
Total UK staff costs	**2,526,379**	*2,077,019*
International Medical Corps Worldwide on International Medical Corps (UK) projects	**41,940,582**	*38,375,943*
Total staff costs	**44,466,961**	*40,452,962*

The average number of employees during the year, analysed by function, was as follows:

	2024 No	*2023 No*
UK Staff	**33**	*28*

5 Employees and staff costs (continued)

International Medical Corps (UK) contributes towards the salaries of a number of staff overseas and on local projects. Such staff may have only part of their salaries charged to projects; however, it is not meaningful to provide a full-time equivalent figure. The estimated number of such staff employed in the year was 2,538 (2023: 2,760).

The number of employees who earned £60,000 or more (including taxable benefits but excluding employer pension contributions) during the year was as follows:

	2024 No	2023 No
£60,000 – £70,000	–	*2*
£70,001 – £80,000	**2**	*1*
£80,001 - £90,000	**2**	*2*
£90,001 - £100,000	**2**	–
£100,001 - £110,000	**1**	*1*
£130,001 - £140,000	–	*1*
£150,001 - £160,000	**1**	–

Key management personnel comprise those set out on page 43. The total remuneration paid to key management personnel in the year was $691,617 (2023: $588,852).

	2024 $	2023 $
Wages and salaries	**569,251**	*491,512*
Social security costs	**72,107**	*63,142*
Employer pension costs	**50,259**	*34,198*
Total costs	**691,617**	*588,852*

6 Trustees' remuneration

None of the trustees received any remuneration in respect of their services during either of the years under review.

No trustee expenses were incurred during the period (2023- £nil).

7 Taxation

International Medical Corps (UK) is a registered charity and therefore is not liable to corporation tax on income or capital gains derived from its charitable activities or use of assets, as it falls within the various exemptions available to registered charities.

The Charity is not registered for VAT and, accordingly, all expenditure is recorded inclusive of any VAT incurred.

8 Tangible fixed assets

	Office equipment $
Cost	
Total cost at 1 July 2023	201,761
Additions	17,284
Disposals	–
Total cost and 30 June 2024	**219,045**
Depreciation	
Aggregate depreciation as at 1 July 2023	130,911
Charge for the year	38,042
Disposals	–
Aggregate depreciation as at 30 June 2024	**168,953**
Net book values	
As at 30 June 2024	**50,092**
As at 30 June 2023	70,850

9 Stocks

	2024 $	2023 $
Donated goods received but not distributed	**1,325,503**	2,025,295

10 Debtors

Due within one year	2024 $	2023 $
Prepayments and deposits	**91,487**	*79,973*
Accrued income	**7,618,150**	*9,901,730*
Other debtors – Accounts Receivable	**1,105**	*11,416*
Amount receivable from IMC Croatia	**25,580**	*20,651*
Amount receivable from IMC	**397,925**	*426,476*
Emergency response stock	**6,250**	*6,250*
	8,140,497	*10,446,496*

11 Creditors: amounts falling due within one year

	2024 $	2023 $
Trade creditors	**43,050**	*13,988*
Accruals	**215,772**	*251,099*
	258,822	*265,087*

12 Restricted funds

The funds of the Charity include restricted funds comprising the following unexpended balances of donations held on trusts to be applied for specific purposes:

	At 1 July 2023 $	Income $	Expenditure $	**At 30 June 2024 $**
Strengthening health capacity	9,018,429	34,482,941	37,780,797	**5,720,573**
Emergency response and preparedness	13,779,876	36,743,315	45,705,226	**4,817,965**
Mental health & psychosocial support	2,221,783	3,201,968	4,993,385	**430,366**
Women & children's health	1,370,250	10,954,521	11,873,425	**451,346**
Water, sanitation and hygiene	1,026,291	6,867,167	6,385,091	**1,508,367**
Nutrition and food security	360,002	27,742,788	26,665,453	**1,437,337**
Restricted by country	1,670,691	1,535,912	663,058	**2,543,545**
	29,447,322	121,528,612	134,066,435	**16,909,499**

Restricted funds are analysed by the type of activity to which the funds relate. All restricted funds are held to carry out activities under these headings.

Transfers between funds relate to surplus funds on contracts which have been used for general purposes in line with donor requirements.

13 Analysis of net assets between funds

	Unrestricted funds $	Restricted funds $	**Total 2024 $**
Fund balances at 30 June 2024 are represented by:			
Fixed assets	50,092	–	50,092
Current assets	1,115,947	17,168,321	18,284,268
Creditors: amounts falling due within one year	–	(258,822)	(258,822)
2024 Total net assets	**1,166,039**	**16,909,499**	**18,075,538**

	Unrestricted funds $	*Restricted funds $*	*Total 2023 $*
Fund balances at 30 June 2023 are represented by:			
Fixed assets	*70,850*	–	*70,850*
Current assets	*815,000*	*29,712,409*	*30,527,409*
Creditors: amounts falling due within one year	–	*(265,087)*	*(265,087)*
2023 Total net assets	*885,850*	*29,447,322*	*30,333,172*

14 International Medical Corps (UK) flagship areas

International Medical Corps (UK) continued to operate during the financial year to 30 June 2024 under the main flagship areas of strengthening health capacity, emergency response and preparedness, mental health and psychosocial support, women and children's health, water, sanitation and hygiene (WASH) and nutrition and food security.

15 Related party transactions

On 1 July 2023 International Medical Corps (UK) entered into a new Administrative Services Agreement with International Medical Corps, a US-based non-profit organisation to share certain services in connection with its operations.

On 1 July 2019 International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps Croatia, a Croatian based non-profit organisation, to share certain services in connection with its operations.

Given the close operating relationship between International Medical Corps and International Medical Corps (UK) there are two connected persons between the organisations at trustee level. These trustees include Nancy A Aossey, a founding Trustee of International Medical Corps (UK) and the President and CEO of International Medical Corps, as well as a member of its board. C. William Sundblad, a Trustee of International Medical Corps (UK) is also the Chief Knowledge Officer of International Medical Corps.

During the year ended 30 June 2024, International Medical Corps billed International Medical Corps (UK) $7,246,146 (2023: $7,148,282) in lieu of service fee as per Article 5 of the Administrative Services Agreement. During the same period, International Medical Corps (UK) has rendered services to International Medical Corps of $1,054,335 (2023: $881,109).

During the year ended 30 June 2024, International Medical Corps Croatia billed International Medical Corps (UK) $56,132 (2023: $45,050). During the same period International Medical Corps (UK) has rendered services to International Medical Corps Croatia of $256,121 (2023: $172,507).

16 Liability of members

The Charity is constituted as a company limited by guarantee. Each member has undertaken to contribute £1 to the assets of the company to meet its liabilities if called on to do so.

17 Contingent liability

Due to the nature of the Charity's agreement with donors, the Charity's expenditure is often subject to audit or other review by representatives of donors in a subsequent accounting period. There is a possibility that these audits or reviews would identify expenditures that do not fall within the terms of the grant agreements, and so the Charity would be required to repay the monies received. The trustees are not aware of any material circumstances in the year to 30 June 2024 that could give rise to such liability (2023: none).

18 Operating leases

International Medical Corps (UK) exited from its former office lease and moved to new office premises during September 2022. The total of future minimum lease payments under non-cancellable operating leases as at 30 June 2024 is as follows:

	Land and buildings $	*Equipment* $	**Total 2024 $**
Due within one year	77,611	1,576	**79,187**
Due between 2 and 5 years	16,576	788	**17,364**
	94,187	**2,364**	**96,551**

	Land and buildings $	*Equipment $*	*Total 2023 $*
Due within one year	*73,564*	*1,585*	*75,149*
Due between 2 and 5 years	*94,724*	*2,270*	*96,994*
	168,288	*3,855*	*172,143*

CHARITABLE ACTIVITIES DETAILED ANALYSIS FOR THE YEAR ENDED 30 JUNE 2024

The following pages (pages 76-83) do not form part of the statutory financial statements.

For certain projects, closeout adjustments have resulted in negative charitable Income and expenditure adjustments

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNOCHA	204365	(9,236)	(9,236)
Afghanistan	UNOCHA	204439	-	(15,159)
Afghanistan	UNOCHA	204483	235,222	354,221
Afghanistan	UNOCHA	204558	33,016	53,374
Afghanistan	UNOCHA	204772	645,647	645,647
Cameroon	WHO	204609	125,171	125,171
Central African Republic	EC	203593	-	13,463
Central African Republic	EC	204406	1,145,156	1,144,147
Central African Republic	Ministry of Health CAR	204819	247,000	27,120
Central African Republic	UNOCHA	204416	-	(56)
Central African Republic	WV	204891	27,708	27,708
Democratic Rep of Congo	LDS	204790	750,125	391,438
Democratic Rep of Congo	Save the Children	204571	1,503,146	1,503,146
Ethiopia	GAC	204636	47,304	1,709,857
Ethiopia	KSRelief	204533	147,778	147,778
Ethiopia	UNHCR	204586	630,293	630,293
Ethiopia	UNOCHA	204604	457,713	1,560,814
Ethiopia	WFP	204687	46,552	46,552
Global	UNICEF	204747	74,292	74,292
Global ERU	KSRelief	204533	(757,917)	6,212
Iraq	French MOFA	204808	6,502,200	2,962,673
Jordan	UNHCR	204563	8,038,285	8,578,802
Jordan	UNHCR	204812	7,018,029	7,018,029
Jordan	UNICEF	204811	502,167	502,167
Lebanon	GAC	204375	2,110	1,736,989
Lebanon	KSRelief	203771	(341)	(341)
Lebanon	R2HC	203824	-	(96)
Lebanon	UNOCHA	204256	(64,799)	-
Mali	ACF Spain	203973	-	(4,975)

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY (CONTD.)

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Mali	UNFPA	204664	430,599	430,599
Mali	UNFPA	204850	362,138	283,818
Mali	UNICEF	204504	(197,261)	1,073,954
Nigeria	UNICEF	204624	(4,326)	88,425
Pakistan	UNHCR	204809	494,308	380,783
Somalia	KSRelief	204533	411,675	411,675
Somalia	UNOCHA	204565	162,971	219,879
Somalia	UNOCHA	204751	400,000	400,000
Somalia	UNOCHA	204752	400,000	400,000
Somalia	WV	204423	113,995	122,275
Somalia	WV	204860	42,054	42,054
South Sudan	UNOCHA	204502	351,865	351,865
South Sudan	UNOCHA	204537	2,432	3,032
South Sudan	UNOCHA	204759	350,000	349,994
Sudan	UNHCR	204430	(14,580)	-
Sudan	UNOCHA	204494	-	236,387
Sudan	UNOCHA	204733	585,000	354,960
Sudan	UNOCHA	204873	616,551	77,061
Syria	DRC	204880	37,053	37,053
Venezuela	LDS	204854	300,000	2,037
Venezuela	UNOCHA	204302	(30,566)	(635)
Yemen	KSRelief	204533	198,464	198,464
Yemen	UAE MoFA	204319	-	994,635
Yemen	UAE MoFA	204662	2,019,552	2,003,286
Yemen	UNOCHA	204328	(23,085)	-
Zimbabwe	UNICEF	204856	127,480	105,582
Total Strengthening Health Capacity			**34,382,940**	**37,797,213**

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	LDS	204464	(7)	(7)
Afghanistan	UNOCHA	204276	(14,314)	(14,314)
Cameroon	UNHCR	204566	319,289	486,558
Central African Republic	UNOCHA	204527	70,059	73,920
Ethiopia	UNHCR	204587	1,015,619	1,560,813
Ethiopia	UNOCHA	204907	23,167	23,167
Ethiopia	WHO	204528	(9,199)	-
Ethiopia	WHO	204708	306,182	306,182
Global	French MOFA	204529	141	683,499
Global ERU	KSRelief	204296	-	164
Global ERU	KSRelief	204898	1,243,737	55
Iraq	FCDO	204380	203,138	203,138
Iraq	FCDO	204620	4,986,059	4,986,059
Iraq	French MOFA	204564	4	3,134,578
Iraq	GAC	204378	717,789	717,789
Lebanon	UNOCHA	204024	(845)	(845)
Libya	LDS	204726	521,454	435,566
Libya	ZOA Netherlands	204766	104,753	104,753
Middle East	Alwaleed Philanthropies	204689	250,000	241,609
Middle East	FCDO	204380	121,074	964,735
Middle East	FCDO	204620	5,544,763	4,471,733
Middle East	GAC	204378	555,887	1,542,452
Middle East	Plan Int. Australia	204634	-	97,055
Morocco	LDS	204744	300,000	300,000
Nigeria	UNOCHA	204485	(65,582)	(9,006)
Pakistan	Welthungerhilfe	204505	(7,138)	-
Palestinian Territory	LDS	204778	1,000,000	1,000,000
Palestinian Territory	LDS Charities Australia	204885	1,000,000	-
Poland	Tides Foundation	204535	(2)	9,885
Poland	Tides Foundation	204625	(6)	3,220
Poland	Tides Foundation	204678	(1,591)	166,564
Somalia	ACF US	204770	491,538	491,324
South Sudan	UNICEF	203774	(43,852)	(43,852)
South Sudan	UNICEF	204577	7,799,121	7,930,568
South Sudan	UNOCHA	203972	(7,532)	(7,532)
South Sudan	UNOCHA	204675	702,120	701,463
South Sudan	UNOCHA	204696	644,567	644,567

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS (CONTD.)

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
South Sudan	UNOCHA	204838	300,000	211,231
South Sudan	WHO	204682	158,586	158,586
Sudan	KSRelief	204898	11	11
Sudan	LDS	204679	570,941	472,887
Sudan	Start Fund	204677	94,921	94,921
Syria	Alwaleed Philanthropies	204688	250,000	245,927
Syria	AstraZeneca	204596	(6,579)	176,594
Syria	DAHW	204705	809,375	652,041
Syria	FCDO	204380	215,623	215,623
Syria	FCDO	204620	4,296,400	4,296,400
Syria	GAC	204378	1,727,133	1,727,133
Syria	LDS	204594	-	482,372
Syria	UNOCHA	204239	(269)	(269)
Ukraine	AstraZeneca	204389	-	13,932
Ukraine	AstraZeneca	204639	(1,967)	248,033
Ukraine	GAC	204554	-	2,749,054
Ukraine	LDS	204637	-	944,101
Ukraine	Plan Int. Australia	204442	(3,495)	-
Ukraine	Plan Int. Australia	204641	53,173	162,130
Ukraine	Vitol Foundation	204429	(4,249)	25,972
US&T - Continental US	LDS	204746	300,000	223,638
US&T - Puerto Rico	LDS	204498	-	23,865
Yemen	GAC	204374	(329)	1,161,539
Yemen	KSRelief	204898	6,252	6,252
Yemen	UNOCHA	204511	207,392	207,392
Total Emergency Response and Preparedness			**36,743,312**	**45,705,226**

PROJECTS CATEGORISED UNDER MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNFPA	204573	2,104,418	2,248,500
Afghanistan	UNOCHA	204556	(486,859)	(23)
Afghanistan	UNOCHA	204557	(493,950)	(46)
Afghanistan	UNOCHA	204559	(329,397)	(48)
Afghanistan	WHO	204703	91,684	91,684
Afghanistan	WHO	204753	350,417	350,417
Ethiopia	UNFPA	204450	(913)	-
Jordan	GIZ	204510	(2,307)	(2,307)
Jordan	KSRelief	204694	873,000	771,434
Libya	GIZ	204369	(2,406)	(2,406)
Mali	UNFPA	203634	(608)	-
Pakistan	GIZ	204731	199,265	133,135
Pakistan	UNHCR	204574	599,624	599,624
Ukraine	LDS	204813	300,000	48,016
Venezuela	GAC	204621	-	755,405
Total Mental Health and Psychosocial Support			**3,201,968**	**4,993,385**

PROJECTS CATEGORISED UNDER WATER, SANITATION AND HYGIENE

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	Islamic Development Bank	204649	215,779	1,056,849
Afghanistan	UNICEF	204310	6,892	6,892
Afghanistan	UNOCHA	204264	(1,997)	(1,997)
Afghanistan	UNOCHA	204368	(44)	(44)
Ethiopia	UNHCR	204326	(336)	-
Ethiopia	UNHCR	204603	242,687	363,163
Ethiopia	UNHCR	204822	866,844	866,844
Ethiopia	UNHCR	204824	236,884	236,884
Ethiopia	UNHCR	204825	1,825,458	1,629,712
Ethiopia	UNOCHA	204376	(896)	(896)
Libya	UNICEF	204745	522,988	520,729
Nigeria	UNOCHA	204691	768,000	708,147
Pakistan	UNICEF	204785	286,131	285,984
Syria	UNOCHA	204789	180,000	96,482
Yemen	UNOCHA	204732	650,517	418,828
Yemen	UNOCHA	204805	800,000	100,906
Zimbabwe	UNICEF	204869	268,260	96,608
Total Water, Sanitation and Hygiene			**6,867,167**	**6,385,091**

PROJECTS CATEGORISED UNDER WOMEN & CHILDREN'S HEALTH

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNFPA	204309	(98)	(98)
Afghanistan	UNFPA	204814	2,251,628	2,251,628
Afghanistan	UNOCHA	204295	(3,760)	(3,760)
Cameroon	UNHCR	204567	167,523	292,610
Cameroon	UNHCR	204800	860,958	702,418
Cameroon	UNICEF	204771	271,853	205,661
Central African Republic	IRC	204214	473,713	473,348
Ethiopia	UNFPA	204569	601,698	601,698
Ethiopia	UNFPA	204837	193,717	193,717
Ethiopia	UNHCR	204585	137,745	339,539
Ethiopia	UNHCR	204823	103,462	69,083
Global	UNFPA	204612	122,992	122,992
Iraq	UNOCHA	204012	(2,164)	(2,164)
Jordan	UNICEF	204580	(114,490)	-
Jordan	WFP	204508	204,022	204,022
Lebanon	French MOFA	204666	6,322	659,608
Lebanon	Plan Int. Australia	204357	(4,423)	-
Lebanon	Plan Int. Australia	204684	440,072	439,534
Lebanon	UNOCHA	204322	(38,980)	-
Mali	GAC	204353	2,566,663	2,340,663
Nigeria	MINBUZA	204069	(10,115)	-
Nigeria	UNICEF	204477	9,056	9,056
Nigeria	UNICEF	204876	52,167	23,224
Nigeria	UNOCHA	204539	(12,430)	83,147
Nigeria	WFP	204440	(43,779)	(4,414)
Pakistan	IOM	204760	88,035	88,035
Pakistan	IOM	204902	13,003	13,003
South Sudan	FCDO	203190	914,967	914,374
South Sudan	UNFPA	204575	929,935	930,548
South Sudan	UNFPA	204807	752,455	751,868
South Sudan	UNICEF	204260	(141,443)	-
South Sudan	UNICEF	204845	175,885	175,885
South Sudan	UNOCHA	204072	(2,872)	(2,872)
South Sudan	UNOCHA	204536	(8,795)	1,072
Total Women and Children's Health			**10,954,522**	**11,873,425**

PROJECTS CATEGORISED UNDER NUTRITION AND FOOD SECURITY

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	ACF Canada	204550	59,968	59,968
Cameroon	UNHCR	204324	(8,249)	8,324
Cameroon	WFP	204881	38,280	38,280
Ethiopia	LDS	204709	800,000	683,089
Ethiopia	The Power of Nutrition	204681	52,000	51,345
Ethiopia	UNICEF	204886	104,032	77,969
Ethiopia	WFP	204030	3,593,712	3,526,614
Ethiopia	WFP	204616	572,693	572,693
Ethiopia	WFP	204704	9,655,993	9,122,463
Ethiopia	WFP	204851	900,865	875,438
Ethiopia	WFP	204519	490,458	490,458
Global	ACF Canada	204550	80,401	80,401
Jordan	UNICEF	204579	624,893	624,893
Nigeria	WFP	204307	(16,387)	-
Nigeria	WFP	204615	220,311	220,311
Nigeria	WFP	204627	494,264	494,264
Nigeria	WFP	204638	16,471	16,471
Nigeria	WFP	204648	317,275	317,275
Nigeria	WFP	204665	76,232	76,232
Nigeria	WFP	204840	166,188	166,188
Nigeria	WFP	204841	44,511	44,511
Somalia	ACF Canada	204550	46,522	46,522
Somalia	GDS International	204521	(0)	44,918
Somalia	UNICEF	204491	780,392	691,109
Somalia	WFP	204655	766,019	766,019
Somalia	WFP	204872	119,059	119,059
South Sudan	UNICEF	204562	2,220,142	2,225,595
South Sudan	WFP	204576	1,381,738	1,487,563
South Sudan	WFP	204810	987,221	987,221
Venezuela	WFP	204611	738,913	738,913
Venezuela	WFP	204767	1,308,874	1,308,874
Yemen	LDS	204630	-	689,782
Yemen	LDS Charities Australia	204905	750,000	1,544
Yemen	UNOCHA	204906	360,000	11,149
Total Nutrition and Food Security			**27,742,788**	**26,665,453**

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YEMEN



DEMOCRATIC REPUBLIC OF THE CONGO



HOW YOU CAN HELP

Give hope, give health.

There are many ways you can help International Medical Corps (UK) provide lifesaving care and help communities gain self-reliance after a disaster.

INTERNATIONALMEDICALCORPS.ORG/GIVE

WAYS TO GIVE

Become a monthly donor

Make a one-time gift via cheque, credit card, wire transfer or online

Make a gift in honour of a loved one

International Medical Corps UK

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INTERNATIONAL MEDICAL CORPS (UK)

England & Wales - Charity number 1093861

Accounts



INTERNATIONAL MEDICAL CORPS UK

2022/2023 ANNUAL REPORT

International Medical Corps UK

Company Registration No. 04474904


Набір 4
Набір для побутової гігієни
International
Medical Corps



UKRAINE

INTERNATIONAL MEDICAL CORPS (UK)

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International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

Throughout the document, where references to "affiliates" (in plural) are made, they refer to International Medical Corps and International Medical Corps Croatia.

Unless otherwise stated, projects and their statistics referred to in the first part of this report (pages 1-25) are the results of combined International Medical Corps (UK), International Medical Corps and International Medical Corps Croatia global efforts in calendar year 2022 and do not form part of the statutory annual report. Projects and their statistics referred to in the second part of this report (pages 26-63) represent the work of International Medical Corps (UK) only, and covers the 12-month period to 30 June 2023 and forms part of the statutory financial statements and trustees report.

TO OUR SUPPORTERS

This year has seen a number of global disasters, ongoing and newly emerging. Thanks to your generosity, our teams had the resources to respond rapidly to the severe monsoon flooding in Pakistan, the devastating earthquakes in Türkiye and Syria, and the conflict in Sudan, and to continue their essential work in Ukraine.



Since February 2022, we have expanded our team in Ukraine from 30 staff members based in Mariupol to more than 400, working out of nine offices throughout the country. Our courageous and committed teams there have improved access to health supplies and services for more than 9 million people, providing a wide range of healthcare-related and training services.

The Ukraine conflict also has created a ripple effect of displacement, hunger and disease—stretching beyond the borders of that country and affecting millions worldwide. The prices of fuel, fertiliser and agricultural products have surged globally due to the war, exacerbating food insecurity in countries across Africa and the Middle East. But with your unwavering support, International Medical Corps (UK) has continued to respond to this global hunger crisis, delivering lifesaving services to those who need it most, in countries such as Afghanistan, Democratic Republic of Congo, Ethiopia, Mali, Nigeria, Somalia, South Sudan, Sudan, Ukraine and Yemen.

Our focus on training, the cornerstone of our mission, has also continued. Every year we train thousands of frontline health workers and community members, providing them with the skills and knowledge they need to become effective first responders themselves. We design and implement our programmes in consultation with community members, to ensure that our training aligns with their needs.

For example, as we expanded our services across Ukraine—working closely with international and national agencies, communities, and regional and local healthcare providers—we saw an urgent need for advanced emergency and trauma-care training. We worked with partners to identify areas where such training could benefit medical staff, first responders and even the general public. Now, our extensive training programme in the country covers everything from basic lifesaving techniques to advanced training in managing chemical, biological, radiological, nuclear and explosive hazards.

Other devastating natural disasters occurred around the globe in 2022—and International Medical Corps (UK) was there. When a massive earthquake struck Afghanistan, we mobilised staff and ambulances and provided critical trauma care to affected communities. When an extreme monsoon season in Pakistan caused severe flooding—affecting one in seven Pakistanis—our team there quickly provided lifesaving services to tens of thousands of people and delivered millions of litres of potable water.

Earlier this year, when two deadly earthquakes struck Türkiye and Syria, killing more than 50,000 and displacing almost 6 million, our teams rapidly responded in both countries, deploying mobile medical units and delivering desperately needed supplies, including medicines, blankets and winter clothes.

And in April, when clashes between Sudan's army and rebel forces killed and injured many, and left millions of people displaced within the country, our teams delivered lifesaving services in accessible areas. They are continuing to work closely with local, national and international stakeholders to meet the increasing needs of internally displaced persons as well as refugees in neighbouring countries.

Of course, all of this is possible because of your generous support to our work worldwide. Working with International Medical Corps' global partners, our 8,000+ staff members—96% of whom are hired locally—and hundreds of volunteers across some 30 countries reached more than 20 million people last year with comprehensive healthcare and training programmes.

Your support and encouragement motivate us to continue our lifesaving work, and we remain ready to help whenever and wherever we are needed. Thank you for being part of our global community.



DEMOCRATIC REPUBLIC OF THE CONGO



Andrew W. Géczy
Chairman
International Medical Corps (UK)



Ognjen Radosavljevic
Managing Director
International Medical Corps (UK)

WE ARE A

GLOBAL FIRST RESPONDER

We provide training and deliver emergency healthcare, along with related services, to those affected by conflict, natural disaster or disease. We do this no matter where they are in the world and whatever the conditions may be. We train people in their own communities, building resilience, providing them with the skills they need to recover, and helping them to build self-reliance and become effective first responders themselves.







SPEED SAVES LIVES

Our emergency response teams deploy quickly to assist those in great need—often arriving within hours—even in the most remote, challenging environments.



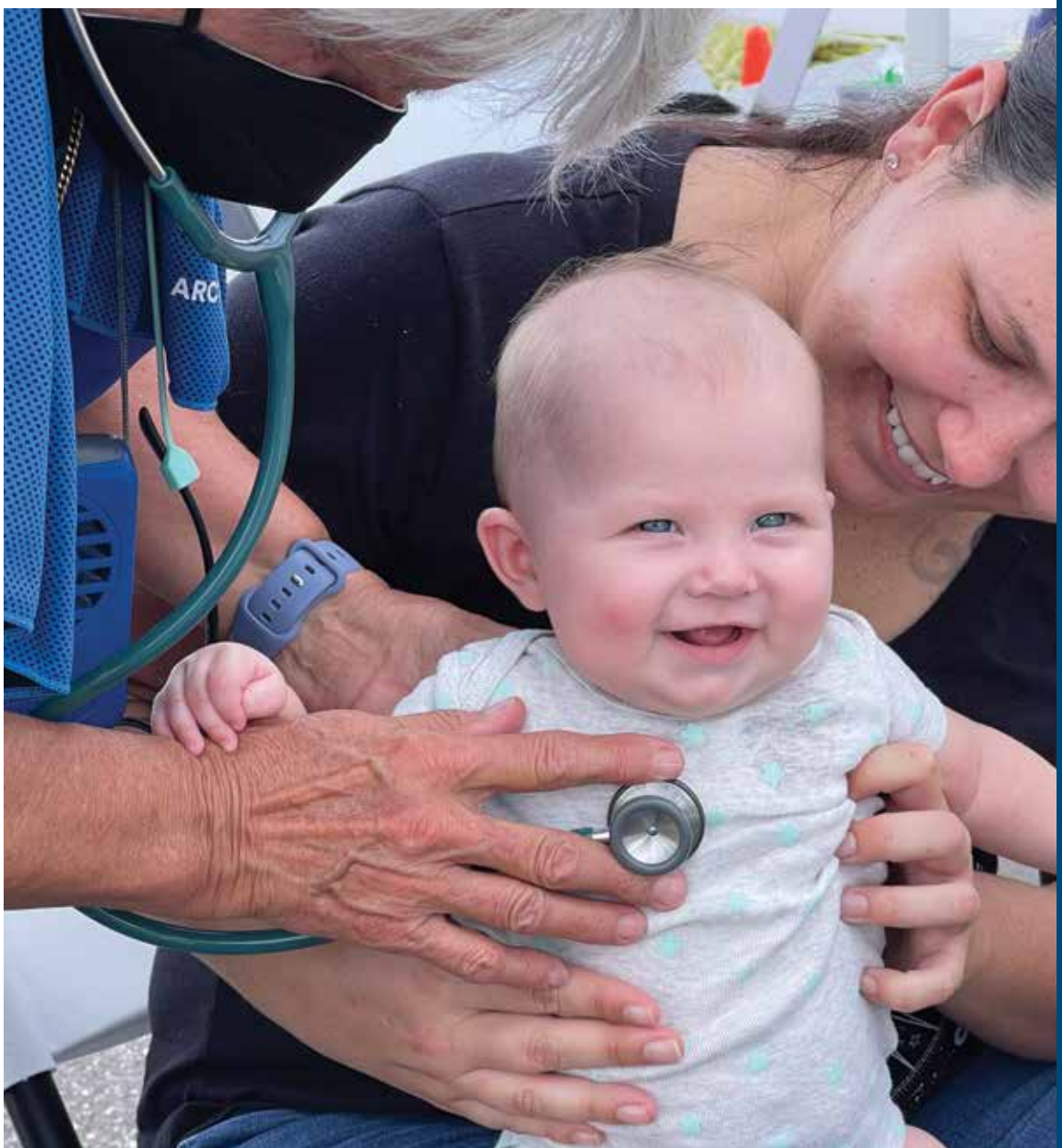
ZIMBABWE

We draw on our experience gained in 39 years of responding to disasters in more than 80 countries on six continents. Our surge capacity includes physicians and nurses trained in emergency medicine, supported by specialists in essential healthcare services that range from mental health and psychosocial support to technical expertise in gender-based violence, nutrition, and water, sanitation and hygiene.

We maintain our capacity to respond quickly because speed saves lives in the initial hours following a disaster. As conditions ease, we stay on and partner with survivors to build a better, more independent future for those we're helping. The key to our approach is training—an essential component of all our programmes, used to transfer the latest knowledge and skills into local hands, to help ensure a brighter future. We strengthen local health systems and work with community leaders, hire and train local staff, develop partnerships and evaluate progress to ensure quality outcomes.

With a staff that numbers more than 8,000 worldwide, 96% of whom are recruited locally, our strategy ensures that the knowledge and tools required to prepare for—and respond to—future emergencies are culturally compatible and remain available in the community. We work to ensure that if disaster strikes again, residents can be their own first responders.

Though we faced many challenges over the last year, our committed and courageous teams met those challenges head on, delivering lifesaving services and training to those who needed it most.



UNITED STATES

EMERGENCY RESPONSE AND PREPAREDNESS

There have been several global disasters this year and in 2022, but with your support, we had the resources to respond rapidly. In Ukraine—embroiled in a war with Russia since February 2022—we have so far reached more than 9 million people with health-related supplies, services and training. We also responded to natural disasters worldwide, including the devastating earthquake in Afghanistan that killed more than 1,000 people, the severe flooding caused by an extreme monsoon season in Pakistan that destroyed more than 2 million homes and affected one in seven Pakistanis, and the two deadly earthquakes that struck Türkiye and Syria earlier this year, killing more than 56,000 and displacing nearly 6 million. We also delivered lifesaving services in accessible areas in Sudan when clashes between Sudan's army and rebel forces killed and injured many. We continue to help those affected by these disasters and conflicts.

HEALTHCARE SERVICES

We provided primary and secondary healthcare services, or some kind of health assistance, to more than 1 million people in Afghanistan, Cameroon, the Democratic Republic of Congo, Jordan and Syria. In Ethiopia and the Central African Republic (CAR), we provided outpatient consultations to 175,730 people. Women's and children's health is a priority at International Medical Corps. We offered 25,733 antenatal and postnatal consultations to women in CAR, Nigeria and South Sudan.

NUTRITION AND FOOD SECURITY

In response to the ongoing hunger crisis in the Horn of Africa and the surrounding region, we screened more than 1 million children and pregnant and lactating women for malnutrition in Afghanistan, Cameroon, Ethiopia, Nigeria, South Sudan and Syria. And in Ethiopia, we trained 38,988 mothers and caregivers on infant and young-child feeding practices.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

As part of our mental health services, we provided MHPSS consultations/ counselling to 113,455 people in Afghanistan, Ethiopia, CAR, South Sudan and Syria. Our MHPSS services, which include case management, counselling sessions, consultations and awareness sessions, reached more than 106,000 people in Afghanistan, Jordan, Mali and Somalia.

WATER, SANITATION AND HYGIENE (WASH)

Our WASH team undertakes various activities to ensure clean and accessible water for all. After the devastating flooding in Pakistan in 2022, we distributed 140,000 water purification tablets, 1,600 dignity kits and 1,000 hygiene kits in the flood-affected districts. In Somalia, we distributed hygiene kits to 27,000 people and constructed 280 latrines, while in Ethiopia, we reached 675,267 people with hygiene awareness messaging. In Yemen, we improved emergency and sustainable water supply access for 13,632 people, provided 645,000 litres of treated water to 12 internally displaced camps, and trained 40 Community Health Volunteers on hygiene awareness and promotion.

GENDER-BASED VIOLENCE (GBV) PREVENTION AND RESPONSE

We provide remote and in-person training to help communities understand various topics related to GBV, such as causes, contributing factors and consequences. In Poland, we completed 22 training sessions where more than 300 people participated. In Jordan's Azraq and Za'atari camps and in Irbid and Mafraq, our Child Protection Counsellors provided 757 individual counselling sessions on bullying and emotional distress. In addition, we reached 856,904 women and girls with messaging on GBV prevention and response in Cameroon, Ethiopia, Mali, Nigeria and South Sudan.

DECADES OF PROVIDING TRAINING



When Dr. Bob Simon founded International Medical Corps in 1984, he knew he could broaden his impact significantly by training people from local communities. Since then, training has become the foundation of our work, providing people with the support they need to move from relief to self-reliance. In Ukraine, for example, we're delivering first-aid and basic life support, trauma-care and psychological first-aid training.

GLOBALLY, IN 2022, WE TRAINED

91,645

people through 2,240 training sessions covering a range of health-related issues.

13,526

people in infant and young-child feeding support and counselling.



SOUTH SUDAN

5,410

people in gender-based violence prevention and response.

10,829

people in mental health and psychosocial support.



UKRAINE TRAUMA-CARE TRAINING SERIES

The Russian invasion of Ukraine highlighted the need for advanced training in emergency and trauma care at the pre-hospital and hospital levels. International Medical Corps worked with Ukrainian partners to identify areas where training could benefit medical staff, including training and preparedness to manage trauma and mass casualties, as well as cases related to chemical, biological, radiological, nuclear and explosive hazards.

International Medical Corps and the Harvard Humanitarian Initiative worked with the American College of Surgeons, Emergency Nursing Association and World Health Organization to develop and deliver this training in Ukraine. In 2022, we deployed 91 trainers to Ukraine, held 80 training sessions and trained more than 2,300 people in trauma care, covering such topics as:

- Advanced Trauma Life Support Fundamentals
- Trauma Nurse Fundamentals
- Pre-Hospital Trauma Fundamentals
- Pediatric Trauma Fundamentals
- Stop the Bleed®
- Mass Casualty Management
- Chemical, Biological, Radiological, Nuclear and Explosives

UKRAINE

PSYCHOLOGICAL FIRST AID

We also trained clinicians, first responders and caregivers in psychological first aid (PFA) in both Ukraine and in Poland, where many Ukrainian refugees live. “Working in an ambulance, I am the first to meet people in times of despair, illness or emergency,” explained PFA trainee Olha Kurtyniak, a paramedic based in Stryi, Ukraine. “Each person who is exposed to stress reacts to it differently—sometimes a person needs psychological help more than medical help.” With International Medical Corps’ help, Kurtyniak and others like her know how to provide PFA responsibly, who can provide it, when and where it should be provided, and when someone should be referred for specialised care. The training also equips students with self-care techniques that enable caregivers to help themselves—so they can continue helping others.



POLAND

BY THE NUMBERS

In 2022, International Medical Corps responded directly to the needs of more than 20 million people in 30 countries on five continents.

Among the results of the work of International Medical Corps, International Medical Corps (UK) and International Medical Corps Croatia:



20 MILLION

BENEFICIARIES

Of these, nearly 3 MILLION were children under 5. Our work also reached more than 68 MILLION others who benefited indirectly from our programmes and work.



7.7 MILLION

PRIMARY MEDICAL CONSULTATIONS

Of these, nearly 2 MILLION were children under 5.



91,645 PARTICIPANTS TRAINED

This included clinical and non-clinical health staff, government and non-government staff, community health workers and volunteers.



208,468 CHILDREN VACCINATED AGAINST MEASLES

Vaccinating children protects future generations from the dangers of measles and builds more resilient immune systems.



1,675 HEALTH FACILITIES SUPPORTED

In 2022, we provided vital assistance to 1,175 primary health facilities and 172 hospitals, and operated 318 mobile clinics to reach people in underserved and remote areas.





WOMEN'S AND CHILDREN'S HEALTH

The key to our future

Ensured that 96,533 births were assisted by a trained birth attendant.

NUTRITION

The foundation of life

Provided 2,583,959 people with critical nutrition support and treated 232,437 children for acute and severe malnutrition.



YEMEN

WATER, SANITATION AND HYGIENE

The essence of good health

Helped more than 3.5 million people with water, sanitation and hygiene needs, and constructed or rehabilitated 1,220 latrines.

MENTAL HEALTH CARE AND PSYCHOSOCIAL SUPPORT

The invisible wounds

Provided services to 957,248 people through hundreds of facilities, mobile teams and other means of delivery.

GENDER-BASED VIOLENCE

A violation of fundamental human rights

Offered protection and support to 1,657,271 people living with the threat—or reality—of gender-based violence.

WHERE WE WORK



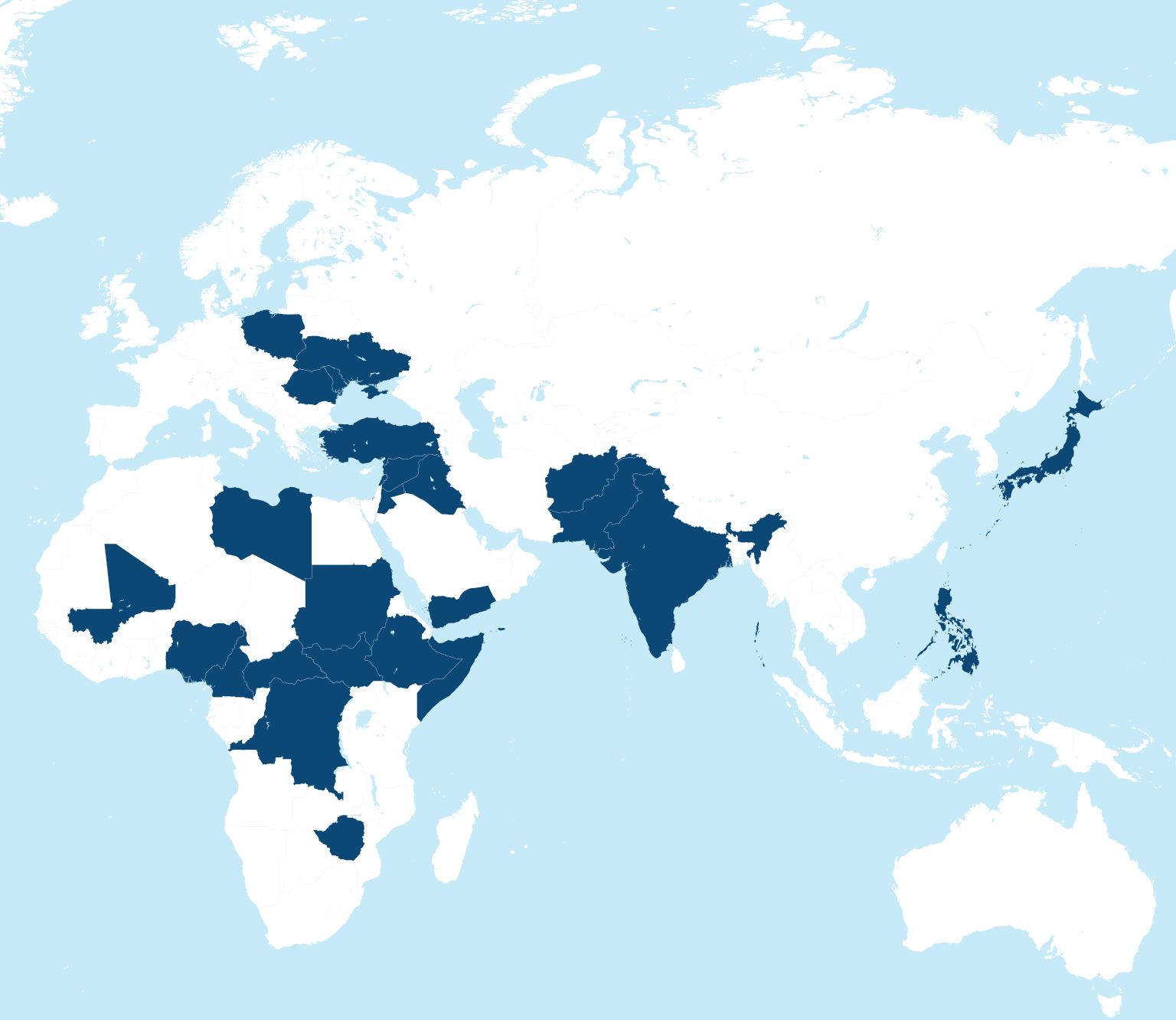
In calendar year 2022, we provided urgently needed healthcare and related services to more than 20 million people in 30 countries on five continents.

AMERICAS

- Colombia
- Puerto Rico*
- Continental United States
- Venezuela*

AFRICA

- Cameroon*
- Central African Republic*
- Democratic Republic of the Congo*
- Ethiopia*
- Libya*
- Mali*
- Nigeria*
- Somalia*
- South Sudan*
- Sudan*
- Zimbabwe*



EUROPE

Moldova
Poland*
Romania
Ukraine*

MIDDLE EAST

Gaza
Iraq*
Jordan*
Lebanon*
Syria*
Turkey
Yemen*

ASIA

Afghanistan*
India
Japan
Pakistan*
Philippines*

**Countries where International Medical Corps (UK) programmes were funded during the 12 months to 30 June 2023.*



TATA CONSULTANCY SERVICES

In 2022, International Medical Corps partnered with Tata Consultancy Services (TCS) to create a digital system to help streamline our prequalification of local vendors—an important measure that helps make our work even more efficient and cost-effective. Though International Medical Corps had been using a set of prequalification guidelines, the new digital system offers a number of improvements: it is fully accessible online, automates the documentation and approval process, and reduces our carbon footprint by eliminating the need to maintain physical documentation. We appreciate the assistance from TCS, which provided its services and resources free of charge.

STRENGTHENING LOCAL HUMANITARIAN ACTION TO ADDRESS CLIMATE IMPACT

With support from the French Ministry for Europe and Foreign Affairs, International Medical Corps partners with the International Council of Voluntary Agencies to help local and national NGOs in East Africa strengthen humanitarian responses in ways that are appropriate for environments affected by climate change. The project focuses on two priority themes: enhancing organisational systems and operational readiness, and including climate-impact considerations in humanitarian assistance. The multi-faceted learning approach includes individualised learning opportunities, training of trainers, and global and regional meetings around priority themes.

BUILDING A BETTER RESPONSE E-LEARNING

International Medical Corps has led the “Building a Better Response” (BBR) project since 2012, with generous support from the United States Agency for International Development’s (USAID) Bureau for Humanitarian Assistance (BHA), and working in partnership with Concern Worldwide and the Harvard Humanitarian Initiative. We train thousands of people each year to engage in a coordinated humanitarian response at the local, regional and national levels. In December 2022, we launched the new BBR e-learning platform, which features updated learning modules, new avatars, an updated color palette and new case-study assessments. Voiceover language options include Arabic, English, French, Polish, Spanish and Ukrainian, with additional transcript translations available in Dari, Portuguese, Russian, Turkish and Urdu. To create the platform, the BBR team incorporated feedback from previous learners to design the most user-friendly and relevant training possible.

JORDAN



International Medical Corps (UK) is an international humanitarian nongovernmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

INTERNATIONAL MEDICAL CORPS (UK) BOARD OF DIRECTORS

Andrew W. Geczy
CHAIRMAN
London

Hendrik Cornelis
SECRETARY
London

Nancy A. Aossey
TREASURER
Los Angeles, CA

Dominic J. O'Hagan
United States

Reto Braun
Switzerland

C. William Sundblad
Santa Monica, CA



Global Ambassador Ashley Park and First Responder Paul Forman in Ukraine



Global Ambassador Inanna Sarkis in Jordan

GLOBAL AMBASSADORS

Lily Donaldson
Model, Activist

Judy Greer
Actress, Activist

Sanaa Lathan
Actress, Humanitarian

Sienna Miller
Actress, Activist

Ashley Park
Actress, Humanitarian

Inanna Sarkis
Actress, Activist

Stacy Twilley
Founder and CEO
iVolunteer.org

Robin Wright
Actress, Humanitarian

CELEBRITY FIRST RESPONDERS

Muna AbuSulayman
Sasha Alexander
Genevieve Angelson
Bob Crawford
Kevin Curry
Paul Forman
Nikki Glaser
Ben Harper
Jaclyn Harper
Jihae
Maz Jobrani
David Koechner
Heidi Murkoff
Yvonne Orji
Robert Pattinson
Jeff Probst
Hannah Simone
Tom Sturridge
Tara Summers
Anne Vyalitsyna
Benjamin Watson

ADMINISTRATIVE DETAILS OF THE CHARITY, THE TRUSTEES AND ADVISORS

TRUSTEES

Andrew W. Géczy
CHAIRMAN

Nancy A. Aossey

Reto Braun

Hendrik Cornelis
SECRETARY

Dominic J. O'Hagan

C. William Sundblad

MANAGING DIRECTOR

Ognjen Radosavljevic

FINANCE DIRECTOR

Fahmida Wadud-Muhit

REGISTERED OFFICE

Workspace 4, Mode
1-6 Centric Close
Oval Road, Camden
London
NW1 7EP

TELEPHONE
WEBSITE

0207 253 0001
https://www.internationalmedicalcorps.org.uk

COMPANY REGISTRATION NUMBER

04474904 (England and Wales)

CHARITY REGISTRATION NUMBER

1093861

AUDITOR

Buzzacott LLP
130 Wood Street London
EC2V 6DL

BANKERS

Barclays Bank PLC
5th Floor
Level 27
1 Churchill Place London
E14 5HP

TRUSTEES' REPORT (INCLUDING STRATEGIC REPORT) 30 JUNE 2023

The trustees, who are also directors of the company for the purposes of the Companies Act 2006, present their report along with the financial statements of the charity for the year ended 30 June 2023. The financial statements have been prepared under the accounting policies set out therein and comply with applicable law and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102).

The report as a whole has been prepared in accordance with Part 8 of the Charities Act 2011. The information in the sections headed 'Strategic Report' constitutes the strategic report as required by the Companies Act 2006 (strategic report and directors' report) Regulations 2013.

The required information to be presented in a directors' report under the Companies Act 2006 is incorporated in the remaining sections of the report.

STRUCTURE, GOVERNANCE AND MANAGEMENT

TRUSTEES AND ORGANISATIONAL STRUCTURE

International Medical Corps (UK) ('the Charity') was incorporated as a company limited by guarantee in England and Wales on July 2, 2002 and registered as a charitable organisation with the Charity Commission on September 19, 2002. Activities commenced on November 1, 2002.

International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation that shares the same mission, and International Medical Corps Croatia, an association registered in Croatia. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes on the ground in accordance with the terms and conditions of its grants. During the year, more than $121 million of the Charity's programmes were delivered in partnership with International Medical Corps (2022: $110 million). This represents a 10% increase (2022: 5% decrease compared to 2021) in activities worldwide over the previous year. International Medical Corps (UK) also maintains an Administrative Services Agreement with International Medical Corps Croatia to share certain services in connection with its operation.

For ease of reference, International Medical Corps (the non-profit organisation registered in California) will be referred to as International Medical Corps. The UK charity will be referred to as International Medical Corps (UK).

The trustees govern in accordance with the Memorandum and Articles of Association of International Medical Corps (UK) and all subsequent amendments.

The trustees of the Charity have the powers to appoint and remove a trustee. The Board of Directors of International Medical Corps has the right to appoint one trustee (and any successor) by notice in writing addressed to the Secretary of the Charity, and any person so appointed shall become a trustee immediately upon receipt by the Secretary of such notice.

International Medical Corps (UK) adheres to and supports the development of the Sphere Project's Minimum Standards in any disaster response. International Medical Corps (UK) is also informed by the guiding principles of CHS Alliance's Code of Good Practice for the Management and Support of Field Staff.

The Board of Trustees is the governing body for International Medical Corps (UK) and currently comprises six members who aim to meet several times each year. Additional meetings can be called at the request of the Chair. For the 2022–23 financial year, the board of trustees met in January 2023 and June 2023. The list of trustees who served in the year is shown on page 26.

Risk, compliance and external audit functions sit with the board.

As the governing body for the Charity, the trustees take decisions and approvals on a board level regarding strategic and operational risks, as follows:

- **Strategy.** Determine and approve International Medical Corps (UK)'s strategic direction and annual business plan, scrutinising the extent to which the Charity has been able to meet its charitable objectives.
- **Management.** Review and provide oversight of the implementation of the Charity's country programmes.

- **Financial Management and Compliance Requirements.** Review and approve annual budgets, statutory statements and ensure full compliance with all constitutional, legal, regulatory and statutory requirements.
- **Risk.** Review and approve International Medical Corps (UK)'s procedures for risk management, and ensure there is a framework of structures, policies and processes in place for the organisation and the board of trustees.

STATEMENT ON APPROACH TO SAFEGUARDING

International Medical Corps (UK) and its affiliates are committed to the security, safeguarding and safety of their staff, the people we serve and the communities in which we work. International Medical Corps (UK) receives all relevant reports from its US affiliate. As per the Charity's governance structure, the Managing Director and senior staff manage all safeguarding matters.

The Charity's US affiliate continues to reinforce its safeguarding capacity and capability through an organisation-wide approach, which includes incorporation of guidance received from the Foreign, Commonwealth & Development Office (FCDO) of the UK Government, other donors, and the Charity Commission.

The following policies of International Medical Corps (UK) outline the Charity's approach to managing safeguarding matters. The policies are reviewed and updated periodically.

- Code of Conduct
- Safeguarding Policy, encompassing child safeguarding, protection from sexual exploitation and abuse, safeguarding adults at risk, prevention of trafficking in persons
- Whistleblowing Policy
- Guidance on Sub-Recipient Safeguarding and Ethical Conduct requirements
- Anti-Harassment and Bullying Policy
- Conflict of Interest Policy/Staff Integrity Policy
- Disciplinary Rules, including grievance procedures
- Recruitment and Selection Process
- Health and Safety Policy
- Modern Slavery Statement

In addition to the policies, staff are also required to complete mandatory training and awareness-raising courses that include:

- Code of Conduct and Ethics
- Prevention of Trafficking in Persons
- Child Safeguarding
- Preventing Harassment in the Workplace
- Prevention of Sexual Exploitation and Abuse

This training is completed at induction, and refresher training is completed on an annual basis.

The Charity's US affiliate continues to reinforce the following key safeguarding actions taken during the recent years.

THE SAFEGUARDING TASK FORCE

The Safeguarding Task Force was created in 2018 to provide focus, leadership and oversight over all global safeguarding initiatives. The Safeguarding Task Force is a multi-disciplinary team comprising staff from key departments, including Domestic and International Affairs, Legal, Human Resources, Ethics and Compliance, Technical Unit and International Programmes. The Safeguarding Task Force workplan covers the development and implementation of safeguarding initiatives, including policy review and updates, prevention and protection, survivor assistance guidance, capacity strengthening, training and country support.

POLICY DEVELOPMENT AND IMPLEMENTATION

The umbrella Safeguarding Policy encompasses:

- Child Safeguarding
- Protection from Sexual Exploitation and Abuse
- Safeguarding Adults at Risk
- Prevention of Trafficking in Persons

Sexual harassment in the workplace is covered under the Policy for Protection from Harassment, Bullying and Sexual Misconduct. All policies are reviewed and updated periodically.

SAFEGUARDING POLICY IMPLEMENTATION GUIDE AND TOOLKIT

The Safeguarding Task Force has developed a guide to support understanding and implementation of the International Medical Corps' Safeguarding Policy. The guide describes priority actions that need to be undertaken by country teams to ensure the full implementation of the Safeguarding Policy at the country and programme/project level.

Each priority action has a brief explanation of its importance, an overview of the action itself, how to document or demonstrate that an action has been completed, and guidance on where further tools and information can be found within the accompanying Safeguarding Implementation Toolkit, in order to implement the actions.

The accompanying Toolkit contains tools, information and guidance to support the implementation of the Safeguarding Policy. Examples of the tools include a Safeguarding Action Plan Template, the Terms of Reference for the Safeguarding Focal Points and the Survivor Assistance Guidelines.

TALENT ACQUISITION

Safeguarding is included in the corporate staff-recruitment process, from advertisement to hiring.

Key actions include the following steps.

- Safeguarding risks are considered for each role.
- Behavioural-based safeguarding questions are included in the headquarters level interview process for all positions, including field recruitments.
- Managers' responsibilities for ensuring safeguarding measures for volunteers, employees and partners are now routinely included in job descriptions for international staff and are part of the management and staff performance-appraisal process.

International Medical Corps UK and its affiliate International Medical Corps participate in the Inter-Agency Misconduct Disclosure Scheme from the Steering Committee for Humanitarian Response. In accordance with this, we will request information from an applicant's previous employers about any findings of sexual exploitation, sexual abuse and/or sexual harassment during employment, or incidents under investigation when the applicant left employment.

SAFEGUARDING FOCAL POINTS

More than 130 Safeguarding Focal Points are identified at the country level. Safeguarding Focal Points are nominated by the Country Director. Training resources, materials and support include regular orientation sessions, terms of reference, extensive trainings and regular webinars, and a resource library on our intranet.

Safeguarding Focal Points' responsibilities include training, programme support as related to Safeguarding (e.g. proposal development), coordinating with the Headquarters Safeguarding Taskforce, and liaising with other focal points from partner agencies and working groups.

Staff globally receive an annual refresher training that covers Safeguarding. Our Safeguarding Focal Points are responsible for ensuring that this training is completed, in coordination with our Learning & Development team at Headquarters.

SAFEGUARDING VIOLATIONS—CASE MANAGEMENT

Reports of violations of International Medical Corps' safeguarding policies are referred to the Ethics and Compliance Department, which conducts investigations in consultation with the Safeguarding Case Team, an interdisciplinary group of senior leaders. Individuals who are found to have violated International Medical Corps' policies are subject to disciplinary action, up to and including termination. As well as considering individual cases, the Safeguarding Case Team analyses safeguarding data over time to identify risks and emerging themes. Key lessons learned through this process inform future safeguarding policy updates and practice, as part of an institutional culture of constantly striving to improve.

SURVIVOR/VICTIM SUPPORT

International Medical Corps works to ensure that survivors of safeguarding violations receive appropriate and timely support, including medical, psychosocial and other services, according to their needs and wishes. Survivors are also informed of their rights to report incidents to police and/or other relevant authorities. In contexts where reporting to authorities may be indicated, International Medical Corps' Safeguarding Case Team advises survivors and consults with Legal Counsel to determine the best course of action. To the extent possible, survivors' wishes guide decisions about the types of support received, and survivors are fully informed of their options and rights.

SAFEGUARDING RISKS OF DOWNSTREAM PARTNERS

Downstream partners are required to conduct all activities under sub-agreements in a manner consistent with international laws, humanitarian principles and donor regulations. Subrecipients are prohibited from engaging in any type of harmful misconduct, including but not limited to sexual exploitation, abuse, harassment and trafficking. Subrecipients are required to inform International Medical Corps of any safeguarding issues that arise under the sub-agreement. Safeguarding-specific requirements are included in the downstream partner risk-assessment guidelines.

DEFINING RISK OWNERS

Ownership of safeguarding risks is documented in the organisational risk register of the Charity and its US affiliate, explicitly stating that the risks are owned by executive staff. The Charity's trustees are updated at least twice a year.

SAFEGUARDING—PREVENTION MEASURES

A comprehensive approach to maintaining and strengthening prevention measures includes further incorporating protection mainstreaming into programme design and implementation and training of staff to enhance this approach, as well as the introduction of a risk mitigation approach to dealing with safeguarding violations.

THE ENVIRONMENT

International Medical Corps (UK) actively promotes policies that support the inclusion of safe environmental protection at HQ and country levels. International Medical Corps, the Charity's US affiliate, is working towards integrating a commitment to maintaining environmental standards

in its Code of Conduct, which is subscribed to by all its employees, volunteers, suppliers, and sub-partners. Moreover, at country-level programme implementation, the Charity aims to reduce excess morbidity and mortality associated with potential exposure to environmental factors. The agency coordinates globally with other actors' integrated approaches to delivering environmental, social, public health-related and climate-resilient interventions. International Medical Corps (UK) adheres to international standards and regulations that also guide the charity to effectively evaluate the potential environmental effects of proposed projects and select, implement, and manage effective environmental programmes. Furthermore, the agency collaborates with other actors globally to deliver integrated approaches that address environmental, social, public health-related, and climate-resilient interventions.

On a project-by-project basis, teams assess the risks associated with relevant aspects such as healthcare waste and expired medicines disposal, making recommendations for controlling and mitigating these impacts through individually tailored interventions. These include capacity building, use of alternative energies, prevention of environmental degradation through sustainable groundwater use, greening and solarisation of groundwater resources, health facility-based cold chains, soaking water, open defecations, and environmental health (safe domestic- and medical waste management at the health facility and community levels). These actions aim to positively change the targeted communities' knowledge, attitude, and behaviour.

The Charity is cosignatory to the global pledge on Energy and Infrastructure to adopt cost-efficient, environmentally sustainable solutions. We support resilient and sustainable WASH systems that address water scarcity and climate change and leverage renewable energy options.

The Charity is committed to maintaining high environmental standards and will continue to work and support a precautionary approach to environmental challenges, undertaking initiatives to promote greater environmental responsibility and encouraging the development and dissemination of environmentally friendly technologies.

In addition, the International Medical Corps has developed guidance on the reduction of its negative impact on the environment due to factors linked to logistics and the supply chain (transportation of goods and staff, sourcing, packaging, power supply, etc.), to implement best practices and provide recommendations based on studies and recommendations of agencies such as Groupe URD, IFRC, WHO and WFP. The Charity is also participating in the "WREC" (Waste Management And Measuring, Reverse Logistics, Environmentally Sustainable Procurement And Transport, And Circular Economy) and the "Joint Initiative" engaging with other humanitarian organisations in reviewing, developing, and sharing tools and methodologies to reduce the carbon footprint of our operations.

Since 2022, International Medical Corps calculates CO2 emissions generated globally by transport (international shipment and vehicles) and power production, and also considers international travels emissions in 2022. In the coming years baseline calculation will be augmented to power grid and in country shipment emissions. The results were presented to Senior Management and the Country team, highlighting improvement opportunities.

International Medical Corps continues to develop and disseminate eLearning to improve awareness and provide solutions for emissions reduction. In 2023, an additional training module was developed targeting all staff, highlighting measures everyone can take to contribute to carbon footprint reduction. In 2022, the Charity has recruited dedicated staff to develop tools, guidance and guidelines related to carbon emissions reduction (related to logistics and supply chain) initiatives.

In 2023, the Charity's implementing affiliate will further implement and monitor actions positively impacting the environment and analyse results against the baseline.

The Charity offers staff environmentally friendly initiatives such as the Cycle to Work Scheme, which is about promoting an alternative way to travel to work and allowing staff to work from home on some days as part of its flexible working policy, contributing to staff welfare and less pollution due to reduced daily commute to work.

The Charity was a low-energy user during the reported period and is not reporting under the UK Government's Streamlined Energy and Carbon Reporting (SECR) requirements.

STATEMENT ON MODERN SLAVERY

In December 2016, International Medical Corps (UK) published its modern slavery statement, committing to prevent modern-day slavery and human trafficking within the organisation and its supply chains. The Charity actively and continuously works with its affiliates to reduce and eliminate this risk. New employees are informed about organisational policies that contribute towards eliminating modern day slavery by the Human Resources function during staff onboarding orientation. Additionally, all employees are provided with annual training about the prevention of trafficking in persons, sexual exploitation and abuse, and

child labour. Related information is made available to employees on the organisation's intranet, as well as through posters displayed in all field and headquarters offices. In addition, International Medical Corps' Global Safeguarding Policy has been updated, made pursuant to section 54(1) of the Modern Slavery Act 2015 (UK). It mandates that all suspicions are reported and are then reviewed and investigated by the Ethics and Compliance Investigation Unit and the Safeguarding Case Team.

In 2017 International Medical Corps revised the vendor Code of Conduct which must be signed by any supplier before entering into business with International Medical Corps. It includes a chapter on the prohibition of human trafficking. Provisions are also inserted in procurement Master Terms and Conditions. Failure to comply constitutes a breach of an essential term of the Contract, leading to revoking the vendor's registration with International Medical Corps and inclusion of the company on the watch list maintained by our Ethics & Compliance department. To further mitigate the risk of doing business with vendors engaged in any way with modern slavery, International Medical Corps is currently reviewing vendor-assessment processes, to ensure that this aspect is integrated during evaluation process.

KEY MANAGEMENT PERSONNEL

The key management team of the Charity consists of the trustees, the Managing Director and the senior management team. The trustees have delegated management of the Charity's operations to the Managing Director, who is supported by the senior management team as follows:

- International Medical Corps (UK)-contracted staff:
  - Senior Director of International Programmes
  - Senior Director of Finance, Grants and Contracts
  - Senior Director of Human Resources
- International Medical Corps-contracted staff:
  - Chief Operating Officer
  - Vice President, Finance and Administration
  - Chief Advancement Officer
  - Vice President, Domestic and International Affairs

For the purposes of setting employee remuneration, delegation has been given to the Charity's Managing Director, who is also the Administrative Director for this purpose. In setting the pay and benefits of the UK-contracted senior management team, the Managing Director refers to the company's pay policy, which is periodically reviewed. Salaries and benefits are benchmarked against reliable industry data. The salary scale, including the pay policy, is approved by the Managing Director and in line with the Charity's pay policy.

The remuneration of the Managing Director is set by the trustees and in line with the Charity's pay policy and scale.

TRUSTEES' RESPONSIBILITIES

The Trustees, who are also Directors of International Medical Corps (UK) for the purposes of company law, are responsible for preparing the Trustees' Report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practices, or GAAP).

Company law requires the trustees to prepare financial statements for each financial year that give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of such resources, including the income and expenditure of the charitable company for that period. Under company law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure of the charitable company for that period.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice Accounting and Reporting by Charities;
- make judgements and estimates that are reasonable and prudent; state whether applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Each trustee confirms that:

- so far as the trustee is aware, there is no relevant audit information of which the charitable company's auditor is unaware; and,

- the trustee has taken all the steps that they ought to have taken as a trustee to make themselves aware of any relevant audit information, and to establish that the charitable company's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of S418 of the Companies Act 2006.

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

OBJECTIVES AND ACTIVITIES

PUBLIC BENEFIT

In reviewing the Charity's aims and in planning future activities, the trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit. The trustees believe that the Charity benefits the public through the achievement of its goals and objectives by:

- providing timely and appropriate humanitarian aid to vulnerable victims of wars and disasters;
- building the capacity of local healthcare providers to improve the standards of healthcare for local communities and create more sustainable systems;
- contributing to the UK's agenda for international development and, in particular, the achievement of the Sustainable Development Goals, including the prevention of and response to violence against women and girls;
- contributing to the containment and reduction of infectious diseases globally; and
- contributing to the understanding of the impact of various health issues affecting the vulnerable, through the UK/EU media and humanitarian networks.

INTERNATIONAL MEDICAL CORPS (UK)'S GOALS

- To mobilise sufficient resources to realise International Medical Corps (UK)'s charitable objects and humanitarian mission.
- As per International Medical Corps (UK)'s Memorandum of Association, the objects of the organisation are to:

  a) relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and programmes, and to promote good health and preserve lives by providing medical supplies and trained medical professionals particularly, in areas that have suffered through war and conflict; and

  b) further the activities of International Medical Corps, a non-profit corporation registered in California USA, as are exclusively charitable and that may advance the objective set in (a) above.

International Medical Corps (UK)'s mission is to provide humanitarian assistance, healthcare and training to communities affected by disasters, conflict and poverty, so they can return to self-reliance.

During the reporting period, the Charity continued to report on six main areas of work:

- Strengthening health capacity
- Emergency response and preparedness
- Mental health and psychosocial support
- Woman and children's health
- Clean water, sanitation and hygiene
- Nutrition and food security

MONITORING OF ACTIVITIES

In International Medical Corps, ongoing project monitoring is an essential component of project management; for assessing progress, identifying gaps, and developing responsive strategies to keep track of progress against set targets. Monitoring of project activities at International Medical Corps aims to achieve three objectives: 1) assess progress of project activities/outputs; 2) identify gaps/weaknesses during project implementation and any problems or obstacles encountered; and 3) provide targeted and relevant monitoring data that allows IMC to develop recommendations throughout the life of the project.

International Medical Corps (UK) continuously monitors programme activities through effective internal monitoring, supervision and reporting mechanisms. It provides regular programmatic and financial reports on project activities and progress as required by all its institutional donors and other stakeholders. Additional internal programme reports and departmental updates supplement this information for day-to-day management. The Charity also maintains automated recruitment, financial and programme records to track performance and grant compliance.

Routine project monitoring is conducted at the field levels by the project technical and M&E teams through standard monitoring and reporting procedures and forms to monitor services and goods provided by International Medical

Corps. Monitoring activities include monitoring of quality of services and goods provided, either through supportive supervision, observation, record review, alternative methods, and teams use standardised checklists and tools that are appropriate for the context. Some activities that are particularly sensitive may be monitored indirectly, such as through client satisfaction surveys or review of anonymised case management files by the appropriate personnel. The project team focuses more on the technical aspects of services provision to ensure quality and compliance with minimum international standards. However, the M&E team conducts independent monitoring of services International Medical Corps provides at various facilities, including health facility, rehab centre, child protection centre, women centre, and MHPSS. The findings from monitoring are regularly shared with the project team for their follow-up and corrective measures.

The International Programmes team through the technical teams reinforces supportive supervision and monitoring and communications systems and procedures to track results. International Programmes collaborates with the Monitoring and Evaluation (M&E) unit in the collection and analysis of programme achievements and addresses issues to progress in real time through visits, calls and written communications. Monthly calls with country teams also review the achievement of project targets and progress, spending and procurement, as presented by project managers and their technical, financial and logistics colleagues. In addition, International Programme Senior Directors, Directors, Programme Managers and Programme Officers maintain regular communications with country teams to identify and address risks and provide support, working with regional platform department focal points.

Staff, in various capacities, visited country programmes during the year to provide relevant technical support. During the reported period, countries visited included Afghanistan, Cameroon, Ethiopia, Kenya, Jordan, Lebanon, Poland, Pakistan, Somalia, South Sudan, Sudan, Somalia, Syria, Ukraine and Venezuela where we provided field teams with programmatic and technical support.

The Charity's affiliate delivers programmes through four geographical, cross-functional platforms (Middle East, Central & Southern Africa, North & East Africa, Asia and Europe, Global), which include dedicated interdisciplinary teams of specialists in programmes, technical, finance, resource development, communications, logistics and supply chains, human resources and security. Functional specialists provide effective and efficient business support to field programmes and facilitate speedy and effective responses to disasters in the respective regions.

International Medical Corps (UK)'s Managing Director is a member of the global executive leadership team, and advises and helps evaluate opportunities, challenges and risks associated with implementation of programmes undertaken by the Charity's US affiliate. In addition, International Medical Corps (UK) relies on its US affiliate's Internal Audit, Compliance and Safeguarding Task Force's independent field reviews, evaluations and reports. Risk assessment and compliance issues are flagged in various functional units' regular reviews, and critical issues are reported back to the senior leadership team. Senior International Medical Corps' staff brief the trustees during board meetings on key developments and on risk mitigation measures that have been put in place.

STATEMENT ON CONTRIBUTIONS BY VOLUNTEERS

International Medical Corps (UK) continues to actively encourage members of the public to become involved in its work, both in the UK, to raise awareness of international development issues, and overseas, to support its operations.

STRATEGIC REPORT

ACHIEVEMENTS AND PERFORMANCE

Organisational Performance

Over the course of the financial year to June 2023, International Medical Corps (UK) provided assistance valued at $121,596,255 (2022: $110,578,457) to vulnerable populations in 23 countries (2022: 23). This included the distribution of donated medical and other supplies valued at $10,820,038 (2022: $16,090,353).

International Medical Corps (UK) supported, through its US affiliate, 2,760 staff positions in 23 countries (2022: 2,546 staff positions in 23), providing essential services to beneficiaries. Globally, International Medical Corps' activities served 20.4 million unique beneficiaries in 2022.* Globally, International Medical Corps' activities served 10.2 million direct beneficiaries between 1 July 2022 and 31 December 2022 and 7.9 million direct beneficiaries between 1 January 2023 and 30 June 2023.*

International Medical Corps (UK) contributed **32%** of global funding to this mutual achievement.

*Please note that beneficiary totals may overlap across calendar years

SUMMARY OF MEASURES USED TO ASSESS INTERNATIONAL MEDICAL CORPS (UK)'S PERFORMANCE

International Medical Corps (UK) continues to use a Balanced Business Scorecard specifying the following main objectives.

GOAL	COMMENT
Timely and efficient delivery of programme activities	The Charity successfully delivered activities of the value of $121M (2022: $111M).
Control over corporate costs	The Charity has managed corporate expenditure within the provisions of its annual budget and according to the terms specified by its donors.
Diversification of income	The Charity continued to be funded by a wide range of government and UN agencies, as well as private sector donors.

RISK: 'Minimise risk whilst anticipating threats'

GOAL	COMMENT
Strengthened systems for identifying and raising areas of concern in a timely manner to the senior management team	The Charity continued to maintain its risk register and controlled the field operations through regular reviews, cross-team participation and reference to the Charity's scorecard mechanism. The Charity's US affiliate continues to implement, at field and HQ levels, Logistics Management Software to strengthen assets, procurement and inventory management and controls. Systems enable the creation of exception reports highlighting any potential gaps or risks to be addressed. In addition, HQ Logistics & Supply Chain team is maintaining, in collaboration with the field teams, a register to anticipate, map potential risks and determine / implement mitigation measures. Risks identified as major are elevated to the appropriate management group. In addition, the Charity has worked with its US affiliate to administer and reinforce its safeguarding mechanisms. The Charity's implementing affiliate also implemented a Human Resources System (HRIS) used currently for talent acquisition, staff performance management and training. The HRIS is a global integrated platform used to streamline recruitment, learning, performance management and compensation process and management.
Mitigate financial loss through strict controls	Strict controls were maintained and updated as necessary to ensure adherence to internal procedures, requirements of donors and the requirements of the Charity Commission. Automation and strict control over the treasury platform have ensured minimisation of foreign exchange and currency exposure risks during turbulent global economic environment.

PEOPLE: 'Always supporting its people to develop professionally while delivering the Charity's mission.'

GOAL	COMMENT
Staff are motivated to achieve and exceed performance expectations	Charity continues to use performance management and development system which provides platform for managers and their employees to engage in goal setting, performance discussions and provide feedback. The Charity believes that managing employee performance effectively is fundamental to staff motivation, engagement and helping them realise their full potential. Staff continue to receive in-house and external trainings on donor regulations and industry best practices to ensure appropriate oversight. Wellbeing initiatives including flexible working and specifically remote working arrangements are in place to ensure staff safety and wellbeing.
Improve on the creation of opportunities for effective intercompany collaboration and improved quality of programmes	Intercompany, interdepartmental, HQ and field collaborations were enhanced to consider opportunities and challenges in wider contexts. Each International Medical Corps (UK) team worked closely with its peers in the US to ensure alignment where appropriate.

OPERATIONS: 'Delivering the mission efficiently, through discipline and thoroughness.'

GOAL	COMMENT
Regular review of programme performance	Programme staff at all levels monitor risks to implementation on an ongoing basis, to ensure effective programme delivery. The Charity's affiliate's cross-functional platforms continue to improve the effectiveness and efficiency of operational support to field programmes, as well as facilitate speedy and effective responses to disasters in the respective regions.
Increased monitoring and evaluation activities, training and programme development	Programme staff collaborate with other departments within the cross-functional platforms in decision making related to country programme issues. During the reporting period, the Charity, in collaboration with its US affiliate, submitted 171 proposals. The Charity's US affiliate's Internal Audit conducted in-country audits in Zimbabwe, Ethiopia, Central African Republic, Yemen and Cameroon.
Secure multi-year grants from donors	Ongoing discussions were had with FCDO, Global Affairs Canada (GAC), Ministry of Foreign Affairs France and other donors on multi-year grants.

DONORS: 'Accountable to a growing group of donors'

The Global Programme Unit continued to provide due diligence on the Charity's grants and contracts to ensure compliance with the standards and regulations specified by its donors, with support from the US affiliate's Compliance team and the Internal Audit. Additionally, International Medical Corps continues to be a member of the Core Humanitarian Standard (CHS) Alliance and continues to monitor its compliance with the Humanitarian Accountability Framework.

GOAL	COMMENT
Improve high-level donor interaction	Robust interaction with International Medical Corps (UK)'s donors continued at all levels throughout the year.
To improve on effective donor intelligence	Regular communications with donor agencies were maintained, to ensure that relevant opportunities were pursued. Active participation in UK NGO forums and direct communication with FCDO were prioritised, to ensure that humanitarian relief is prioritised following the UK's exit from the European Union and other governmental efforts to shape the sector.
Compliance with reporting deadlines and improved performance on complementary information requests	The Charity remains compliant with donor reporting requirements.

INNOVATION: 'Challenging the norm to minimise inefficiency and maximise impact'

GOAL	COMMENT
Encouraging a culture of creativity and problem solving	Organisation-wide information management systems are being used to obtain real-time reports integrating key indicators across finance, programme delivery, human resources and logistics, to ensure effective implementation of programmes. A variety of projects continue, with the aim of improving the efficiency of key areas affecting delivery of programme activities. Cross-functional platforms also ensure that real-time information is available and applied in decision making and operations.

External representation and engagement

International Medical Corps (UK)'s Technical Unit members continued to represent the Charity in forums both within the UK and abroad, and make contributions to global discussions on sectoral issues.

INTERNATIONAL MEDICAL CORPS (UK)'S HUMANITARIAN ASSISTANCE FOR THE FINANCIAL YEAR 2022/2023

EMERGENCY RESPONSE AND PREPAREDNESS

There have been several global disasters this year and in 2022, but with your support, we had the resources to respond rapidly. In Ukraine—embroiled in a war with Russia since February 2022—we have so far reached more than 9 million people with health-related supplies, services and training. We also responded to natural disasters worldwide, including the devastating earthquake in Afghanistan that killed more than 1,000 people, the severe flooding caused by an extreme monsoon season in Pakistan that destroyed more than 2 million homes and affected one in seven Pakistanis, and the two deadly earthquakes that struck Türkiye and Syria earlier this year, killing more than 56,000 and displacing nearly 6 million. We also delivered lifesaving services in accessible areas in Sudan when clashes between Sudan's army and rebel forces killed and injured many. We continue to help those affected by these disasters and conflicts.

HEALTHCARE SERVICES

We provided primary and secondary healthcare services, or some kind of health assistance, to more than 1 million people in Afghanistan, Cameroon, the Democratic Republic of Congo, Jordan and Syria. In Ethiopia and the Central African Republic (CAR), we provided outpatient consultations to 175,730 people. Women's and children's health is a priority at International Medical Corps. We offered 25,733 antenatal and postnatal consultations to women in CAR, Nigeria and South Sudan.

NUTRITION AND FOOD SECURITY

In response to the ongoing hunger crisis in the Horn of Africa and the surrounding region, we screened more than 1 million children and pregnant and lactating women for malnutrition in Afghanistan, Cameroon, Ethiopia, Nigeria, South Sudan and Syria. And in Ethiopia, we trained 38,988 mothers and caregivers on infant and young-child feeding practices.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

As part of our mental health services, we provided MHPSS consultations/counselling to 113,455 people in Afghanistan, Ethiopia, CAR, South Sudan and Syria. Our MHPSS services, which include case management, counselling sessions, consultations and awareness sessions, reached more than 106,000 people in Afghanistan, Jordan, Mali and Somalia.

WATER, SANITATION AND HYGIENE (WASH)

Our WASH team undertakes various activities to ensure clean and accessible water for all. After the devastating flooding in Pakistan in 2022, we distributed 140,000 water purification tablets, 1,600 dignity kits and 1,000 hygiene kits in the flood-affected districts. In Somalia, we distributed hygiene kits to 27,000 people and constructed 280 latrines, while in Ethiopia, we reached 675,267 people with hygiene awareness messaging. In Yemen, we improved emergency and sustainable water supply access for 13,632 people, provided 645,000 litres of treated water to 12 internally displaced camps, and trained 40 Community Health Volunteers on hygiene awareness and promotion.

GENDER-BASED VIOLENCE (GBV) PREVENTION AND RESPONSE

We provide remote and in-person training to help communities understand various topics related to GBV, such as causes, contributing factors and consequences. In Poland, we completed 22 training sessions where more than 300 people participated. In Jordan's Azraq and Za'atari camps and in Irbid and Mafraq, our Child Protection Counsellors provided 757 individual counselling sessions on bullying and emotional distress. In addition, we reached 856,904 women and girls with messaging on GBV prevention and response in Cameroon, Ethiopia, Mali, Nigeria and South Sudan.

INSTITUTIONAL DONOR SUPPORT FOR INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

To fulfil its mission and to undertake the abovementioned activities, International Medical Corps (UK) received grants from the following private and international donor agencies during the year. The Charity gratefully acknowledges their support.

ACF Canada	Action Against Hunger, Canada
DAHW	Deutsche Lepra- und Tuberkulosehilfe e.V.
FCDO (formerly DFID)	Foreign, Commonwealth & Development Office (formerly- Department for International Development UK)
EC	European Commission
France MOFA	France Ministry of Europe and Foreign Affairs
GAC	Global Affairs Canada
GIZ	The Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
IOM	International Organization for Migration
IRC	The International Rescue Committee
Islamic Development Bank	Islamic Development Bank
King Salman Humanit. Aid	King Salman Humanitarian Aid and Relief Center
MENTOR	MENTOR Initiative
MINBUZA	Ministry of Foreign Affairs Netherlands
MOFAIC UAE	Ministry of Foreign Affairs and International Cooperation, UAE
Plan Int. Australia	Plan International Australia
Plan Int. Netherlands	Plan International Netherlands
Save the Children	Save the Children
The Power of Nutrition	The Power of Nutrition
UNDP	United Nations Development Fund
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
United Group BV	United Group BV
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WFP	World Food Programme
WHO	World Health Organisation
WV	World Vision
Welthungerhilfe	
ZOA Netherlands	Stichting ZOA

PRIVATE DONOR SUPPORT OF INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES	
Andor Charitable Trust	Bloomberg
Fulmer Trusts' donation	Ashburnham Village
GM Morrison Charitable Trust	Medik8
Brownlee Charitable Trust	Winchester Rotary Club
Take Two Software	St Cross Hospital
Vitol Foundation	Tides Foundation
Church of Jesus Christ Latter Day Saints (LDS)	AstraZeneca UK Limited

FUNDRAISING, COMMUNICATIONS AND MARKETING ACTIVITIES

During the year, International Medical Corps (UK) has received donations from institutional donors, corporates, trusts and foundations, as well as private individuals. International Medical Corps (UK) and its US affiliate seek to raise funds to sustain its programmes across all countries where they work, as well as funds to fill gaps, support immediate emergency responses and implement innovative programmes.

The Charity responds to requests for proposals issued by institutional donors such as FCDO, UN agencies and by private sector donors. The Charity works closely with its affiliate to raise funds from corporations and foundations for emergency response activities and ongoing programmes. International Medical Corps (UK) undertakes due diligence on both the financial and reputational dealings of potential partners before accepting donations.

International Medical Corps (UK) also utilises multiple fundraising channels, with the goal of raising funds from as diversified a base of supporters as possible. These channels include annual giving programmes and online appeals, in addition to outreach through social media, the website and other reputable online platforms that display clear terms and conditions, including General Data Privacy Regulations (GDPR) compliance.

International Medical Corps (UK) and its affiliate did not employ any commercial fundraising firm to solicit individuals via telephone or door to door during the reported period. Protecting vulnerable people and other members of public is a key consideration in cultivating a supporter base for the Charity's work. The Charity and its US affiliate actively monitor all efforts to raise funds from the public, in particular vulnerable people. International Medical Corps (UK) did not receive any complaints about its fundraising activities during the reported period.

Although International Medical Corps (UK) is not registered with the UK Fundraising Regulator, the Charity has regard for and adheres to the principles and practices set out in the Code of Fundraising Practices. International Medical Corps (UK) and its affiliate are in compliance with GDPR and protect individuals' personal information. The communications team of International Medical Corps (UK) monitors and moderates our email and social media accounts, and any complaints or concerns regarding fundraising activities are reviewed and responded to by senior management. Fundraising activities also are monitored by the senior leadership of International Medical Corps (UK), which shares regular reporting with the trustees.

INVESTMENT POLICY

Due to the nature of the Charity's programmes and funding cycles of its major donors, the Charity keeps its financial assets liquid.

RISK MANAGEMENT

A culture of risk management and mitigation is embedded in the organisation. A risk register is used by management and the trustees to examine and monitor risks to the organisation.

The register identifies and prioritises risk in relation to the likelihood and the level of impact it would have on the organisation and outlines measures in place to safeguard the company's assets against such risk. The risk categories are defined below:

- Organisational risk;
- Strategic and management risk;
- Operational risk;
- People;
- Financial risk.

The board of trustees seeks to ensure that systems are in place to monitor, manage and mitigate International Medical Corps (UK)'s exposure to major risks which are reviewed periodically. It is also recognised that the nature of the Charity's work requires active acceptance and management of risks when undertaking activities in order to achieve the objectives of the Charity.

The key business risks to the Charity continue to include the unexpected loss of funding from key donor organisations and major disruptions to programmes in countries resulting from factors either within or beyond the organisation's control. The Board of Trustees for International Medical Corps (UK) continues to implement measures to mitigate these risks, including review of the reserves policy, the introduction of new technology to ensure that assets are safeguarded to the extent possible, the continued reference to a balanced business scorecard and reviews into the Charity's funding base. These are further summarised in the table below:

KEY RISKS	TRUSTEES' PLANS TO MITIGATE THE RISK
Insufficient unrestricted reserves	The Charity continues to make sustained efforts to expand its supporter base. The Charity intends to continue to work with its institutional donors to continue delivering activities in the most hard-to-reach areas, thereby receiving contributions towards its corporate costs, and work with its US affiliate to keep effective control of its cost structure.
Adverse payment terms offered by donors affecting the liquidity of the Charity	Charity's liquidity position is closely monitored, and close collaborations are maintained with donor stakeholders to ensure life-saving activities are not impacted by liquidity issues.
Future funding opportunities affected by Brexit and developments in the UK's Foreign and Development policies	International Medical Corps (UK) continues to pursue European Union funding streams where eligible. At the same time the Charity continues to engage with FCDO & other institutional donors on existing and potential portfolios.
Inadequate assessment, resulting in poor programming decisions and implementations	International Medical Corps continues to invest in country-specific assessments, to ensure a relevant and quality orientated programme design.
Exposure to movement in foreign currency rates, affecting international operations	The Charity's principal currency exposures arise from translations of European and other donor monies received into US dollars, the main operational currency advanced to its field missions overseas. The continued fluctuations of currencies against USD can adversely affect International Medical Corps (UK)'s ability to deliver programmes sustainably. Within this context, global treasury management, consisting of International Medical Corps' and International Medical Corps (UK)'s senior staff, created in July 2018, continues to ensure effective use of donor funds.
Operations in sanctioned countries through the Charity's US affiliate	Donors and stakeholders are kept up to date with developments and emerging risks affecting programme implementation in sanctioned countries.

FINANCIAL REVIEW

Statement of Principal Financial Management Policies Adopted in the Year

It is the policy of International Medical Corps (UK) to maintain effective financial and other programmatic management systems with its US affiliate. Efficient controls, budgeting, accounting, financial reporting and auditing systems are employed throughout the organisation, to meet the management and programmatic objectives at various levels, and to be accountable to its donors and supporters.

This year, International Medical Corps (UK)'s total income was $125,352,674 (2022: $121,164,472). Of this, the total cash income received from institutional donors and supporter base was $112,677,278 (2022: $102,485,905). International Medical Corps (UK) was able to secure $12,315,666 (2022: $16,385,054) of gifts-in-kind, comprising food, medicines and supplies.

During the reporting period, International Medical Corps (UK) supported training and assistance programmes in 23 (2022: 23) countries through its US affiliate. The Charity's programme expenditures can be disaggregated into the following humanitarian contexts.

	FY 2023	FY 2022
Strengthening health capacity	30%	37%
Emergency response and preparedness	34%	23%
Mental health and psychosocial support	3%	1%
Women & children's health	12%	13%
Water, sanitation and hygiene	8%	3%
Nutrition & food security	13%	23%

Financial Position

The Charity had restricted funds of $29,447,322 as of 30 June 2023 (2022: $25,841,751) and unrestricted funds of $885,850 as of the same date (2022: $749,981). International Medical Corps (UK) receives relevant institutional funding in meeting its restricted charitable expenditure. The balance of free reserves as of 30 June 2023 is $815,000 (2022: $688,941). Free reserves are unrestricted funds less the net book value of the fixed assets.

International Medical Corps (UK) committed resources from unrestricted reserves to provide adequate support for growth in charitable activities and to ensure compliance with growing donor regulations. International Medical Corps (UK) continues to rely on its US affiliate's commitment to meet shortfalls in programmes that do not provide full overhead cost recovery.

Reserves Policy

International Medical Corps (UK) requires reserves to:

- fund working capital requirements in the event of unexpected delays in receiving donor funds, to ensure continuity in implementation in the field;
- fund unplanned expenditures arising from programme-related contingencies, such as unforeseen events delaying implementation and leading to no–cost-extensions, and to manage exposure to exchange rate fluctuations;
- finance any gap in funding for projects of strategic importance to the Charity and its US affiliate; and
- fund requirements for additional corporate costs to maintain high-quality assurance over the organisation's programmes.

The Charity aims to maintain a level of unrestricted reserves equivalent to six month's operating expenditure of the Charity's HQ offices, which is $815,000 for FY 2023–24 and this is currently being achieved. Available unrestricted-fund balances in excess of the operational reserves' requirements are utilised to meet the other purposes as outlined above. Operating expenditure considered for reserves excludes transfers made for overseas programmes.

International Medical Corps (UK) continues to apply assessment of new opportunities and accepts projects that support its overhead costs required to maintain acceptable oversight of programme implementation, therefore mitigating the risk of insufficiently resourced projects. International Medical Corps (UK) considers accepting projects that do not fully cover its costs with its US affiliate to ensure sustainability of coverage of any gap in funding. As of 30 June 2023, the Charity held restricted reserves of $29,447,322 (2022: $25,841,751). This represents the total funds received for specific projects that are yet to be spent at 30 June 2023, including projects responding to Syria and various other crisises. The increase in restricted funds in the reported period is due to a number of projects starting in the last months of the reported period. These funds have been excluded from specific reserves policy, as they are not for the purposes of general working capital.

As of June 2023, the balance of free reserves was $815,000 (2022: $688,941). The Charity is resolved to maintain an adequate level of reserves and is working with its affiliate to implement a feasible strategy for marketing and public awareness of its work, to cultivate support, but accepts that in the current economic climate this may be difficult. The Charity will respond to the risks identified above as follows.

- In collaboration with its affiliate, the Charity profiles income streams and undertakes projects with acceptable terms. Also, it looks to its affiliate to cover programme funding gaps that the affiliate has reviewed and considered as acceptable.
- The Charity and its affiliate continue to closely monitor the implementation context of quality programmes around the world and resolve operational challenges with its supporters partners.
- The Charity is part of global treasury platform.
- The Charity's operational flexibility has enabled it to address risks caused by political changes, including Brexit and the effects of the pandemic.

Section 172 Statement

International Medical Corps (UK) complies with section 172 under the Companies Act 2006, which requires our Board of Trustees act in the way that they consider, in good faith, what would be most likely to promote the International Medical Corps (UK)'s impact for our beneficiaries, while considering the long-term effect of decisions on International Medical Corps (UK)'s stakeholders, which includes its beneficiaries, employees, suppliers, partners, the communities it works in and the environment.

Engagement with employees.
International Medical Corps (UK)'s internal stakeholders are its employees. Enhancing employee engagement is an integral part of the culture of the Charity and its implementing affiliates. Senior management are actively involved in the engagement of colleagues through

regular electronic communications, staff meetings and periodic Town Hall meetings that include employees working across the world. The trustees receive updates on employee matters from the Managing Director during board meetings. International Medical Cops (UK) undertakes regular salary reviews to ensure that salaries for the UK contracted staff are competitive within the sector in the UK.

Engagement with Other Stakeholders

- Our beneficiaries. As a recognised first responder, we provide emergency relief, often within hours, to those hit by disaster, disease and conflict, no matter where they are, no matter what the conditions. International Medical Corps (UK) continuously monitors programme activities through effective internal reporting. We have a strict Code of Conduct and safeguarding processes in place to ensure the security and safety of our beneficiaries.
- Our partners in project delivery. Our partnerships are critical to ensuring that we deliver programmes in the most hard-to-reach locations. We collaborate with other international and local NGOs when these partnerships bring greater benefits to the people we serve.
- Our supporters and donors. Our donors are primarily institutional, including the UK Foreign, Commonwealth and Development Office (FCDO), UN agencies, Global Affairs Canada and many others. We are committed to delivering timely, high-quality, lifesaving humanitarian assistance, and to reporting on the impact of our work. We report to our donors, and publicise our work on our website, social media and other platforms.
- Our suppliers. We are committed to eradicating modern slavery and trafficking in persons and engage with our suppliers to promote the highest standards.
- Our wider communities and the environment. Our policies and procedures include safe environmental protection in the different countries where we work. Our programmes aim to reduce excess morbidity and mortality associated with potential exposure to environmental factors. For example, on a project-by-project basis, our teams assess the risks associated with healthcare waste and with the disposal of expired medicines.

INTERNATIONAL MEDICAL CORPS (UK) PLANS FOR 2022/2023

International Medical Corps (UK) plans are to:

1. expand opportunities for applied research to improve the impact of providing healthcare for vulnerable communities, in line with its mission;
2. achieve institutional income of $125million during the 12-month period to 30 June 2024;
3. continue to expand the organisation's number of partnerships and non-traditional donors;
4. expand the organisation's global profile through increased awareness of its activities;
5. review and strengthen current internal processes employed by its US affiliate, with a view to increasing organisational efficiency; and
6. continue to work with its US affiliate to apply new technology and systems that mitigate risks specific to the sector in general.

The Trustees' Report incorporating the strategic report is approved by the trustees and signed on their behalf by:

Andrew Geczy



Approved by the board of trustees on:

12 December 2023

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF INTERNATIONAL MEDICAL CORPS (UK)

OPINION

We have audited the financial statements of International Medical Corps (UK) (the 'charitable company') for the year ended 30 June 2023 which comprise the statement of financial activities, the balance sheet, and statement of cash flows, the principal accounting policies and the notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 30 June 2023 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

CONCLUSIONS RELATING TO GOING CONCERN

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

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

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

OTHER INFORMATION

The trustees are responsible for the other information. The other information comprises the impact report for International Medical Corps and its affiliates worldwide included in pages 4 to 26, together with information included in the trustees' report, including the strategic report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

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

We have nothing to report in this regard.

OPINIONS ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006

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

- the information given in the trustees' report, which is also the directors' report for the purposes of company law and includes the strategic report, for

the financial year for which the financial statements are prepared is consistent with the financial statements; and

- the trustees' report, which is also the directors' report for the purposes of company law and includes the strategic report, has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report including the strategic report. We have nothing to report in respect of the following matters in relation to which the 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.

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the trustees' responsibilities statement, the trustees (who are also the directors of the charitable company 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, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- The engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities, and skills to identify or recognise non-compliance with applicable laws and regulations;
- We identified the laws and regulations applicable to the charitable company through discussions with management and from our knowledge and experience of the charity sector;
- We focused on specific laws and regulations in both the UK and overseas, which we considered may have a direct material effect on the financial statements or the activities of the charitable company. These included but were not limited to the Charities Act 2011, the Companies Act 2006, Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable to the United Kingdom and Republic of Ireland (FRS 102) (effective 1 January 2019);
- We have assessed the processes in place to ensure that the implementors of programmes are aware of and comply with UK laws and regulations;
- We have assessed the processes in place to ensure that that in country laws and regulations are followed; and
- We assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and review of minutes of trustees' meetings.

We assessed the susceptibility of the charitable company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- Making enquiries of management as to where they considered there was susceptibility to fraud,
- their knowledge of actual, suspected, and alleged fraud; and
- Considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.

To address the risk of fraud through management bias and override of controls, we:

- Performed analytical procedures to identify any unusual or unexpected relationships;
- Tested and reviewed journal entries to identify unusual transactions;
- Tested the authorisation of expenditure;
- Assessed whether judgements and assumptions made in determining the accounting estimates were indicative of potential bias; and
- Investigated the rationale behind significant or unusual transactions.

In response to the risk of irregularities and noncompliance with laws and regulations, we designed procedures which included, but were not limited to:

- Agreeing financial statements disclosures to underlying supporting documentation;
- Reading the minutes of meetings of trustees; and
- Enquiring of management as to actual and potential litigation and claims.

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance. Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities is available on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

USE OF OUR REPORT

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 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 auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Edward Finch (Senior Statutory Auditor)

For and on behalf of Buzzacott LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL



23 January 2024

STATEMENT OF FINANCIAL ACTIVITIES
30 JUNE 2023

	Notes	Unrestricted funds $	Restricted funds $	2023 Total funds $	Unrestricted funds $	Restricted funds $	2022 Total funds $
Income and expenditure							
Income from:							
Donations and legacies	1	811,526	13,033,107	**13,844,633**	3,371,001	17,889,589	21,260,590
Charitable activities	2	–	111,508,041	**111,508,041**	–	99,903,882	99,903,882
Total income		**811,526**	**124,541,148**	**125,352,674**	3,371,001	117,793,471	121,164,472
Expenditure on:							
Raising funds	3	13,598	1,381	**14,979**	9,500	21,203	30,703
Charitable activities	4	662,059	120,934,196	**121,596,255**	3,191,901	107,386,556	110,578,457
Total expenditure		**675,657**	**120,935,577**	**121,611,234**	3,201,401	107,407,759	110,609,160
Net income/(expenditure)		135,869	3,605,571	3,741,440	169,600	10,385,712	10,555,312
Net movement in funds		135,869	3,605,571	**3,741,440**	169,600	10,385,712	10,555,312
Fund balances brought forward at 1 July 2022		749,981	25,841,751	**26,591,732**	580,381	15,456,039	16,036,420
Fund balances carried forward at 30 June 2023		885,850	29,447,322	**30,333,172**	749,981	25,841,751	26,591,732

The analysis of income and expenditure between funds for the comparative period is shown in the notes to the financial statements.

All of the Charity's activities derived from continuing operations during the above two financial periods.

The Charity has no recognised gains and losses other than those shown above.

BALANCE SHEET
30 JUNE 2023

	Notes	2023 $	2023 $	2022 $	2022 $
Fixed Assets					
Tangible assets	8		70,850		61,040
Current assets					
Stock	9	2,025,295		529,667	
Debtors	10	10,446,496		14,582,392	
Cash at bank and in hand		18,055,618		11,665,737	
		30,527,409		26,777,796	
Creditors: amounts falling due within one year	11	(265,087)		(247,104)	
Net current assets			30,262,322		26,530,692
Total net assets			30,333,172		26,591,732
The funds of the charity					
Restricted funds	12		29,447,322		25,841,751
Unrestricted funds			885,850		749,981
			30,333,172		26,591,732

Approved by the trustees and signed on their behalf by:

Andrew Geczy, Chair



Approved on: 12 December 2023

International Medical Corps (UK): A company limited by guarantee, Company Registration No. 04474904 (England and Wales)

STATEMENT OF CASH FLOWS
YEAR TO 30 JUNE 2023

	Notes	2023 $	2022 $
Cash flows from operating activities:			
Net cash provided by operating activities	A	6,433,031	3,443,942
Cash flows from investing activities:			
Purchase of tangible fixed assets		(43,150)	(62,331)
Net cash used in investing activities		(43,150)	(62,331)
Change in cash and cash equivalents in the year		**6,389,881**	3,381,611
Cash and cash equivalents at 1 July 2022	B	**11,665,737**	8,284,126
Cash and cash equivalents at 30 June 2023	B	**18,055,618**	11,665,737

Notes to the statement of cash flows for the year to 30 June 2023

A Reconciliation of net movement in funds to net cash used in operating activities

	2023 $	2022 $
Net movement in funds (as per the statement of financial activities)	3,741,440	10,555,313
Adjustments for:		
Depreciation charge	33,340	21,765
Loss on disposal of fixed assets	_	9,835
(Increase) in stocks	(1,495,628)	(294,700)
Decrease in debtors	4,135,896	(6,866,044)
Increase in creditors	17,983	17,773
Net cash provided by operating activities	**6,433,031**	3,443,942

B Analysis of cash and cash equivalents

	2023 $	2022 $
Cash at bank and in hand	**18,055,618**	11,665,737
Total cash and cash equivalents	**18,055,618**	11,665,737

PRINCIPAL ACCOUNTING POLICIES 30 JUNE 2023

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are laid out below.

BASIS OF PREPARATION

These financial statements have been prepared for the year to 30 June 2023.

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to these financial statements.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (Charities SORP FRS 102) ((effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The accounts are presented in US dollars and rounded to the nearest dollar. The charity constitutes a public benefit entity as defined by FRS 102.

CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGEMENT

Preparation of the financial statements requires the trustees to make significant judgements and estimates.

The items in the financial statements where these judgements and estimates have been made include:

- The estimation of the value of donated goods distributed in the year and undistributed at the year-end.
- The estimation of the recoverability of accrued income balances.
- The estimation of unrealised foreign exchange difference.
- The treatment of intercompany balances with the charity's implementing affiliates.

ASSESSMENT OF GOING CONCERN

The trustees have assessed whether the use of the going-concern assumption is appropriate in preparing these financial statements. The trustees have made this assessment in respect of a period of one year from the date of approval of these financial statements.

The Charity has free reserves of $815,000 (2022: $688,941), which is above its target as per the reserves policy. The trustees have continued to use the going-concern assumption based on the relationship with its affiliate to cover programme funding gaps and provide cash-flow bridging. The trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

INCOME

Income is recognised in the statement of financial activities when the charity is entitled to the income, the amount can be measured with accuracy and it is probable that the income will be received.

Donations and gifts in kind are included in full in the statement of financial activities when receivable.

Grants receivable are credited to the statement of financial activities in the year in which they are receivable.

DONATED GOODS AND SERVICES

Donated goods, typically comprising medical and food supplies, are recognised as income when the goods are received. Amounts are included in expenditure when the goods are distributed. The balance of goods received but not distributed are included as a stock balance at the year end.

Food and other non-pharmaceutical stocks are valued according to the value placed on the items by the donor.

Pharmaceutical goods received are accounted for at fair value to the Charity with reference to market sources.

EXPENDITURE AND THE BASIS OF APPORTIONING COSTS

Expenditure is included in the statement of financial activities when incurred and includes attributable VAT, which cannot be recovered.

Expenditure comprises the following:

a) Costs of raising funds include the salaries, direct costs and overheads with generating donated income.

b) Costs of charitable activities comprise expenditure on the charity's primary charitable purposes as described in the trustees' report. Such costs include:

   i. Technical advisory services

   ii. Programme management services

   iii. Gifts in kind of donated goods and services

   The majority of costs are directly attributable to specific activities. Certain shared costs are apportioned to activities in furtherance of the objects of the charity. These costs are allocated in the same proportion as directly attributable expenditure.

c) Support costs comprise the costs incurred by finance, human resources, communications and IT departments, and the trustee costs, which are directly attributable to the management of the Charity's assets, organisational procedures and the necessary legal procedures for compliance with statutory requirements.

TANGIBLE FIXED ASSETS

Items of equipment are capitalised when the purchase price exceeds $500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets capitalised are reviewed for impairment if circumstances indicate that their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life:

- Computers – three years
- Furniture, fixtures and fittings – five years
- Servers – five years

Vehicles and equipment for use in overseas operational programmes are not capitalised but charged in full to expenditure when purchased. This is because the expected useful life is significantly reduced in such programmes and is generally less than one year for the majority of these assets.

FUND ACCOUNTING

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund together with a fair allocation of management and support costs.

Unrestricted funds are donations and other income raised for the objects of the charity.

OTHER OPERATIONAL CURRENCIES

Transactions in US dollars are recorded at transaction value, with no exchange-rate gain or loss. Transactions in other operational currencies are recorded at the calculated monthly average rate. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. Differences arising on retranslation are charged to the statement of financial activities.

LEASED ASSETS

Rentals payable under operating leases, where substantially all the risks and reward of ownership remain with the lessor, are charged to the statement of financial activities over the period of the lease term.

PENSION COSTS

International Medical Corps (UK) sponsors a group personal pension plan. All eligible employees can participate in the scheme and contributions are based on a percentage of annual gross salary.

International Medical Corps (UK) contributes between 3% to 7% of eligible employees' gross earnings. Employees are immediately fully vested in contributions made on their behalf. The Charity is fully staged in its auto-enrolment obligations. Employees make additional contributions to meet legal requirements and should they wish to do so. Pension costs represent the employer's contributions payable during the year.

DEBTORS

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. They have been discounted to the present value of the future cash receipt where such discounting is material.

CASH AT BANK AND IN HAND

Cash at bank and in hand represents such accounts and instruments that are available on demand or have a maturity of less than three months from the date of acquisition. Deposits for more than three months but less than one year have been disclosed as short-term deposits. Cash placed on deposit for more than one year is disclosed as a fixed asset investment.

CREDITORS AND PROVISIONS

Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

FINANCIAL INSTRUMENTS

The Charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the Charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

BASIC FINANCIAL ASSETS

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price, including transaction costs, and are subsequently carried at amortised cost using the effective interest method, unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts, discounted at a market rate of interest, if material. Financial assets classified as receivable within one year are not amortised.

BASIC FINANCIAL LIABILITIES

Basic financial liabilities, including creditors, bank loans, loans from fellow group companies. Financial liabilities classified as payable within one year are not amortised.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

1 Donations and legacies

	Unrestricted funds $	Restricted funds $	**2023 Total $**
Donation from International Medical Corps	87,217	237,632	324,849
Private grants for projects	–	473,861	473,861
Other Unrestricted Donations	695,376	–	695,376
Donated supplies	–	12,315,666	12,315,666
Donated services	_	5,948	5,948
Interest Income	28,933	–	28,933
2023 Total funds	**811,526**	**13,033,107**	**13,844,633**

	Unrestricted funds $	*Restricted funds $*	*2022 Total $*
Donation from International Medical Corps	*1,982,651*	*308,265*	*2,290,916*
Private grants for projects	*–*	*1,196,270*	*1,196,270*
Other Unrestricted Donations	*1,385,753*	*–*	*1,385,753*
Donated supplies	*–*	*16,385,054*	*16,385,054*
Donated services	*1,218*	*_*	*1,218*
Other income	*1,379*	*–*	*1,379*
2022 Total funds	*3,371,001*	*17,889,589*	*21,260,590*

2 Income from charitable activities

	Unrestricted funds $	Restricted funds $	**2023 Total $**
Strengthening health capacity	–	35,661,830	**35,661,830**
Emergency response and preparedness	–	39,141,374	**39,141,374**
Mental health and psychosocial support	–	5,497,404	**5,497,404**
Women & children's health	–	15,024,516	**15,024,516**
Water, sanitation and hygiene	–	9,074,931	**9,074,931**
Nutrition and food security	–	7,107,986	**7,107,986**
2023 Total funds	–	111,508,041	**111,508,041**

	Unrestricted funds $	*Restricted funds $*	*2022 Total $*
Strengthening health capacity	–	*41,438,682*	*41,438,682*
Emergency response and preparedness	–	*29,696,109*	*29,696,109*
Mental health and psychosocial support	–	*722,114*	*722,114*
Women & children's health	–	*14,273,438*	*14,273,438*
Water, sanitation and hygiene	–	*4,508,274*	*4,508,274*
Nutrition and food security	–	*9,265,265*	*9,265,265*
2022 Total funds	–	*99,903,882*	*99,903,882*

3 Expenditure on raising funds

	Unrestricted funds $	Restricted funds $	**2023 Total $**
Fundraising staff costs	–	–	–
Other fundraising costs	13,598	1,381	**14,979**
2023 Total funds	13,598	1,381	**14,979**

	Unrestricted funds $	*Restricted funds $*	*2022 Total $*
Fundraising staff costs	*2,665*	–	*2,665*
Other fundraising costs	*6,835*	*21,203*	*28,038*
2022 Total funds	*9,500*	*21,203*	*30,703*

4 Expenditure on charitable activities

	Activities undertaken directly $	Support costs $	**2023 Total $**
Strengthening health capacity	34,164,949	2,575,366	**36,740,315**
Emergency response and preparedness	37,909,357	2,857,621	**40,766,978**
Mental health and psychosocial support	3,313,904	249,803	**3,563,707**
Women & children's health	14,038,277	1,058,211	**15,096,488**
Water, sanitation and hygiene	9,351,890	704,949	**10,056,839**
Nutrition and food security	14,294,410	1,077,518	**15,371,928**
2023 Total funds	113,072,787	8,523,468	**121,596,255**

	Activities undertaken directly $	*Support costs $*	*2022 Total $*
Strengthening health capacity	*37,551,240*	*3,047,158*	*40,598,398*
Emergency response and preparedness	*23,402,253*	*1,899,015*	*25,301,268*
Mental health and psychosocial support	*696,126*	*56,488*	*752,614*
Women & children's health	*14,114,434*	*1,145,339*	*15,259,773*
Water, sanitation and hygiene	*3,365,564*	*273,104*	*3,638,668*
Nutrition and food security	*23,149,251*	*1,878,485*	*25,027,736*
2022 Total funds	*102,278,868*	*8,299,589*	*110,578,457*

4 Charitable activities (continued)

Support costs are allocated to projects in line with the level of direct expenditure as this best reflects the level of support required by each project.

Costs of charitable activities can be further analysed as follows:

	Activities undertaken directly $	Support costs $	**2023 Total $**
Staff costs	38,375,943	2,077,019	**40,452,962**
Donated supplies and services	10,820,038	10,826	**10,830,864**
Auditor's remuneration			
• Statutory audit	–	53,475	**53,475**
Other costs	63,876,806	6,382,148	**70,258,954**
2023 Total	113,072,787	8,523,468	**121,596,255**

	Activities undertaken directly $	*Support costs $*	*2022 Total $*
Staff costs	*35,693,805*	*1,909,753*	*37,603,558*
Donated supplies and services	*16,090,353*	*10,529*	*16,100,882*
Auditor's remuneration			
• *Statutory audit*	–	*46,265*	*46,265*
Other costs	*50,494,710*	*6,333,042*	*56,827,752*
2022 Total	*102,278,868*	*8,299,589*	*110,578,457*

4 Charitable activities (continued)

	Unrestricted funds $	Restricted funds $	**2023 Total $**
Strengthening health capacity	200,041	36,540,274	**36,740,315**
Emergency response and preparedness	221,965	40,545,013	**40,766,978**
Mental health and psychosocial support	19,403	3,544,304	**3,563,707**
Women & children's health	82,197	15,014,291	**15,096,488**
Water, sanitation and hygiene	54,757	10,002,082	**10,056,839**
Nutrition and food security	83,696	15,288,232	**15,371,928**
2023 Total funds	662,059	120,934,196	**121,596,255**

	Unrestricted funds $	*Restricted funds $*	*2022 Total $*
Strengthening health capacity	*1,171,893*	*39,426,505*	*40,598,398*
Emergency response and preparedness	*730,333*	*24,570,935*	*25,301,268*
Mental health and psychosocial support	*21,725*	*730,889*	*752,614*
Women & children's health	*440,481*	*14,819,292*	*15,259,773*
Water, sanitation and hygiene	*105,032*	*3,533,636*	*3,638,668*
Nutrition and food security	*722,437*	*24,305,299*	*25,027,736*
2022 Total funds	*3,191,901*	*107,386,556*	*110,578,457*

5 Employees and staff costs

Staff costs during the year were as follows:

	2023 Total $	2022 Total $
Wages and salaries	**1,778,658**	1,639,323
Social security costs	**207,527**	182,005
Other pension costs	**90,834**	88,425
Total UK staff costs	**2,077,019**	1,909,753
International Medical Corps Worldwide on International Medical Corps (UK) projects	**38,375,943**	35,693,805
Total staff costs	**40,452,962**	37,603,558

The average number of employees during the year, analysed by function, was as follows:

	2023 No	2022 No
UK Staff	**28**	25

5 Employees and staff costs (continued)

International Medical Corps (UK) contributes towards the salaries of a number of staff overseas and on local projects. Such staff may have only part of their salaries charged to projects; however, it is not meaningful to provide a full-time equivalent figure. The estimated number of such staff employed in the year was 2,760 (2022: 2,546).

The number of employees who earned £60,000 or more (including taxable benefits but excluding employer pension contributions) during the year was as follows:

	2023 No	2022 No
£60,000 – £70,000	**2**	*1*
£70,001 – £80,000	**1**	*2*
£80,001 - £90,000	**2**	*1*
£100,001 - £110,000	**1**	*–*
£110,001 - £120,000	**–**	*1*
£130,001 - £140,000	**1**	*–*

Key management personnel comprise those set out on page 31. The total remuneration paid to key management personnel in the year was $588,852 (2022: $571,161).

	2023 $	2022 $
Wages and salaries	**491,512**	*477,202*
Social security costs	**63,142**	*60,587*
Employer pension costs	**34,198**	*33,372*
Total costs	**588,852**	*571,161*

6 Trustees' remuneration

None of the trustees received any remuneration in respect of their services during either of the years under review.

No trustee expenses were incurred during the period (2022- £nil).

7 Taxation

International Medical Corps (UK) is a registered charity and therefore is not liable to corporation tax on income or capital gains derived from its charitable activities or use of assets, as it falls within the various exemptions available to registered charities.

The Charity is not registered for VAT and, accordingly, all expenditure is recorded inclusive of any VAT incurred.

8 Tangible fixed assets

	Office equipment $
Cost	
Total cost at 1 July 2022	438,060
Additions	43,150
Disposals	(279,449)
Total cost and 30 June 2023	**201,761**
Depreciation	
Aggregate depreciation as at 1 July 2022	377,020
Charge for the year	33,340
Disposals	(279,449)
Aggregate depreciation as at 30 June 2023	**130,911**
Net book values	
As at 30 June 2023	**70,850**
As at 30 June 2022	61,040

9 Stocks

	2023 $	2022 $
Donated goods received but not distributed	**2,025,295**	529,667

10 Debtors

Due within one year	2023 $	2022 $
Prepayments and deposits	**79,973**	*89,184*
Accrued income	**9,901,730**	*10,990,635*
Other debtors – Accounts Receivable	**11,416**	*2,388*
Amount receivable from IMC Croatia	**20,651**	*10,277*
Amount receivable from IMC	**426,476**	*3,483,188*
Emergency response stock	**6,250**	*6,720*
	10,446,496	*14,582,392*

11 Creditors: amounts falling due within one year

	2023 $	2022 $
Trade creditors	**13,988**	*13,292*
Accruals	**251,099**	*233,812*
	265,087	*247,104*

12 Restricted funds

The funds of the Charity include restricted funds comprising the following unexpended balances of donations held on trusts to be applied for specific purposes:

	At 1 July 2022 $	Income $	Expenditure $	**At 30 June 2023 $**
Strengthening health capacity	7,939,507	37,453,524	36,374,602	**9,018,429**
Emergency response and preparedness	13,676,105	39,966,161	39,862,390	**13,779,876**
Mental health & psychosocial support	3,767	5,759,712	3,541,696	**2,221,783**
Women & children's health	875,646	15,468,004	14,973,400	**1,370,250**
Water, sanitation and hygiene	1,757,509	9,261,510	9,992,728	**1,026,291**
Nutrition and food security	321,293	15,914,797	15,876,088	**360,002**
Restricted by country	1,267,924	717,440	314,673	**1,670,691**
	25,841,751	124,541,148	120,935,577	**29,447,322**

Restricted funds are analysed by the type of activity to which the funds relate. All restricted funds are held to carry out activities under these headings.

Transfers between funds relate to surplus funds on contracts which have been used for general purposes in line with donor requirements.

13 Analysis of net assets between funds

	Unrestricted funds $	Restricted funds $	**Total 2023 $**
Fund balances at 30 June 2023 are represented by:			
Fixed assets	70,850	_	70,850
Current assets	815,000	29,712,409	30,527,409
Creditors: amounts falling due within one year	–	(265,087)	(265,087)
2023 Total net assets	**885,850**	**29,447,322**	**30,333,172**

	Unrestricted funds $	*Restricted funds $*	*Total 2022 $*
Fund balances at 30 June 2022 are represented by:			
Fixed assets	*56,162*	*4,878*	*61,040*
Current assets	*693,819*	*26,083,977*	*26,777,796*
Creditors: amounts falling due within one year	–	*(247,104)*	*(247,104)*
2022 Total net assets	*749,981*	*25,841,751*	*26,591,732*

14 International Medical Corps (UK) flagship areas

International Medical Corps (UK) continued to operate during the financial year to 30 June 2023 under the main flagship areas of strengthening health capacity, emergency response and preparedness, mental health and psychosocial support, women and children's health, water, sanitation and hygiene (WASH) and nutrition and food security.

15 Related party transactions

On 1 July 2023 International Medical Corps (UK) entered into a new Administrative Services Agreement with International Medical Corps, a US-based non-profit organization to share certain services in connection with its operations. International Medical Corps agreed to assist International Medical Corps (UK) in the achievement of its charitable objectives: to relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and healthcare projects.

On 1 July 2019 International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps Croatia, a Croatian based non-profit organisation, to share certain services in connection with its operations.

Given the close operating relationship between International Medical Corps and International Medical Corps (UK) there are a number of connected persons between the two organisations at trustee level. These connected persons include Nancy A Aossey, who is a founding Trustee of International Medical Corps (UK), and the President and CEO of International Medical Corps, as well as a member of its board. C. William Sundblad, a Trustee of International Medical Corps (UK) is also the Chief Knowledge Officer of International Medical Corps.

During the year ended 30 June 2023, International Medical Corps billed International Medical Corps (UK) $7,148,282 (2022: $6,923,408) in lieu of service fee as per Article 5 of the Administrative Services Agreement. During the same period, International Medical Corps (UK) has rendered services to International Medical Corps of $881,109 (2022: $823,601).

During the year ended 30 June 2023, International Medical Corps Croatia billed International Medical Corps (UK) $45,050 (2022: $28,415). During the same period International Medical Corps (UK) has rendered services to International Medical Corps Croatia of $172,507 (2022: $132,154).

16 Liability of members

The Charity is constituted as a company limited by guarantee. Each member has undertaken to contribute £1 to the assets of the company to meet its liabilities if called on to do so.

17 Contingent liability

Due to the nature of the Charity's agreement with donors, the Charity's expenditure is often subject to audit or other review by representatives of donors in a subsequent accounting period. There is a possibility that these audits or reviews would identify expenditures that do not fall within the terms of the grant agreements, and so the Charity would be required to repay the monies received. The trustees are not aware of any material circumstances in the year to 30 June 2023 that could give rise to such liability (2022: none).

18 Operating leases

International Medical Corps (UK) exited from its former office lease and moved to new office premises during September 2022. The total of future minimum lease payments under non-cancellable operating leases as at 30 June 2023 is as follows:

	Land and buildings $	Equipment $	**Total 2023 $**
Due within one year	73,524	1,585	**75,109**
Due between 2 and 5 years	253,029	2,270	**255,299**
Over 5 years	–	–	**–**
	326,553	**3,855**	**330,408**

	Gross commitment $	*Less sublease $*	*Land and buildings Net commitment $*	*Equipment $*	*Total 2022 $*
Due within one year	*39,815*	*(23,226)*	*16,589*	*757*	*17,346*
Due between 2 and 5 years	–	–	–	–	–
Over 5 years	–	–	–	–	–
	39,815	*(23,226)*	*16,589*	*757*	*17,346*

CHARITABLE ACTIVITIES DETAILED ANALYSIS FOR THE YEAR ENDED 30 JUNE 2023

The following pages (pages 64-71) do not form part of the statutory financial statements.

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY

For certain projects, closeout adjustments have resulted in negative charitable Income and expenditure adjustments.

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Afghanistan	GAC	204154	(22,825)	-
Afghanistan	UNOCHA	204059	(32,835)	-
Afghanistan	UNOCHA	204365	80,999	373,784
Afghanistan	UNOCHA	204439	506,019	538,764
Afghanistan	UNOCHA	204483	600,000	493,548
Afghanistan	UNOCHA	204558	532,599	532,105
Cameroon	WHO	204609	247,663	247,663
Central African Republic	EC	203593	19,117	19,117
Central African Republic	EC	204406	1,066,025	1,066,025
Central African Republic	ECHO	204057	(1,629)	(1,629)
Central African Republic	LDS	204265	(25)	107,211
Central African Republic	MENTOR	203734	833,642	833,642
Central African Republic	UNOCHA	204248	(6,865)	-
Central African Republic	UNOCHA	204416	232,248	236,474
Democratic Rep of Congo	Save the Children	204571	442,289	442,289
Ethiopia	GAC	204636	1,850,755	188,202
Ethiopia	KSRelief	204533	102,180	102,180
Ethiopia	UNHCR	204586	385,250	385,250
Ethiopia	UNOCHA	204273	23,950	77,666
Ethiopia	UNOCHA	204377	(26,782)	137,279
Ethiopia	UNOCHA	204604	1,600,000	496,899
Ethiopia	UNWOMEN	204082	(1,072)	(1,072)
Global ERU	KSRelief	204533	764,481	353
Iraq	ECHO	202946	(2,675)	(2,675)
Jordan	UNHCR	204316	9,025,270	9,073,917
Jordan	UNHCR	204563	7,945,969	7,420,366
Lebanon	GAC	203871	(65,267)	-
Lebanon	GAC	204375	1,927,465	1,983,810
Lebanon	Anonymous	204277	19,100	103,380
Lebanon	UNOCHA	204256	376,469	459,292
Mali	UNICEF	204504	531,614	536,063

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY (CONTD.)

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Nigeria	UNICEF	204624	289,392	196,641
Pakistan	GIZ	204196	17,820	17,820
Palestinian Territory	NPT UK	203957	(13,650)	-
Somalia	UNOCHA	204565	437,029	532,015
Somalia	WV	204312	-	783
Somalia	WV	204423	215,469	238,652
South Sudan	UNOCHA	204243	24,121	24,121
South Sudan	UNOCHA	204502	427,336	427,336
South Sudan	UNOCHA	204537	656,046	656,946
Sudan	EC	203408	-	-
Sudan	UNHCR	204430	175,783	177,484
Sudan	UNICEF	204286	137,181	193,752
Sudan	UNOCHA	204494	400,000	148,014
Syria	DAHW	204335	(449)	15,604
Venezuela	GAC	204405	-	918,123
Venezuela	UNOCHA	204302	196,377	166,446
Yemen	KSRelief	204533	48,339	48,339
Yemen	MOFAIC	204319	2,000,000	3,849,603
Yemen	MOFAIC	204662	903	903
Yemen	UNOCHA	204109	(15,042)	-
Yemen	UNOCHA	204328	927,500	1,330,635
Zimbabwe	UNICEF	204428	784,550	1,652,077
Total Strengthening health capacity			**35,661,830**	**36,445,196**

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Afghanistan	LDS	204464	300,000	300,000
Afghanistan	UNOCHA	204276	150,955	150,955
Cameroon	KSRelief	204296	71,133	71,133
Cameroon	UNHCR	204566	446,873	517,074
Central African Republic	IOM	204013	(1,052)	(448)
Central African Republic	KSRelief	204296	12,287	12,287
Central African Republic	UNICEF	204650	8,790	8,790
Central African Republic	UNOCHA	204527	646,029	646,495
Democratic Rep of Congo	KSRelief	204296	105,256	105,256
Ethiopia	UNHCR	204587	1,846,151	1,442,352
Ethiopia	UNICEF	204112	602,007	602,007
Ethiopia	UNOCHA	204274	(26,894)	107,750
Ethiopia	WHO	204528	200,000	190,801
Global	French MOFA	204529	787,875	97,426
Global ERU	KSRelief	204296	(945,649)	56,822
Iraq	FCDO	204380	2,420,172	2,420,172
Iraq	FCDO	204620	791,293	791,293
Iraq	French MOFA	204301	351,842	2,764,457
Iraq	French MOFA	204564	5,937,120	2,802,176
Iraq	GAC	204378	1,244,777	1,244,777
Iraq	KSRelief	204296	114,989	114,989
Iraq	UNOCHA	204317	315,000	377,436
Jordan	KSRelief	204296	101,988	101,988
Libya	Start Network	203935	(124,167)	-
Middle East	DFID	203500	(34,979)	-
Middle East	FCDO	204380	4,457,405	3,693,129
Middle East	FCDO	204620	1,003,455	655,822
Middle East	GAC	203847	(25,656)	-
Middle East	GAC	204378	(794,672)	1,313,508
Middle East	Plan Int. Australia	204634	118,008	5,211
Nigeria	UNOCHA	204485	200,000	143,424
Pakistan	KSRelief	204296	126,776	126,776
Pakistan	LDS	204497	400,000	400,000
Pakistan	Welthungerhilfe	204505	641,759	634,621
Philippines	KSRelief	204296	145,492	145,492
Poland	AstraZeneca	204389	592,145	613,603
Poland	Multi Donors	204388	0	288,640
Poland	Tides Foundation	204535	25,927	16,041
Poland	Tides Foundation	204625	29,388	26,162

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS (CONTD.)

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Poland	Tides Foundation	204678	168,160	5
Puerto Rico	LDS	204498	200,000	176,134
Somalia	KSRelief	204296	121,857	121,857
South Sudan	Christian Aid	204552	60,849	67,886
South Sudan	UNICEF	203774	-	42,000
South Sudan	UNICEF	204577	2,801,589	2,966,964
South Sudan	UNOCHA	204279	(4,643)	(4,643)
Syria	AstraZeneca	204596	300,000	116,828
Syria	FCDO	204380	2,970,273	2,970,273
Syria	FCDO	204620	637,040	637,040
Syria	GAC	204378	1,041,612	1,041,612
Syria	LDS	204594	550,025	59,222
Syria	UNOCHA	204239	(10,693)	-
Ukraine	AstraZeneca	204389	(592,145)	393,906
Ukraine	AstraZeneca	204639	250,000	-
Ukraine	GAC	204554	3,714,158	965,104
Ukraine	LDS	204390	0	825,401
Ukraine	LDS	204637	1,000,025	-
Ukraine	Plan Int. Australia	204442	844,015	1,763,903
Ukraine	Plan Int. Australia	204641	110,892	1,935
Ukraine	Plan Int. Netherlands	204412	679,558	2,047,202
Ukraine	United Group BV	204394	1	560,772
Ukraine	Vitol Foundation	204429	29,293	322,745
Venezuela	KSRelief	204296	145,871	145,871
Yemen	GAC	203922	(55,386)	7
Yemen	GAC	204374	1,547,033	1,667,592
Yemen	UNOCHA	204245	227,011	398,326
Yemen	UNOCHA	204511	163,156	163,156
Total Emergency Response and Preparedness			**39,141,374**	**40,439,514**

PROJECTS CATEGORISED UNDER MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Afghanistan	UNFPA	204573	1,221,721	1,295,727
Afghanistan	UNOCHA	204556	522,640	35,804
Afghanistan	UNOCHA	204557	529,866	35,963
Afghanistan	UNOCHA	204559	437,157	107,808
Ethiopia	UNFPA	204450	480,892	506,899
Jordan	GIZ	204282	(5,095)	(5,095)
Jordan	GIZ	204510	456,480	456,480
Jordan	UNICEF	204443	20,000	20,000
Jordan	Vrije Universitet	203293	7,117	7,117
Libya	DRC	203749	(3,158)	-
Libya	GIZ	204369	486,528	486,528
Pakistan	UNHCR	204574	246,444	246,444
Venezuela	GAC	204621	1,096,812	341,407
Total Mental Health and Psychosocial Support			**5,497,404**	**3,535,082**

PROJECTS CATEGORISED UNDER WATER, SANITATION AND HYGIENE

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Afghanistan	Islamic Development Bank	204649	863,115	12,180
Afghanistan	UNICEF	204310	19,103	793,941
Afghanistan	UNOCHA	204264	150,270	216,766
Afghanistan	UNOCHA	204368	246,291	639,199
Ethiopia	UNHCR	204326	4,560,723	4,698,344
Ethiopia	UNHCR	204393	728,550	728,550
Ethiopia	UNHCR	204603	566,268	445,791
Ethiopia	UNOCHA	204275	132,028	351,091
Ethiopia	UNOCHA	204376	742,218	1,022,778
Libya	GIZ	204433	667,416	667,416
Somalia	UNOCHA	204531	400,000	400,000
Yemen	UNOCHA	204117	(1,051)	-
Total Water, Sanitation and Hygiene			**9,074,931**	**9,976,056**

PROJECTS CATEGORISED UNDER WOMEN & CHILDREN'S HEALTH

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Afghanistan	UNFPA	204309	1,053,302	1,058,328
Afghanistan	UNOCHA	204295	104,892	110,713
Cameroon	UNFPA	204266	(6,785)	(6,785)
Cameroon	UNHCR	204325	207,922	217,222
Cameroon	UNHCR	204567	272,899	147,813
Cameroon	WFP	204500	190,654	190,654
Central African Republic	IRC	204214	391,330	391,330
Ethiopia	UNFPA	204569	555,771	581,485
Ethiopia	UNHCR	204391	233,562	233,562
Ethiopia	UNHCR	204585	388,612	186,818
Global	UNFPA	204612	31,939	31,939
Jordan	UNICEF	204314	714,264	714,264
Jordan	UNICEF	204580	634,036	519,546
Jordan	UNOCHA	204204	(24)	-
Jordan	WFP	204508	158,545	176,839
Lebanon	French MOFA	204666	654,120	-
Lebanon	Plan Int. Australia	204357	318,459	402,176
Lebanon	UNOCHA	204322	151,747	197,795
Libya	UNFPA	203895	(78,058)	-
Mali	GAC	204353	1,389,330	1,880,869
Nigeria	MINBUZA	204069	51,841	156,242
Nigeria	UNICEF	204477	376,912	376,912
Nigeria	UNOCHA	204539	170,001	74,423
Nigeria	WFP	204440	909,171	869,806
Poland	UNHCR	204495	105,906	105,906
South Sudan	DFID	203190	2,938,690	2,941,633
South Sudan	UNFPA	204099	(10,533)	(10,533)
South Sudan	UNFPA	204305	900,449	923,950
South Sudan	UNFPA	204575	422,425	513,306
South Sudan	UNICEF	204260	1,545,909	1,751,652
South Sudan	UNOCHA	204536	247,227	237,361
Total Women and Children's Health			**15,024,515**	**14,975,226**

PROJECTS CATEGORISED UNDER NUTRITION AND FOOD SECURITY

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Cameroon	UNHCR	204324	545,361	635,308
Ethiopia	The Power of Nutrition	204681	50,000	-
Ethiopia	UNHCR	204097	(3,581)	(3,581)
Ethiopia	UNHCR	204392	-	3,186
Ethiopia	WFP	204030	133,974	3,520,251
Ethiopia	WFP	204616	57,298	188,189
Ethiopia	WFP	204519	-	977,974
Global	ACF Canada	204404	39,777	39,777
Global	ACF Canada	204550	7,957	7,957
Jordan	UNICEF	204313	626,497	664,308
Jordan	UNICEF	204579	643,844	651,799
Nigeria	WFP	204307	596,550	1,662,670
Nigeria	WFP	204615	155,284	155,284
Nigeria	WFP	204627	127,215	127,215
Nigeria	WFP	204638	72,867	72,867
Nigeria	WFP	204648	23,783	23,783
Nigeria	WFP	204665	1,028	1,028
Somalia	ACF Canada	204461	42,962	42,962
Somalia	ACF Canada	204550	46,565	46,565
Somalia	Anonymous	204521	100,000	55,082
Somalia	UNICEF	204491	156,254	293,877
Somalia	UNOCHA	204300	200,526	234,210
Somalia	WFP	204655	482	482
South Sudan	IOM	204613	36,522	36,522
South Sudan	UNICEF	203695	161,297	209,694
South Sudan	UNICEF	204562	624,859	650,724
South Sudan	UNOCHA	204227	180,793	191,867
South Sudan	WFP	204304	304,750	868,233
South Sudan	WFP	204576	455,526	886,884
Sudan	WFP	204414	59,113	59,113
Sudan	WFP	204415	39,538	139,481
Sudan	WFP	204419	30,221	109,962
Sudan	WFP	204425	31,063	46,886
Sudan	WFP	204436	60,437	98,101
Venezuela	WFP	204431	234,460	234,460
Venezuela	WFP	204520	270,512	1,559,591
Venezuela	WFP	204611	265,062	728,435
Yemen	LDS	204630	750,025	27,306
Yemen	UNOCHA	204111	(20,834)	-
Total Nutrition and Food Security			**7,107,987**	**15,248,452**

IMAGE CREDITS

COVER	Usman Ghani
2	Dmytro Mykhailov
4	Third Wave Volunteers
5	Dr. Ange Masudi
7	Fida Hussain
8	Zinyange Auntony
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13	Crystal Wells
14	Caitlin Bartkus
15	Kamil Daniel Jutkiewicz
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23	International Medical Corps
24	Kamil Daniel Jutkiewicz
25	Margaret Traub
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75	Dmytro Mykhailov





ZIMBABWE



HOW YOU CAN HELP

Give hope, give health.

There are many ways you can help There are many ways you can help International Medical Corps (UK) provide lifesaving care and help communities gain self-reliance after a disaster.

INTERNATIONALMEDICALCORPS.ORG.UK/DONATE

WAYS TO GIVE

Become a monthly donor

Make a one-time gift via cheque, credit card, wire transfer or online

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International Medical Corps UK

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INTERNATIONAL MEDICAL CORPS (UK)

England & Wales - Charity number 1093861

Accounts



2021/2022 ANNUAL REPORT

International Medical Corps UK

Company Limited by Guarantee
Registration number 04474904



INTERNATIONAL MEDICAL CORPS (UK)

2021/2022 ANNUAL REPORT

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International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

Throughout the document, where references to "affiliates" (in plural) are made, they refer to International Medical Corps and International Medical Corps Croatia.

Unless otherwise stated, projects and their statistics referred to in the first part of this report (pages 1-25) are the results of combined International Medical Corps (UK), International Medical Corps and International Medical Corps Croatia global efforts in calendar year 2021 and do not form part of the statutory annual report. Projects and their statistics referred to in the second part of this report (pages 26-71) represent the work of International Medical Corps (UK) only, and covers the 12-month period to 30 June 2022 and forms part of the statutory financial statements and trustees report.

TO OUR SUPPORTERS

After responding globally to the COVID-19 pandemic in 2020, we have continued our lifesaving work through 2021, responding to major outbreaks of conflict, disease and disaster worldwide. Every time there was an emergency, we deployed to provide healthcare and training services, in spite of the challenges. This was made possible through the experience we have gained responding to crises in more than 80 countries over the years, and through the generous support of our donors.



AFGHANISTAN

Though this report focuses on 2021, the recent war in Ukraine has created humanitarian needs on a level not seen since World War II. With our team on the ground providing medical and mental health services in the Donbas region since 2014, we were able to rapidly expand our response throughout the country to provide emergency medical care to the injured and to support the displaced with psychosocial support, child protection, water and sanitation services and gender-based violence support. We are rehabilitating and strengthening primary healthcare centres and hospitals damaged in the war, helping to ensure the continuity of healthcare services. Since February 24, we have reached more than 3 million people in Ukraine with supplies, equipment and services, and have expanded our efforts to the neighbouring countries of Moldova, Poland and Romania. Of course, we have also focused on training, providing healthcare professionals and first responders with the skills and knowledge they need to offer long-term support to their communities.

In 2021, we continued to battle the COVID-19 pandemic, the most widespread healthcare emergency we had encountered. In India, the second wave of COVID-19 peaked in March 2021, with hundreds of thousands of confirmed cases and thousands of deaths reported each day. As the healthcare system collapsed, the country faced an acute shortage of medical oxygen, supplies and hospital beds.

But we have dealt with medical emergencies in the past, and have decades of experience battling outbreaks of infectious diseases—polio and Ebola in Africa, cholera in Yemen and measles in Pakistan. Drawing from this knowledge, we partnered with local organisations in India and provided resources—oxygen and medical supplies, PPE kits and N95 masks—to strengthen the country's overwhelmed healthcare infrastructure. In addition, we supported vaccination efforts in the country via mobile medical teams.

Meanwhile, globally we have continued to train people on good hygiene practices to prevent the spread of infectious diseases.

Throughout the year, we prepared for and responded to emergencies in different parts of the globe. From conflict in Afghanistan, Ethiopia and Yemen, to flooding in Europe, to hurricanes and tornadoes in the US, our teams were where they were needed the most—healing communities and giving them hope.

In June, International Medical Corps became the only NGO in the world to be classified by the World Health Organization as an Emergency Medical Team (EMT) Type 1 provider in both Fixed and Mobile configurations. This classification was testament to our robust emergency response capacity, which has enabled us to save millions of lives around the world. This classification was put to the test in August 2021, when a devastating 7.2-magnitude earthquake struck Haiti, leaving more than 650,000 people in need of humanitarian assistance. We deployed our EMT facility, set up primary health clinics, trained volunteers, distributed food and provided vaccinations against diseases like tetanus and measles.

The generosity of our donors has enabled our 7,500+ staff members and many volunteers across some 30 countries to reach more than 18 million people in 2021. We are forever grateful to you for helping us accomplish so many milestones in the past year. No matter what 2022 has in store for us, we know we will overcome them with your support.



Andrew W. Géczy
Chairman
International Medical Corps (UK)



Ognjen Radosavljevic
Managing Director
International Medical Corps (UK)

OUR MISSION

WE ARE A GLOBAL FIRST RESPONDER



JORDAN

We provide training and deliver emergency healthcare, along with related services, to those affected by conflict, natural disaster or disease. We do this no matter where they may be in the world or what the conditions. We train people in their own communities, providing them with the skills they need to recover, to chart their own path to self-reliance and to shape their own future as they become effective first responders themselves.



SPEED SAVES LIVES



DEMOCRATIC REPUBLIC OF THE CONGO

Our emergency response teams deploy fast to assist those in great need—often arriving within hours to reach those even in the most remote, challenging environments.

We draw on experience gained in 37 years of responding to disasters in more than 80 countries on six continents. Our surge capacity includes physicians and nurses trained in emergency medicine, supported by specialists in essential healthcare services that range from mental health and psychosocial support to technical expertise in gender-based violence, nutrition, and water, sanitation and hygiene. We maintain our capacity to respond quickly because speed saves lives in the initial hours following a disaster.

As conditions ease, we stay on and partner with survivors to build a better, more independent future for those we're helping. The key to our approach is training—an essential component of all our programmes, used to transfer the latest knowledge and skills into local hands, to help ensure a brighter future. We strengthen local health systems and work with community leaders, hire and train local staff, develop partnerships and evaluate progress to ensure quality outcomes.

With a staff that numbers more than 7,500 worldwide, 97% of whom are recruited locally, our strategy ensures that the knowledge and tools required to prepare for—and respond to—future emergencies are culturally compatible and remain available in the community. We work to ensure that if disaster strikes again, residents can themselves be their own first responders.



HAITI



LEBANON

OUR PROGRAMMES

Though the last year presented many challenges, we continued to provide valuable services and training for those who needed it most. We worked with communities worldwide to help millions of people chart their journey from relief to self-reliance.



EMERGENCY RESPONSE AND PREPAREDNESS

While we continued our COVID-19 response around the world, we responded to a number of rapid-onset emergencies. When war broke out in Ukraine, we quickly expanded our relief efforts—supporting mobile medical and mental health services, providing medicines and medical equipment and supplies, rehabilitating health facilities and conducting a range of other activities inside Ukraine and in neighbouring countries. When conflict escalated in Afghanistan, we launched mobile teams in Kabul to provide emergency services to displaced people. And in India and Nepal, we responded to a devastating surge in COVID-19, providing much-needed equipment and medicines.



NUTRITION AND FOOD SECURITY

Over recent years, Lebanon has witnessed economic and political unrest, leaving many of the most vulnerable unable to meet their basic needs. International Medical Corps addressed this dangerous combination of lack of food and inability to access healthcare by providing malnutrition screening services and follow-up care.



MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

As part of a programme to strengthen and promote access to MHPSS services in Jordan, International Medical Corps provided case-management services, workshops, training sessions and other activities aimed at building the country's capacity—reaching 1,024 people in refugee and host communities across four governates.



CAMEROON

WATER, SANITATION AND HYGIENE

Conflict, population displacement and the collapse of the previous administration in Afghanistan caused a humanitarian crisis that is further compounded by drought. International Medical Corps stepped in to protect at-risk refugees and returnees with WASH services.

WOMEN'S AND CHILDREN'S HEALTH

A cycle of violence has left the Central African Republic facing one of the most serious humanitarian crises in the world. As part of our work to help those affected by the conflict, we provided emergency protection and gender-based violence prevention and support services for women and girls.

FAMILY AND COMMUNITY HEALTH

In South Sudan, we played a key role in the country's COVID-19 response, serving as co-lead of the national Case Management and Infection Protection and Control Working Group and managing the country's largest infectious disease unit. We also supported the national COVID-19 vaccine deployment plan—our team vaccinated 1,871 people in Malakal, 2,286 in Wau and 773 in the Juba camp for internally displaced persons (IDPs).

HEALTH SERVICES SUPPORT

Since the start of the pandemic, India has recorded more than 44 million confirmed cases of COVID-19 and more than 528,000 confirmed deaths. In response to this emergency, International Medical Corps (UK) worked with partners to support 72 healthcare facilities with equipment and supplies to provide treatment and vaccinations.

TRAINING



SOUTH SUDAN

MORE THAN

37 YEARS OF TRAINING

Since 1984, when we embarked on our first response in Afghanistan, training has been an essential part of our work. We provide training to help communities move from recovery to self-reliance, and gain greater control of their future. In 2021, we continued to provide lifesaving training in first aid and basic life support, and trained health workers on COVID-19 protocols, including preventive measures and vaccine delivery. We also expanded the reach of our programming by making more of our programmes accessible online.



IN 2021

WE TRAINED

77,625 people through 3,902 training sessions covering a range of health-related issues.

5,657 people on communicable disease management and control.

3,459 people in the basics of administering psychological first aid.

BY THE NUMBERS

In 2021, International Medical Corps responded directly to the needs of more than 18 million people in 30 countries on five continents, including more than 1 million people in the United States.



HAITI

AMONG THE RESULTS OF THE WORK OF INTERNATIONAL MEDICAL CORPS, INTERNATIONAL MEDICAL CORPS (UK) AND INTERNATIONAL MEDICAL CORPS CROATIA:



18 MILLION DIRECT BENEFICIARIES

Of these, nearly 3 MILLION were children under 5. Our work also reached more than 88 MILLION others who benefited indirectly from our programmes and work.



6 MILLION MEDICAL CONSULTATIONS

Of these, more than 1.7 MILLION were children under 5.



255,417 CHILDREN VACCINATED AGAINST MEASLES

Vaccinating children protects future generations from the dangers of measles and builds more resilient immune systems.



77,625 PARTICIPANTS TRAINED

This included International Medical Corps clinical and non-clinical staff, government and non-government staff, community health workers and volunteers.



1,615 HEALTH FACILITIES SUPPORTED

In 2021, we supported 218 hospitals, more than 40 of them in the United States. To reach people in underserved, often remote areas, we operated 147 mobile clinics and provided vital assistance to 1,136 primary health facilities, including smaller clinics and health centers.



WOMEN'S AND CHILDREN'S HEALTH

The key to our future

Ensured that 98,020 births were assisted by a trained birth attendant.



NUTRITION

The foundation of life

Provided 1,479,847 people with critical nutrition support, and 411,010 people with infant and young-child feeding services.



WATER, SANITATION AND HYGIENE

The essence of good health

Helped more than 3.8 million people with water, sanitation and hygiene needs.



MENTAL HEALTH CARE AND PSYCHOSOCIAL SUPPORT

The invisible wounds

Provided MHPSS services to 930,687 people through hundreds of service delivery points, mobile teams and other means of delivery.



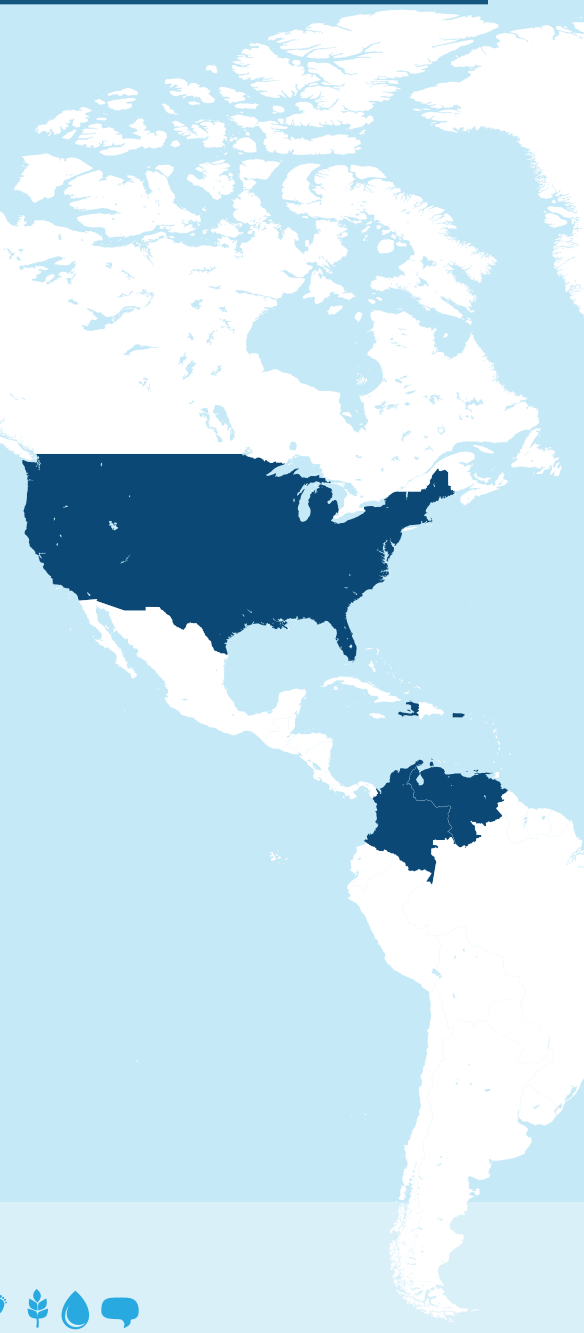
GENDER-BASED VIOLENCE

A violation of fundamental human rights

Offered protection and support to 1,579,510 people living with the threat—or reality—of gender-based violence.



WHERE WE WORK



In calendar year 2021, we provided urgently needed healthcare and related services to more than 18 million people in 30 countries on five continents.

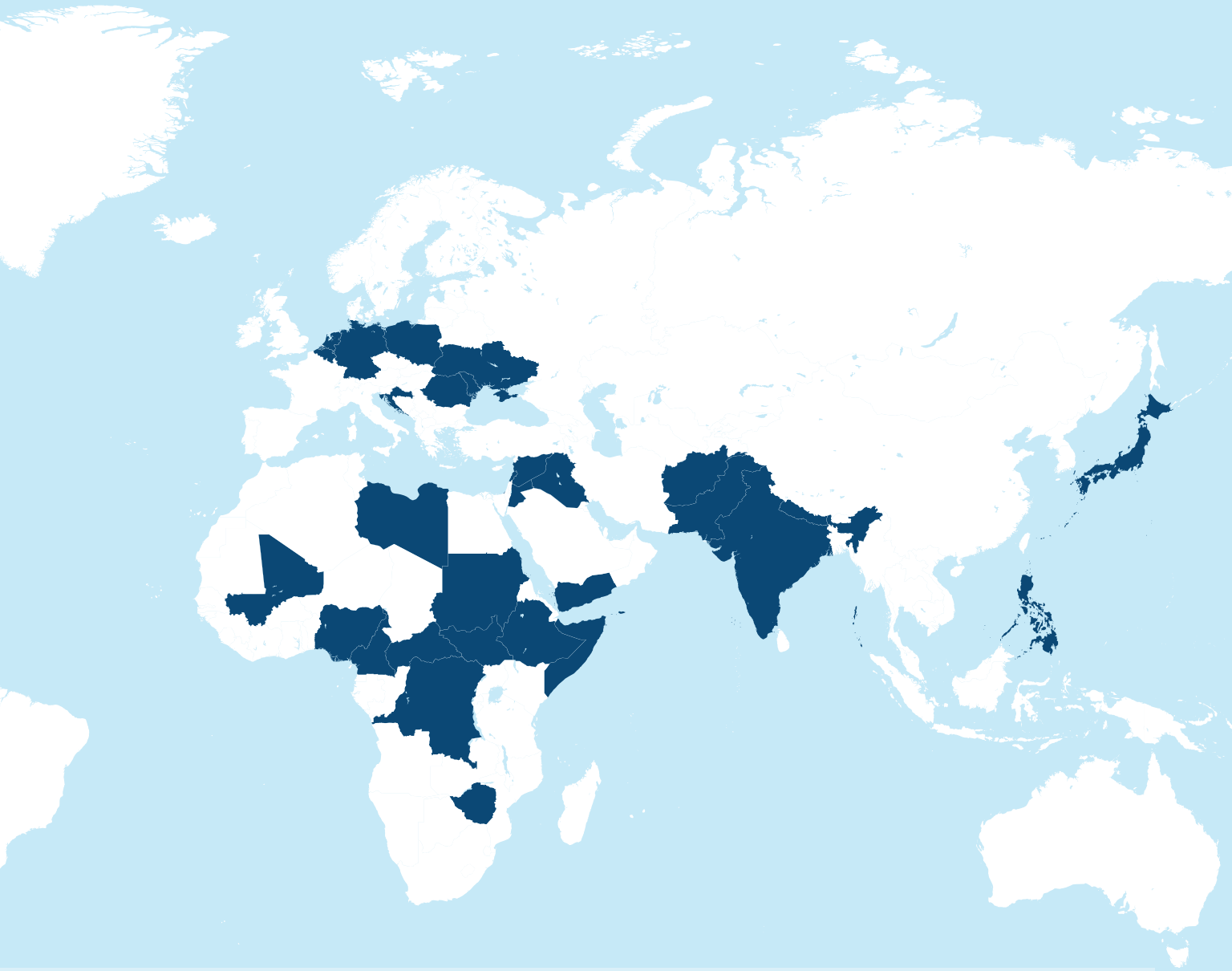
- EMERGENCY RESPONSE & PREPAREDNESS
- WOMEN'S & CHILDREN'S HEALTH
- FAMILY & COMMUNITY HEALTH
- NUTRITION, FOOD SECURITY & LIVELIHOODS
- WATER, SANITATION & HYGIENE
- HEALTH SERVICES SUPPORT
- MENTAL HEALTH & PSYCHOSOCIAL SUPPORT

AMERICAS

Colombia
Haiti
Puerto Rico
Continental United States
Venezuela*

AFRICA

Cameroon*
Central African Republic*
Democratic Republic of the Congo*
Ethiopia*
Libya*
Mali*
Nigeria*
Somalia*
South Sudan*
Sudan*
Zimbabwe*



EUROPE

Belgium
Croatia
Germany
Moldova
The Netherlands
Poland*
Romania
Ukraine*

MIDDLE EAST

Gaza*
Iraq*
Jordan*
Lebanon*
Syria*
Yemen*

ASIA

Afghanistan*
India*
Japan
Nepal
Pakistan*
Philippines*

**Countries where International Medical Corps (UK) programmes were funded during the 12 months to 30 June 2022.*

PARTNERSHIPS



UNITED STATES



WORLD HEALTH ORGANIZATION EMT CLASSIFICATION

When the World Health Organization (WHO) classified International Medical Corps in June as an Emergency Medical Team (EMT) Type 1 provider for both Fixed and Mobile configurations, we became the **only non-governmental organisation (NGO) in the world** with these capabilities. The classification—the result of two years of work and partnership with the WHO—recognizes our ability to deploy and set up a field hospital capable of providing outpatient services to a minimum of 100 patients per day (Fixed) and a minimum of 50 patients per day (Mobile) within 48 hours of a rapid-onset emergency anywhere in the world.



UNITED STATES

LEADERSHIP

International Medical Corps (UK) is an international humanitarian nongovernmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

INTERNATIONAL MEDICAL CORPS (UK) BOARD OF DIRECTORS

Andrew W. Géczy
CHAIRMAN
London

Nancy A. Aossey
TREASURER
Los Angeles, CA

Reto Braun
Switzerland

Hendrick Cornelis
SECRETARY
London

C. William Sundblad
Santa Monica, CA



SOMALIA



Celebrity First Responder Lily Donaldson in South Sudan





Celebrity First Responders Judy Greer (left) and Tara Summers in Puerto Rico

GLOBAL AMBASSADORS

Sanaa Lathan
Actress, Humanitarian

Sienna Miller
Actress, Activist

Inanna Sarkis
Actress, Activist

Stacy Twilley
Founder and CEO
iVolunteer.org

Robin Wright
Actress, Humanitarian

CELEBRITY FIRST RESPONDERS

Muna AbuSulayman
Sasha Alexander
Genevieve Angelson
Bob Crawford
Lily Donaldson
Nikki Glaser
Judy Greer
Ben Harper
Jaclyn Harper
Jihae
Maz Jobrani
David Koechner
Heidi Murkoff
Yvonne Orji
Robert Pattinson
Jeff Probst
Hannah Simone
Tom Sturridge
Tara Summers
Anne Vyalitsyna
Benjamin Watson

ADMINISTRATIVE DETAILS OF THE CHARITY, THE TRUSTEES AND ADVISORS

TRUSTEES

Andrew W. Géczy
CHAIRMAN

Nancy A. Aossey

Reto Braun

Hendrick Cornelis
SECRETARY

C. William Sundblad

MANAGING DIRECTOR

Ognjen Radosavljevic

FINANCE DIRECTOR

Fahmida Muhit

REGISTERED OFFICE

Workspace 4, Mode, 1-6 Centric Close, Oval Road, Camden
London, NW1 7EP

TELEPHONE
WEBSITE

0207 253 0001
http://www.internationalmedicalcorps.org.uk

COMPANY REGISTRATION NUMBER

04474904 (England and Wales)

CHARITY REGISTRATION NUMBER

1093861

AUDITOR

Buzzacott LLP
130 Wood Street London
EC2V 6DL

BANKERS

Barclays Bank PLC
5th Floor
Level 27
1 Churchill Place London
E14 5HP

TRUSTEES' REPORT (INCLUDING STRATEGIC REPORT) 30 JUNE 2022

The trustees, who are also directors of the company for the purposes of the Companies Act 2006, present their report along with the financial statements of the charity for the year ended 30 June 2022. The financial statements have been prepared under the accounting policies set out therein and comply with applicable law and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102).

The report as a whole has been prepared in accordance with Part 8 of the Charities Act 2011. The information in the sections headed 'Strategic Report' constitutes the strategic report as required by the Companies Act 2006 (strategic report and directors' report) Regulations 2013.

The required information to be presented in a directors' report under the Companies Act 2006 is incorporated in the remaining sections of the report.

STRUCTURE, GOVERNANCE AND MANAGEMENT

TRUSTEES AND ORGANISATIONAL STRUCTURE

International Medical Corps (UK) ('the Charity') was incorporated as a company limited by guarantee in England and Wales on July 2, 2002 and registered as a charitable organisation with the Charity Commission on September 19, 2002. Activities commenced on November 1, 2002.

International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation that shares the same mission, and International Medical Corps Croatia, an association registered in Croatia. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes on the ground in accordance with the terms and conditions of its grants. During the year, more than $110 million of the Charity's programmes were delivered in partnership with International Medical Corps (2021: $116 million). This represents a 5% decrease (2021: 11% decrease compared to 2020) in activities worldwide over the previous year. International Medical Corps (UK) also maintains an Administrative Services Agreement with International Medical Corps Croatia to share certain services in connection with its operation.

For ease of reference, International Medical Corps (the non-profit organisation registered in California) will be referred to as International Medical Corps. The UK charity will be referred to as International Medical Corps (UK).

The trustees govern in accordance with the Memorandum and Articles of Association of International Medical Corps (UK) and all subsequent amendments.

The trustees of the Charity have the powers to appoint and remove a trustee. The Board of Directors of International Medical Corps has the right to appoint one trustee (and any successor) by notice in writing addressed to the Secretary of the Charity, and any person so appointed shall become a trustee immediately upon receipt by the Secretary of such notice.

International Medical Corps (UK) adheres to and supports the development of the Sphere Project's Minimum Standards in any disaster response. International Medical Corps (UK) is also informed by the guiding principles of CHS Alliance's Code of Good Practice for the Management and Support of Field Staff.

The Board of Trustees is the governing body for International Medical Corps (UK) and currently comprises five members who aim to meet several times each year. Additional meetings can be called at the request of the Chair. For the 2021–22 financial year, the board of trustees met in December 2021 and June 2022. The list of trustees who served in the year is shown on page 26.

Risk, compliance and external audit functions sit with the board.

As the governing body for the Charity, the trustees take decisions and approvals on a board level regarding strategic and operational risks, as follows:

- **Strategy.** Determine and approve International Medical Corps (UK)'s strategic direction and annual business plan, scrutinising the extent to which the Charity has been able to meet its charitable objectives.
- **Management.** Review and provide oversight of the implementation of the Charity's country programmes.
- **Financial Management and Compliance Requirements.** Review and approve annual budgets, statutory statements and ensure full compliance with all constitutional, legal, regulatory and statutory requirements.
- **Risk.** Review and approve International Medical Corps (UK)'s procedures for risk management, and ensure there is a framework of structures, policies and processes in place for the organisation and the board of trustees.

STATEMENT ON APPROACH TO SAFEGUARDING

International Medical Corps (UK) and its affiliates are committed to the security, safeguarding and safety of their staff, the people we serve and the communities in which we work. International Medical Corps (UK) receives all relevant reports from its US affiliate. As per the Charity's governance structure, the Managing Director and senior staff manage all safeguarding matters.

The Charity's US affiliate continues to reinforce its safeguarding capacity and capability through an organisation-wide approach, which includes incorporation of guidance received from the Foreign, Commonwealth & Development Office (FCDO) of UK Government other donors and the Charity Commission.

The following policies of International Medical Corps (UK) outline the Charity's approach to managing safeguarding matters. The policies are reviewed and updated periodically.

- Code of Conduct
- Safeguarding Policy, encompassing child safeguarding, protection from sexual exploitation and abuse, safeguarding adults at risk, prevention of trafficking in persons
- Whistleblowing Policy
- Guidance on Sub-Recipient Safeguarding and Ethical Conduct requirements
- Anti-Harassment and Bullying Policy
- Conflict of Interest Policy
- Disciplinary Rules, including grievance procedures
- Recruitment and Selection Process
- Health and Safety Policy
- Modern-Day Slavery Statement

In addition to the policies, staff are also required to complete mandatory training and awareness-raising courses that include:

- Code of Conduct and Ethics
- Prevention of Trafficking in Persons
- Child Safeguarding
- Preventing Harassment in the Workplace
- Prevention of Sexual Exploitation and Abuse

This training is completed at induction, and refresher training is completed on an annual basis.

The Charity's US affiliate continues to reinforce the following key safeguarding actions taken during the recent years.

THE SAFEGUARDING TASKFORCE

The Safeguarding Taskforce was created in 2018 to provide focus, leadership and oversight over all global safeguarding initiatives. The Safeguarding Taskforce is a multi-disciplinary team comprising staff from key departments, including Domestic and International Affairs, Legal, Human Resources, Ethics and Compliance, Technical Unit and International Programmes. The Safeguarding Taskforce workplan covers the development and implementation of safeguarding initiatives, including policy review and updates, prevention and protection, survivor assistance guidance, capacity strengthening, training and country support.

POLICY DEVELOPMENT AND IMPLEMENTATION

The umbrella Safeguarding Policy encompasses:

- Child Safeguarding
- Protection from Sexual Exploitation and Abuse
- Safeguarding Adults at Risk
- Prevention of Trafficking in Persons

Sexual harassment in the workplace is covered under the revised Policy for Protection from Harassment, Bullying and Sexual Misconduct. All policies are reviewed and updated periodically.

SAFEGUARDING POLICY IMPLEMENTATION GUIDE AND TOOLKIT

The Safeguarding Task Force has developed a guide to support understanding and implementation of the International Medical Corps' Safeguarding Policy. The guide describes priority actions that need to be undertaken by country teams to ensure the full implementation of the Safeguarding Policy at the country and programme/project level.

Each priority action has a brief explanation of its importance, an overview of the action itself, how to document or demonstrate that an action has been completed, and guidance on where further tools and information can be found within the accompanying Safeguarding Implementation Toolkit, in order to implement the actions.

The accompanying Toolkit contains tools, information and guidance to support the implementation of the Safeguarding Policy. Examples of the tools include a Safeguarding Action Plan Template, the Terms of Reference for the Safeguarding Focal Points and the Survivor Assistance Guidelines.

The Safeguarding Policy Implementation Guide and Toolkit were distributed to Country Offices at the end of June 2020.

TALENT ACQUISITION

Safeguarding is now included in the corporate staff-recruitment process, from advertisement to hiring.

Key actions include the following steps.

- Safeguarding risks are considered for each role.
- Behavioural-based safeguarding questions are included in the headquarters level interview process for all positions, including field recruitments.
- Managers' responsibilities for ensuring safeguarding measures for volunteers, employees and partners are now routinely included in job descriptions for international staff and are part of the management and staff performance-appraisal process.

SAFEGUARDING FOCAL POINTS

More than 120 Safeguarding Focal Points are identified at the country level. Safeguarding Focal Points are nominated by the Country Director. Training resources, materials and support include regular orientation sessions, terms of reference, extensive trainings and a resource library on our intranet—are available.

Safeguarding Focal Points' responsibilities include training, programme support as related to Safeguarding (e.g. proposal development), coordinating with the Headquarters Safeguarding Taskforce, and liaising with other focal points from partner agencies and working groups.

Staff globally receive an annual refresher training that covers Safeguarding. Our Safeguarding Focal Points are responsible for ensuring that this training is completed, in coordination with our Learning & Development team at Headquarters.

SAFEGUARDING VIOLATIONS— CASE MANAGEMENT

Reports of violations of International Medical Corps' safeguarding policies are referred to the Ethics and Compliance Department, which conducts investigations in consultation with the Safeguarding Case Team, an interdisciplinary group of senior leaders. Individuals who are found to have violated International Medical Corps' policies are subject to disciplinary action, up to and including termination. As well as considering individual cases, the Safeguarding Case Team analyses safeguarding data over time to identify risks and emerging themes. Key lessons learned through this process inform future safeguarding policy updates and practice, as part of an institutional culture of constantly striving to improve.

SURVIVOR/VICTIM SUPPORT

International Medical Corps works to ensure that survivors/victims of safeguarding violations receive appropriate and timely support, including medical, psychosocial and other services, according to their needs and wishes. Survivors/victims are also informed of their rights to report incidents to police and/or other relevant authorities. In contexts where reporting to authorities may be indicated, International Medical Corps' Safeguarding Case Team advises victims and consults with Legal Counsel to determine the best course of action. To the extent possible, survivors/victims' wishes guide decisions about the types of support received, and survivors/victims are fully informed of their options and rights.

SAFEGUARDING RISKS OF DOWNSTREAM PARTNERS

Downstream partners are required to conduct all activities under sub-agreements in a manner consistent with international laws, humanitarian principles and donor regulations. Subrecipients are prohibited from engaging in any type of harmful misconduct, including but not limited to sexual exploitation, abuse, harassment and trafficking. Subrecipients are required to inform International Medical Corps of any safeguarding issues that arise under the sub-agreement. Safeguarding-specific requirements are included in the downstream partner risk-assessment guidelines.

DEFINING RISK OWNERS

Ownership of safeguarding risks is documented in the organisational risk register of the Charity and its US affiliate, explicitly stating that the risks are owned by executive staff. The Charity's trustees are updated at least twice a year.

SAFEGUARDING—PREVENTION MEASURES

A comprehensive approach to maintaining and strengthening prevention measures, includes further incorporating protection mainstreaming into programme design, and implementation and training of staff to enhance this approach, as well as the introduction of a risk mitigation approach to dealing with safeguarding violations.

THE ENVIRONMENT

International Medical Corps (UK) actively promotes policies that support the inclusion of safe environmental protection at HQ and country levels. International Medical Corps, the Charity's US affiliate, is working towards integrating a commitment to maintaining environmental standards in its Code of Conduct, which is subscribed to by all its employees, volunteers, suppliers and sub-partners. Moreover, at country-level programme implementation, the Charity aims to reduce excess morbidity and mortality associated with potential exposure to environmental factors. The agency coordinates at the global level with other actors' integrated approaches to delivering environmental, social, public health-related and climate-resilient interventions.

On a project-by-project basis, teams assess the risks associated with relevant aspects such as healthcare waste and expired medicines disposal, making recommendations for controlling and mitigating these impacts through individually tailored interventions. These include capacity building, use of alternative energies, prevention of environmental degradation through sustainable groundwater use, solarisation of groundwater resources, health facility-based cold chains, soaking water, open defecations and environmental health (safe domestic- and medical waste management at the health facility and community levels). These actions aim to achieve positive changes in knowledge, attitude and behaviour of the targeted communities.

The Charity is cosignatory to the global pledge on Energy and Infrastructure, to adopting cost-efficient, environmentally sustainable solutions. We support resilient and sustainable WASH systems that address water scarcity and climate change, and that leverage renewable energy options.

The Charity is committed to maintaining high environmental standards and will continue to work and support a precautionary approach to environmental challenges, undertaking initiatives to promote greater environmental responsibility, and encouraging the development and dissemination of environmentally friendly technologies.

In addition International Medical Corps has developed guidance on reduction of its negative impact on the environment due to factors linked to logistics and the supply chain (transportation of goods and staff, sourcing, packaging, power supply, etc.), with the aim of implementing best practices and providing recommendations based on studies and recommendations of agencies such as Groupe URD (Environmental Footprint of Humanitarian Assistance—Scoping Review, May 2020), IFRC, WHO and WFP.

In 2022, International Medical Corps has calculated CO2 emissions generated globally by transport (international shipment and vehicles) and power production in 2021. The results were presented to Senior Management and Country team highlighting opportunities for improvements.

As a first step, International Medical Corps has developed and disseminated an eLearning on Reducing Carbon emissions generated by the fleet, to improve awareness and provide solutions for emissions reduction. In 2023, the Charity's implementing affiliate will further implement and monitor actions with positive impact to the environment and analyse results against baseline.

The Charity offers to staff environmentally friendly initiative such as the Cycle to Work Scheme which is about promoting an alternative way to travel to work and allowing staff to work from home on some days as part of its flexible working policy contributing to staff welfare and less pollution due to reduced daily commute to work.

The Charity was a low energy user during the reported period and therefore is not reporting under UK Government's Streamlined Energy and Carbon Reporting (SECR) requirements.

STATEMENT ON MODERN SLAVERY

In December 2016, International Medical Corps (UK) published its modern slavery statement, committing to prevent modern-day slavery and human trafficking within the organisation and its supply chains. The Charity actively and continuously works with its affiliates to reduce and eliminate this risk. New employees are informed about organisational policies that contributes towards eliminating modern day slavery by the Human Resources function during staff onboarding orientation. Additionally, all employees are provided with annual

training about the prevention of trafficking in persons, sexual exploitation and abuse, and child labour. Related information is made available to employees on the organisation's intranet, as well as through posters displayed in all field and headquarters offices. In addition, International Medical Corps' Global Safeguarding Policy has been updated, made pursuant to section 54(1) of the Modern Slavery Act 2015 (UK). It mandates that all suspicions are reported and are then reviewed and investigated by the Ethics and Compliance Investigation Unit and the Safeguarding Case Team.

In 2017 International Medical Corps revised the vendor Code of Conduct which must be signed by any supplier before entering into business with International Medical Corps. It includes a chapter on the prohibition of human trafficking. Provisions are also inserted in procurement Master Terms and Conditions. Failure to comply constitutes a breach of an essential term of the Contract, leading to revoking the vendor's registration with International Medical Corps and inclusion of the company on the watch list maintained by our Compliance & Ethics department. To further mitigate the risk of doing business with vendors engaged in any way with modern slavery, International Medical Corps is currently reviewing vendor-assessment processes, to ensure that this aspect is integrated during evaluation process.

KEY MANAGEMENT PERSONNEL

The key management team of the Charity consists of the trustees, the Managing Director and the senior management team. The trustees have delegated management of the Charity's operations to the Managing Director, who is supported by the senior management team as follows:

- International Medical Corps (UK)-contracted staff:
  - Senior Director of International Programmes
  - Senior Director of Finance, Grants and Contracts
  - Senior Director of Human Resources
- International Medical Corps-contracted staff:
  - Chief Operating Officer
  - Vice President, Finance and Administration
  - Chief Advancement Officer
  - Vice President, Domestic and International Affairs

For the purposes of setting employee remuneration, delegation has been given to the Charity's Managing Director, who is also the Administrative Director for this purpose. In setting the pay and benefits of the UK-contracted senior management team, the Managing Director refers to the company's pay policy, which is periodically reviewed. Salaries and benefits are benchmarked against reliable industry data. The salary scale, including the pay policy, is approved by the Managing Director and in line with the Charity's pay policy.

The remuneration of the Managing Director is set by the trustees and in line with the Charity's pay policy and scale.

TRUSTEES' RESPONSIBILITIES

The Trustees, who are also Directors of International Medical Corps (UK) for the purposes of company law, are responsible for preparing the Trustees' Report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practices, or GAAP).

Company law requires the trustees to prepare financial statements for each financial year that give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of such resources, including the income and expenditure of the charitable company for that period. Under company law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure of the charitable company for that period.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice Accounting and Reporting by Charities;
- make judgements and estimates that are reasonable and prudent; state whether applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Each trustee confirms that:

- so far as the trustee is aware, there is no relevant audit information of which the charitable company's auditor is unaware; and,
- the trustee has taken all the steps that they ought to have taken as a trustee to make themselves aware of any relevant audit information, and to establish that the charitable company's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of S418 of the Companies Act 2006.

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

OBJECTIVES AND ACTIVITIES

PUBLIC BENEFIT

In reviewing the Charity's aims and in planning future activities, the trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit. The trustees believe that the Charity benefits the public through the achievement of its goals and objectives by:

- providing timely and appropriate humanitarian aid to vulnerable victims of wars and disasters;
- building the capacity of local healthcare providers to increase the standards of healthcare for local communities and create more sustainable systems;
- contributing to the UK's agenda for international development and, in particular, the achievement of the Sustainable Development Goals, including the prevention of and response to violence against women and girls;
- contributing to the containment and reduction of infectious diseases globally; and
- contributing to the understanding of the impact of various health issues affecting the vulnerable, through the UK/EU media and humanitarian networks.

INTERNATIONAL MEDICAL CORPS (UK)'S GOALS

- To mobilise sufficient resources to realise International Medical Corps (UK)'s charitable objects and humanitarian mission.
- As per International Medical Corps (UK)'s Memorandum of Association, the objects of the organisation are to:
  a) relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and programmes, and to promote good health and preserve lives by providing medical supplies and trained medical professionals particularly, in areas that have suffered through war and conflict; and
  b) further the activities of International Medical Corps, a non-profit corporation registered in California USA, as are exclusively charitable and that may advance the objective set in (a) above.

International Medical Corps (UK)'s mission is to provide humanitarian assistance, healthcare and training to communities affected by disasters, conflict and poverty, so they can return to self-reliance.

During the reporting period, the Charity continued to report on six main areas of work:

- Strengthening health capacity
- Emergency response and preparedness
- Mental health and psychosocial support
- Woman and children's health
- Clean water, sanitation and hygiene
- Nutrition and food security

MONITORING OF ACTIVITIES

International Medical Corps (UK) continuously monitors programme activities through effective internal reporting mechanisms. It provides regular programmatic and financial reports on project activities and progress as required by all its institutional donors and other stakeholders. Additional internal programme reports and departmental updates supplement this information for day-to-day management. The Charity also maintains automated recruitment, financial and programme records to track performance and grant compliance.

The International Programmes team reinforces supportive monitoring and communications systems and procedures to track results. International Programmes collaborates with the Monitoring, Evaluation and Learning (MEAL) department in the collection and analysis of programme achievements and addresses issues to progress in real time through visits, calls and written communications. Monthly calls with country teams also review the achievement of project targets, spending and procurement, as presented by project managers and their technical, financial and logistics colleagues. Monthly reviews aggregate and track results for all COVID projects and integrates them into organisation-wide DHIS2 reporting and mapping software. In addition, International Programme Senior Directors, Deputy Directors Programme Managers and Programme Officers maintain regular communications with country teams to identify and address risks and provide support, working with regional platform department focal points.

Staff, in various capacities, visited country programmes during the year to provide relevant technical support. During the reported period, countries visited included Ethiopia, India, Iraq, Jordan, Kenya, Libya, Pakistan, Poland, Somalia, South Sudan, Sudan, Syria, and Ukraine where we provided field teams with programmatic and technical support.

The Charity's affiliate delivers programmes through three geographical, cross-functional platforms (Middle East; Central & Southern Africa; North & East Africa, Asia and Europe), which include dedicated interdisciplinary teams of specialists in programmes, technical, finance, resource development, communications, logistics and supply chains, human resources and security. Functional specialists provide effective and efficient business support to field programmes and facilitate speedy and effective responses to disasters in the respective regions.

International Medical Corps (UK)'s Managing Director is a member of the global executive leadership team, and advises and helps evaluate opportunities, challenges and risks associated with implementation of programmes undertaken by the Charity's US affiliate. In addition, International Medical Corps (UK) relies on its US affiliate's Internal Audit, Compliance and Safeguarding Task Force's independent field reviews, evaluations and reports. Risk assessment and compliance issues are flagged in various functional units' regular reviews, and critical issues are reported back to the senior leadership team. Senior International Medical Corps' staff brief the trustees during board meetings on key developments and on risk mitigation measures that have been put in place.

STATEMENT ON CONTRIBUTIONS BY VOLUNTEERS

International Medical Corps (UK) continues to actively encourage members of the public to become involved in its work, both in the UK, to raise awareness of international development issues, and overseas, to support its operations.

STRATEGIC REPORT

ACHIEVEMENTS AND PERFORMANCE

Organisational Performance

Over the course of the financial year to June 2022, International Medical Corps (UK) provided assistance valued at $110,578,457 (2021: $116,684,953) to vulnerable populations in 23 countries (2021: 21). This included the distribution of donated medical and other supplies valued at $16,090,353 (2021: $14,995,867).

International Medical Corps (UK) supported, through its US affiliate, 2,546 staff positions in 23 countries (2021: 2,764 staff positions in 21), providing essential services to beneficiaries. Globally, International Medical Corps' activities served 7.2 million and 5.3 million direct beneficiaries in the final two quarters of 2021, respectively, and 5.4 million and 6.1 million in first two quarters of 2022.* International Medical Corps (UK) contributed **34%** of global funding to this mutual achievement.

Summary of Measures Used to Assess International Medical Corps (UK)'s Performance

International Medical Corps (UK) continues to use a Balanced Business Scorecard specifying the following main objectives.

(*Each quarter represents direct beneficiaries within that time period only. Please note that beneficiary totals may overlap across quarters.)

SUMMARY OF MEASURES USED TO ASSESS INTERNATIONAL MEDICAL CORPS (UK)'S PERFORMANCE

International Medical Corps (UK) continues to use a Balanced Business Scorecard specifying the following main objectives.

GOAL	COMMENT
Timely and efficient delivery of programme activities	The Charity successfully delivered activities of the value of $111M (2021: $117M).
Control over corporate costs	The Charity has managed corporate expenditure within the provisions of its annual budget and according to the terms specified by its donors.
Diversification of income	The Charity continued to be funded by a wide range of government and UN agencies, as well as private sector donors.

RISK: 'Minimise risk whilst anticipating threats'

GOAL	COMMENT
Strengthened systems for identifying and raising areas of concern in a timely manner to the senior management team	The Charity continued to maintain its risk register and controlled the field operations through regular reviews, cross-team participation and reference to the Charity's scorecard mechanism. The Charity's US affiliate continues to implement, at field and HQ levels, Logistics Management Software to strengthen assets, procurement and inventory management and controls. Systems enable the creation of exception reports highlighting any potential gaps or risks to be addressed. In addition, HQ Logistics & Supply Chain team is maintaining, in collaboration with the field teams, a register to anticipate, map potential risks and determine / implement mitigation measures. Risks identified as major are elevated to the appropriate management group. In addition, the Charity has worked with its US affiliate to administer and reinforce its safeguarding mechanisms. The Charity's implementing affiliate also implemented a Human Resources System (HRIS) used currently for talent acquisition, staff performance management and training. The HRIS is a global integrated platform used to streamline recruitment, learning, performance management and compensation process and management.
Mitigate financial loss through strict controls	Strict controls were maintained and updated as necessary to ensure adherence to internal procedures, requirements of donors and the requirements of the Charity Commission. Automation and strict control over the treasury platform have ensured minimisation of foreign exchange and currency exposure risks during turbulent global economic environment;

PEOPLE: 'Always supporting its people to develop professionally while delivering the Charity's mission.'

GOAL	COMMENT
Staff are motivated to achieve and exceed performance expectations	Charity introduced performance management and development system which provides platform for managers and their employees to engage in goal setting, performance discussions and provide feedback. The Charity believes that managing employee performance effectively is fundamental to staff motivation, engagement and helping them realise their full potential. Staff continue to receive in-house and external trainings on donor regulations and industry best practices to ensure appropriate oversight. Flexible working and specifically remote working arrangements were put in place to ensure staff safety and wellbeing.
Improve on the creation of opportunities for effective intercompany collaboration and improved quality of programmes	Intercompany, interdepartmental, HQ and field collaborations were enhanced to consider opportunities and challenges in wider contexts. Each International Medical Corps (UK) team worked closely with its peers in the US to ensure alignment where appropriate.

OPERATIONS: 'Delivering the mission efficiently, through discipline and thoroughness.'

GOAL	COMMENT
Regular review of programme performance	Programme staff at all levels monitor risks to implementation on an ongoing basis, to ensure effective programme delivery. The Charity's affiliate's cross-functional platforms continue to improve the effectiveness and efficiency of operational support to field programmes, as well as facilitate speedy and effective responses to disasters in the respective regions.
Increased monitoring and evaluation activities, training and programme development	Programme staff collaborate with other departments within the cross-functional platforms in decision making related to country programme issues. During the reporting period, the Charity, in collaboration with its US affiliate, submitted 171 proposals. The Charity's US affiliate's Internal Audit finalized a comprehensive audit of country operations in COVID -19 pandemic context, and conducted in-country audits in Ukraine, Nigeria, Iraq, the Democratic Republic of the Congo, Sudan and South Sudan.
Secure multi-year grants from donors	Ongoing discussions were had with FCDO, Global Affairs Canada (GAC), Ministry of Foreign Affairs France on multi-year grants.

DONORS: 'Accountable to a growing group of donors'

The Global Programme Unit continued to provide due diligence on the Charity's grants and contracts to ensure compliance with the standards and regulations specified by its donors, with support from the US affiliate's Compliance team and the Internal Audit. Additionally, International Medical Corps continues to be a member of the Core Humanitarian Standard (CHS) Alliance and continues to monitor its compliance with the Humanitarian Accountability Framework.

GOAL	COMMENT
Improve high-level donor interaction	Robust interaction with International Medical Corps (UK)'s donors continued at all levels throughout the year.
To improve on effective donor intelligence	Regular communications with donor agencies were maintained, to ensure that relevant opportunities were pursued. Active participation in UK NGO forums and direct communication with FCDO were prioritised, to ensure that humanitarian relief is prioritised following the UK's exit from the European Union and other governmental efforts to shape the sector.
Compliance with reporting deadlines and improved performance on complementary information requests	The Charity remains compliant with donor reporting requirements.

INNOVATION: 'Challenging the norm to minimise inefficiency and maximise impact'

GOAL	COMMENT
Encouraging a culture of creativity and problem solving	Organisation-wide information management systems are being used to obtain real-time reports integrating key indicators across finance, programme delivery, human resources and logistics, to ensure effective implementation of programmes. A variety of projects continue, with the aim of improving the efficiency of key areas affecting delivery of programme activities. Cross-functional platforms also ensure that real-time information is available and applied in decision making and operations.

External representation and engagement

International Medical Corps (UK)'s Technical Unit members continued to represent the Charity in forums both within the UK and abroad, and make contributions to global discussions on sectoral issues.

INTERNATIONAL MEDICAL CORPS (UK)'S HUMANITARIAN ASSISTANCE FOR THE FINANCIAL YEAR 2021/2022

EMERGENCY RESPONSE AND PREPAREDNESS

While we continued our COVID-19 response around the world, we responded to a number of rapid-onset emergencies. When war broke out in Ukraine, we quickly expanded our relief efforts—supporting mobile medical and mental health services, providing medicines and medical equipment and supplies, rehabilitating health facilities and conducting a range of other activities inside Ukraine and in neighbouring countries. When conflict escalated in Afghanistan, we launched mobile teams in Kabul to provide emergency services to displaced people. And in India and Nepal, we responded to a devastating surge in COVID-19, providing much-needed equipment and medicines.

NUTRITION AND FOOD SECURITY

Over recent years, Lebanon has witnessed economic and political unrest, leaving many of the most vulnerable unable to meet their basic needs. International Medical Corps addressed this dangerous combination of lack of food and inability to access healthcare by providing malnutrition screening services and follow-up care.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT(MHPSS)

As part of a programme to strengthen and promote access to MHPSS services in Jordan, International Medical Corps provided case-management services, workshops, training sessions and other activities aimed at building the country's capacity—reaching 1,024 people in refugee and host communities across four governates.

WATER, SANITATION AND HYGIENE (WASH)

Conflict, population displacement and the collapse of the previous administration in Afghanistan caused a humanitarian crisis that is further compounded by drought. International Medical Corps stepped in to protect at-risk refugees and returnees with WASH services.

WOMEN'S AND CHILDREN'S HEALTH

A cycle of violence has left the Central African Republic facing one of the most serious humanitarian crises in the world. As part of our work to help those affected by the conflict, we provided emergency protection and gender-based violence prevention and support services for women and girls.

HEALTH SERVICES SUPPORT

Since the start of the pandemic, India has recorded more than 44 million confirmed cases of COVID-19 and more than 528,000 confirmed deaths. In response to this emergency, International Medical Corps (UK) worked with partners to support 72 healthcare facilities with equipment and supplies to provide treatment and vaccinations.

INSTITUTIONAL DONOR SUPPORT FOR INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

To fulfil its mission and to undertake the abovementioned activities, International Medical Corps (UK) received grants from the following private and international donor agencies during the year. The Charity gratefully acknowledges their support.

ACF Canada	Action Against Hunger, Canada
ACF Spain	Action Against Hunger, Spain
ACF US	Action Against Hunger, US
AVAAZ	Avaaz
AstraZeneca	AstraZeneca UK Limited
CESVI	Cooperazione E Sviluppo Italy
DAHW	Deutsche Lepra- und Tuberkulosehilfe e.V.
DFAT Australia	Department of Foreign Affairs and Trade Australia
FCDO (formerly DFID)	Foreign, Commonwealth & Development Office (formerly- Department for International Development UK)
EC	European Commission
ECHO	European Commission Humanitarian Aid & Civil Protection
France MOFA	France Ministry of Europe and Foreign Affairs
GAC	Global Affairs Canada
GIZ	The Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
IOM	International Organization for Migration
IRC	The International Rescue Committee
Irish Aid	Irish Aid
King Salman Humanit. Aid	King Salman Humanitarian Aid and Relief Center
LDS	Latter Day Saints
MENTOR	MENTOR Initiative
MINBUZA	Ministry of Foreign Affairs Netherlands
MOFAIC UAE	Ministry of Foreign Affairs and International Cooperation, UAE
Misereor	Misereor
NPT UK	NPT Transatlantic Limited
Plan Int. Australia	Plan International Australia
PUI	Première Urgence Internationale
Start Network	Start Network
Swiss FDFA	Swiss Federal Department of Foreign Affairs
The Inflexion Foundation	The Inflexion Foundation
The Volant Trust	The Volant Charitable Trust
UNDP	United Nations Development Fund
UNFPA	United Nations Population Fund

UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
United Group BV	United Group BV
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
Vitol Foundation	Vitol Foundation
WFP	World Food Programme
WHO	World Health Organisation
WV	World Vision
ZOA Netherlands	Stichting ZOA

PRIVATE DONOR SUPPORT OF INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES	
Alex Glennon	Inner Wheel
Andor Charitable Trust	Mercers
Azets	RKT Charitable Trust
Bloomberg	Sopra Steria
Cello Health	Springer Nature
Charities Trust	Take Two Software
Fulmer Trusts' donation	Thomas Lloyd Group
GM Morrison Charitable Trust	Triple Dot Studio
Hitachi Group	

FUNDRAISING, COMMUNICATIONS AND MARKETING ACTIVITIES

During the year, International Medical Corps (UK) has received donations from institutional donors, corporates, trusts and foundations, as well as private individuals. International Medical Corps (UK) and its US affiliate seek to raise funds to sustain its programmes across all countries where they work, as well as funds to fill gaps, support immediate emergency responses and implement innovative programmes.

The Charity responds to requests for proposals issued by institutional donors such as FCDO, UN agencies and by private sector donors. The Charity works closely with its affiliate to raise funds from corporations and foundations for emergency response activities and ongoing programmes. International Medical Corps (UK) undertakes due diligence on both the financial and reputational dealings of potential partners before accepting donations.

International Medical Corps (UK) also utilises multiple fundraising channels, with the goal of raising funds from as diversified a base of supporters as possible. These channels include annual giving programmes and online appeals, in addition to outreach through social media, the website and other reputable online platforms that display clear terms and conditions, including General Data Privacy Regulations (GDPR) compliance.

International Medical Corps (UK) and its affiliate did not employ any commercial fundraising firm to solicit individuals via telephone or door to door during the reported period. Protecting vulnerable people and other members of public is a key consideration in cultivating a supporter base for the Charity's work. The Charity and its US affiliate actively monitor all efforts to raise funds from the public, in particular vulnerable people. International Medical Corps (UK) did not receive any complaints about its fundraising activities during the reported period.

Although International Medical Corps (UK) is not registered with the UK Fundraising Regulator, the Charity has regard for and adheres to the principles and practices set out in the Code of Fundraising Practices.

International Medical Corps (UK) and its affiliate are in compliance with GDPR and protect individuals' personal information. The communications team of International Medical Corps (UK) monitors and moderates our email and social media accounts, and any complaints or concerns regarding fundraising activities are reviewed and responded to by senior management. Fundraising activities also are monitored by the senior leadership of International Medical Corps (UK), which shares regular reporting with the trustees.

INVESTMENT POLICY

Due to the nature of the Charity's programmes and funding cycles of its major donors, the Charity keeps its financial assets liquid.

RISK MANAGEMENT

A culture of risk management and mitigation is embedded in the organisation. A risk register is used by management and the trustees to examine and monitor risks to the organisation.

The register identifies and prioritises risk in relation to the likelihood and the level of impact it would have on the organisation and outlines measures in place to safeguard the company's assets against such risk. The risk categories are defined below:

- Organisational risk;
- Strategic and management risk;
- Operational risk;
- People;
- Financial risk.

The board of trustees seeks to ensure that systems are in place to monitor, manage and mitigate International Medical Corps (UK)'s exposure to major risks which are reviewed periodically. It is also recognised that the nature of the Charity's work requires active acceptance and management of risks when undertaking activities in order to achieve the objectives of the Charity.

The key business risks to the Charity continue to include the unexpected loss of funding from key donor organisations and major disruptions to programmes in countries resulting from factors either within or beyond the organisation's control. The Board of Trustees for International Medical Corps (UK) continues to implement measures to mitigate these risks, including review of the reserves policy, the introduction of new technology to ensure that assets are safeguarded to the extent possible, the continued reference to a balanced business scorecard and reviews into the Charity's funding base. These are further summarised in the table below:

KEY RISKS	TRUSTEES' PLANS TO MITIGATE THE RISK
Insufficient unrestricted reserves	The Charity continues to make sustained efforts to expand its supporter base. The Charity intends to continue to work with its institutional donors to continue delivering activities in the most hard-to-reach areas, thereby receiving contributions towards its corporate costs, and work with its US affiliate to keep effective control of its cost structure.
Adverse payment terms offered by donors affecting the liquidity of the Charity	Charity's liquidity position is closely monitored, and close collaborations are maintained with donor stakeholders to ensure life-saving activities are not impacted by liquidity issues.
Future funding opportunities affected by Brexit and developments in the UK's Foreign and Development policies	International Medical Corps (UK) continues to pursue European Union funding streams where eligible. At the same time the Charity continues to engage with FCDO & other institutional donors on existing and potential portfolios.
Inadequate assessment, resulting in poor programming decisions and implementations	International Medical Corps continues to invest in country-specific assessments, to ensure a relevant and quality orientated programme design.

Exposure to movement in foreign currency rates, affecting international operations	The Charity's principal currency exposures arise from translations of European and other donor monies received into US dollars, the main operational currency advanced to its field missions overseas. The continued fluctuations of currencies against USD can adversely affect International Medical Corps (UK)'s ability to deliver programmes sustainably. Within this context, global treasury management, consisting of International Medical Corps' and International Medical Corps (UK)'s senior staff, created in July 2018, continues to ensure effective use of donor funds.
Operations in sanctioned countries through the Charity's US affiliate	Donors and stakeholders are kept up to date with developments and emerging risks affecting programme implementation in sanctioned countries.

FINANCIAL REVIEW

Statement of Principal Financial Management Policies Adopted in the Year

It is the policy of International Medical Corps (UK) to maintain effective financial and other programmatic management systems with its US affiliate. Efficient budgeting, accounting, financial reporting and auditing systems are employed throughout the organisation, to meet the management and programmatic needs at various levels, and to be accountable to its donors and supporters.

This year, International Medical Corps (UK)'s total income was $121,164,472 (2021: $116,105,525). Of this, the total cash income received from institutional donors and supporter base was $102,485,905 (2021: $100,404,175). International Medical Corps (UK) was able to secure $16,385,054 (2021: $14,747,030) of gifts-in-kind, comprising food, medicines and supplies.

During the reporting period, International Medical Corps (UK) supported training and assistance programmes in 23 (2021: 21) countries through its US affiliate. The Charity's programme expenditures can be disaggregated into the following humanitarian contexts.

	FY 2022	FY 2021
Strengthening health capacity	37%	34%
Emergency response and preparedness	23%	26%
Mental health and psychosocial support	1%	1%
Women & children's health	13%	20%
Water, sanitation and hygiene	3%	2%
Nutrition & food security	23%	17%

Financial Position

The Charity had restricted funds of $25,841,751 as of 30 June 2022 (2021:$15,456,039) and unrestricted funds of $749,981 as of the same date (2021: $580,381). International Medical Corps (UK) receives relevant institutional funding in meeting its restricted charitable expenditure. The balance of free reserves as of 30 June 2022 is $693,819 (2021: $565,481). Free reserves are unrestricted funds less the net book value of the fixed assets.

International Medical Corps (UK) committed resources from unrestricted reserves to provide adequate support for growth in charitable activities and to ensure compliance with growing donor regulations. International Medical Corps (UK) continues to rely on its US affiliate's commitment to meet shortfalls in programmes that do not provide full overhead cost recovery.

Reserves Policy

International Medical Corps (UK) requires reserves to:

- fund working capital requirements in the event of unexpected delays in receiving donor funds, to ensure continuity in implementation in the field;
- fund unplanned expenditures arising from programme-related contingencies, such as unforeseen events delaying implementation and leading to no–cost-extensions, and to manage exposure to exchange rate fluctuations;
- finance any gap in funding for projects of strategic importance to the Charity and its US affiliate; and
- fund requirements for additional corporate costs to maintain high-quality assurance over the organisation's programmes.

The Charity aims to maintain a level of unrestricted reserves equivalent to six month's operating expenditure of the Charity's HQ offices, which is $685,000 for FY 2022–23 and this is currently being achieved. Available unrestricted-fund balances in excess of the operational reserves' requirements are utilised to meet the other purposes as outlined above. Operating expenditure considered for reserves excludes transfers made for overseas programmes.

International Medical Corps (UK) continues to apply assessment of new opportunities and accepts projects that support its overhead costs required to maintain acceptable oversight of programme implementation, therefore mitigating the risk of insufficiently resourced projects. International Medical Corps (UK) considers accepting projects that do not fully cover its costs with its US affiliate to ensure sustainability of coverage of any gap in funding. As of 30 June 2022, the Charity held restricted reserves of $25,841,751 (2021: $15,456,039). This represents the total funds received for specific projects that are yet to be spent at 30 June 2022, including projects responding to Ukraine crisis. The increase in restricted funds in the reported period is due to a number of projects starting in the last months of the reported period. These funds have been excluded from specific reserves policy, as they are not for the purposes of general working capital.

As of June 2022, the balance of free reserves was $693,819 (2021: $565,481). The Charity is resolved to maintain an adequate level of reserves and is working with its affiliate to implement a feasible strategy for marketing and public awareness of its work, to cultivate support, but accepts that in the current economic climate this may be difficult. The Charity will respond to the risks identified above as follows.

- In collaboration with its affiliate, the Charity profiles income streams and undertakes projects with acceptable terms. Also, it looks to its affiliate to cover programme funding gaps that the affiliate has reviewed and considered as acceptable.
- The Charity and its affiliate continue to closely monitor the implementation context of quality programmes around the world and resolve operational challenges with its supporters and partners.
- The Charity is part of global treasury platform.
- The Charity's operational flexibility has enabled it to address risks caused by political changes, including Brexit and the effects of the pandemic.

Section 172 Statement

International Medical Corps (UK) complies with section 172 under the Companies Act 2006, which requires our Board of Trustees act in the way that they consider, in good faith, what would be most likely to promote the International Medical Corps (UK)'s impact for our beneficiaries, while considering the long-term effect of decisions on International Medical Corps (UK)'s stakeholders, which includes its beneficiaries, employees, suppliers, partners, the communities it works in and the environment.

Engagement with employees.
International Medical Corps (UK)'s internal stakeholders are its employees. Enhancing employee engagement is an integral part of the culture of the Charity and its implementing affiliates. Senior management are actively involved in the engagement of colleagues through

regular electronic communications, staff meetings and periodic Town Hall meetings that include employees working across the world. The trustees receive updates on employee matters from the Managing Director during board meetings. During the COVID-19 pandemic, enhanced support has been provided to our employees. International Medical Cops (UK) undertakes regular salary reviews to ensure that salaries for the UK contracted staff are competitive within the sector in the UK.

Engagement with Other Stakeholders

- Our beneficiaries. As a recognised first responder, we provide emergency relief, often within hours, to those hit by disaster, disease and conflict, no matter where they are, no matter what the conditions. International Medical Corps (UK) continuously monitors programme activities through effective internal reporting. We have a strict Code of Conduct and safeguarding processes in place to ensure the security and safety of our beneficiaries.
- Our partners in project delivery. Our partnerships are critical to ensuring that we deliver programmes in the most hard-to-reach locations. We collaborate with other international and local NGOs when these partnerships bring greater benefits to the people we serve.
- Our supporters and donors. Our donors are primarily institutional, including the UK Foreign, Commonwealth and Development Office (FCDO), UN agencies, Global Affairs Canada and many others. We are committed to delivering timely, high-quality, lifesaving humanitarian assistance, and to reporting on the impact of our work. We report to our donors, and publicise our work on our website, social media and other platforms.
- Our suppliers. We are committed to eradicating modern slavery and trafficking in persons and engage with our suppliers to promote the highest standards.
- Our wider communities and the environment. Our policies and procedures include safe environmental protection in the different countries where we work. Our programmes aim to reduce excess morbidity and mortality associated with potential exposure to environmental factors. For example, on a project-by-project basis, our teams assess the risks associated with healthcare waste and with the disposal of expired medicines.

INTERNATIONAL MEDICAL CORPS (UK) PLANS FOR 2022/2023

International Medical Corps (UK) plans are to:

1. expand opportunities for applied research to improve the impact of providing healthcare for vulnerable communities, in line with its mission;
2. achieve institutional income of $122million during the 12-month period to 30 June 2023;
3. continue to expand the organisation's number of partnerships and non-traditional donors;
4. expand the organisation's global profile through increased awareness of its activities;
5. review and strengthen current internal processes employed by its US affiliate, with a view to increasing organisational efficiency; and
6. continue to work with its US affiliate to apply new technology and systems that mitigate risks specific to the sector in general.

The Trustees' Report incorporating the strategic report is approved by the trustees and signed on their behalf by:



Andrew Géczy
Approved by the board of trustees on:

31 January 2023

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF INTERNATIONAL MEDICAL CORPS (UK)

OPINION

We have audited the financial statements of International Medical Corps (UK) (the 'charitable company') for the year ended 30 June 2022 which comprise the statement of financial activities, the balance sheet, and statement of cash flows, the principal accounting policies and the notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 30 June 2022 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

CONCLUSIONS RELATING TO GOING CONCERN

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

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

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

OTHER INFORMATION

The trustees are responsible for the other information. The other information comprises the impact report for International Medical Corps and its affiliates worldwide included in pages 4 to 26, together with information included in the trustees' report, including the strategic report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

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

We have nothing to report in this regard.

OPINIONS ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006

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

- the information given in the trustees' report, which is also the directors' report for the purposes of

company law and includes the strategic report, for the financial year for which the financial statements are prepared is consistent with the financial statements; and

- the trustees' report, which is also the directors' report for the purposes of company law and includes the strategic report, has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report including the strategic report. We have nothing to report in respect of the following matters in relation to which the 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.

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the trustees' responsibilities statement, the trustees (who are also the directors of the charitable company 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, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- The engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities, and skills to identify or recognise non-compliance with applicable laws and regulations;
- We identified the laws and regulations applicable to the charitable company through discussions with management and from our knowledge and experience of the charity sector;
- We focused on specific laws and regulations in both the UK and overseas, which we considered may have a direct material effect on the financial statements or the activities of the charitable company. These included but were not limited to the Charities Act 2011, the Companies Act 2006, Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable to the United Kingdom and Republic of Ireland (FRS 102) (effective 1 January 2019);
- We have assessed the processes in place to ensure that the implementors of programmes are aware of and comply with UK laws and regulations;
- We have assessed the processes in place to ensure that that in country laws and regulations are followed; and
- We assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and review of minutes of trustees' meetings.

We assessed the susceptibility of the charitable company's financial statements to material misstatement,

including obtaining an understanding of how fraud might occur, by:

- Making enquiries of management as to where they considered there was susceptibility to fraud,
- their knowledge of actual, suspected, and alleged fraud; and
- Considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.

To address the risk of fraud through management bias and override of controls, we:

- Performed analytical procedures to identify any unusual or unexpected relationships;
- Tested and reviewed journal entries to identify unusual transactions;
- Tested the authorisation of expenditure;
- Assessed whether judgements and assumptions made in determining the accounting estimates were indicative of potential bias; and
- Investigated the rationale behind significant or unusual transactions.

In response to the risk of irregularities and noncompliance with laws and regulations, we designed procedures which included, but were not limited to:

- Agreeing financial statements disclosures to underlying supporting documentation;
- Reading the minutes of meetings of trustees; and
- Enquiring of management as to actual and potential litigation and claims.

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance. Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities is available on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

USE OF OUR REPORT

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 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 auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Edward Finch (Senior Statutory Auditor)

For and on behalf of Buzzacott LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL



6 February 2023

STATEMENT OF FINANCIAL ACTIVITIES
30 JUNE 2022

	Notes	Unrestricted funds $	Restricted funds $	2022 Total funds $	Unrestricted funds $	Restricted funds $	2021 Total funds $
Income and expenditure							
Income from:							
Donations and legacies	1	3,371,001	17,889,589	**21,260,590**	208,461	15,574,535	15,782,996
Charitable activities	2	–	99,903,882	**99,903,882**	–	100,322,529	100,322,529
Total income		**3,371,001**	**117,793,471**	**121,164,472**	208,461	115,897,064	116,105,525
Expenditure on:							
Raising funds	3	9,500	21,203	**30,703**	7,895	–	7,895
Charitable activities	4	3,191,901	107,386,556	**110,578,457**	274,765	116,410,188	116,684,953
Total expenditure		**3,201,401**	**107,407,759**	**110,609,160**	282,660	116,410,188	116,692,848
Net income/(expenditure)		169,600	10,385,712	**10,555,312**	(74,199)	(513,124)	(587,323)
Transfer between funds		–	–	–	13,413	(13,413)	–
Net movement in funds		169,600	10,385,712	**10,555,312**	(60,786)	(526,537)	(587,323)
Fund balances brought forward at 1 July 2021		580,381	15,456,039	**16,036,420**	641,167	15,982,576	16,623,743
Fund balances carried forward at 30 June 2022		**749,981**	**25,841,751**	**26,591,732**	**580,381**	**15,456,039**	**16,036,420**

The analysis of income and expenditure between funds for the comparative period is shown in the notes to the financial statements.

All of the Charity's activities derived from continuing operations during the above two financial periods.

The Charity has no recognised gains and losses other than those shown above.

BALANCE SHEET
30 JUNE 2022

	Notes	2022 $	2022 $	2021 $	2021 $
Fixed Assets					
Tangible assets	8		61,040		30,307
Current assets					
Stock	9	529,667		234,967	
Debtors	10	14,582,392		7,716,348	
Cash at bank and in hand		11,665,737		8,284,126	
		26,777,796		16,235,441	
Creditors: amounts falling due within one year	11	(247,104)		(229,328)	
Net current assets			26,530,692		16,006,113
Total net assets			**26,591,732**		16,036,420
The funds of the charity					
Restricted funds	12		25,841,751		15,456,039
Unrestricted funds			749,981		580,381
			26,591,732		16,036,420

Approved by the trustees and signed on their behalf by:

Andrew Géczy, Chair



Approved on: 31 January 2023

International Medical Corps (UK): A company limited by guarantee, Company Registration No. 04474904 (England and Wales)

STATEMENT OF CASH FLOWS YEAR TO 30 JUNE 2022

	Notes	2022 $	2021 $
Cash flows from operating activities:			
Net cash provided by (used in) operating activities	A	3,443,942	(9,327,896)
Cash flows from investing activities:			
Purchase of tangible fixed assets		(62,331)	–
Net cash used in investing activities		3,381,611	(9,327,896)
Change in cash and cash equivalents in the year		**3,381,611**	(9,327,896)
Cash and cash equivalents at 1 July 2021	B	**8,284,126**	17,612,022
Cash and cash equivalents at 30 June 2022	B	**11,665,737**	8,284,126

Notes to the statement of cash flows for the year to 30 June 2022

A Reconciliation of net movement in funds to net cash used in operating activities

	2022 $	2021 $
Net movement in funds (as per the statement of financial activities)	10,555,313	(587,323)
Adjustments for:		
Depreciation charge	21,765	60,861
Loss on disposal of fixed assets	9,835	–
(Increase)/decrease in stocks	(294,700)	248,837
(Increase)/decrease in debtors	(6,866,044)	5,164,486
Increase/(decrease) in creditors	17,773	(14,214,757)
Net cash provided by / (used in) operating activities	**3,443,942**	(9,327,896)

B Analysis of cash and cash equivalents

	2022 $	2021 $
Cash at bank and in hand	**11,665,737**	8,284,126
Total cash and cash equivalents	**11,665,737**	8,284,126

PRINCIPAL ACCOUNTING POLICIES 30 JUNE 2022

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are laid out below.

BASIS OF PREPARATION

These financial statements have been prepared for the year to 30 June 2022.

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to these financial statements.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (Charities SORP FRS 102) ((effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The accounts are presented in US dollars and rounded to the nearest dollar. The charity constitutes a public benefit entity as defined by FRS 102.

CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGEMENT

Preparation of the financial statements requires the trustees to make significant judgements and estimates.

The items in the financial statements where these judgements and estimates have been made include:

- The estimation of the value of donated goods distributed in the year and undistributed at the year-end.
- The estimation of the recoverability of accrued income balances.
- The estimation of unrealised foreign exchange difference.
- The treatment of intercompany balances with the charity's implementing affiliates.

ASSESSMENT OF GOING CONCERN

The trustees have assessed whether the use of the going-concern assumption is appropriate in preparing these financial statements. The trustees have made this assessment in respect of a period of one year from the date of approval of these financial statements.

The Charity has free reserves of $693,819 (2021: $565,481), which is above its target as per the reserves policy. The trustees have continued to use the going-concern assumption based on the relationship with its affiliate to cover programme funding gaps and provide cash-flow bridging. The trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

INCOME

Income is recognised in the statement of financial activities when the charity is entitled to the income, the amount can be measured with accuracy and it is probable that the income will be received.

Donations and gifts in kind are included in full in the statement of financial activities when receivable.

Grants receivable are credited to the statement of financial activities in the year in which they are receivable.

DONATED GOODS AND SERVICES

Donated goods, typically comprising medical and food supplies, are recognised as income when the goods are received. Amounts are included in expenditure when the goods are distributed. The balance of goods received but not distributed are included as a stock balance at the year end.

Food and other non-pharmaceutical stocks are valued according to the value placed on the items by the donor.

Pharmaceutical goods received are accounted for at fair value to the Charity with reference to market sources.

EXPENDITURE AND THE BASIS OF APPORTIONING COSTS

Expenditure is included in the statement of financial activities when incurred and includes attributable VAT, which cannot be recovered.

Expenditure comprises the following:

a) Costs of raising funds include the salaries, direct costs and overheads with generating donated income.
b) Costs of charitable activities comprise expenditure on the charity's primary charitable purposes as described in the trustees' report. Such costs include:
   i. Technical advisory services
   ii. Programme management services
   iii. Gifts in kind of donated goods and services
   The majority of costs are directly attributable to specific activities. Certain shared costs are apportioned to activities in furtherance of the objects of the charity. These costs are allocated in the same proportion as directly attributable expenditure.
c) Governance costs comprise the costs incurred by finance, human resources, communications and IT departments, and the trustee costs, which are directly attributable to the management of the Charity's assets, organisational procedures and the necessary legal procedures for compliance with statutory requirements.

TANGIBLE FIXED ASSETS

Items of equipment are capitalised when the purchase price exceeds $500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets capitalised are reviewed for impairment if circumstances indicate that their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life:

- Computers – three years
- Furniture, fixtures and fittings – five years
- Servers – five years

Vehicles and equipment for use in overseas operational programmes are not capitalised but charged in full to expenditure when purchased. This is because the expected useful life is significantly reduced in such programmes and is generally less than one year for the majority of these assets.

FUND ACCOUNTING

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund together with a fair allocation of management and support costs.

Unrestricted funds are donations and other income raised for the objects of the charity.

OTHER OPERATIONAL CURRENCIES

Transactions in US dollars are recorded at transaction value, with no exchange-rate gain or loss. Transactions in other operational currencies are recorded at the calculated monthly average rate. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. Differences arising on retranslation are charged to the statement of financial activities.

LEASED ASSETS

Rentals payable under operating leases, where substantially all the risks and reward of ownership remain with the lessor, are charged to the statement of financial activities over the period of the lease term.

PENSION COSTS

International Medical Corps (UK) sponsors a group personal pension plan. All eligible employees can participate in the scheme and contributions are based on a percentage of annual gross salary.

International Medical Corps (UK) contributes between 3% and 7% of eligible employees' gross earnings. Employees are immediately fully vested in contributions made on their behalf. The Charity is fully staged in its auto-enrolment obligations. Employees may make additional contributions should they wish to do so. Pension costs represent the employer's contributions payable during the year.

DEBTORS

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. They have been discounted to the present value of the future cash receipt where such discounting is material.

CASH AT BANK AND IN HAND

Cash at bank and in hand represents such accounts and instruments that are available on demand or have a maturity of less than three months from the date of acquisition. Deposits for more than three months but less than one year have been disclosed as short-term deposits. Cash placed on deposit for more than one year is disclosed as a fixed asset investment.

CREDITORS AND PROVISIONS

Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

FINANCIAL INSTRUMENTS

The Charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the Charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

BASIC FINANCIAL ASSETS

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price, including transaction costs, and are subsequently carried at amortised cost using the effective interest method, unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts, discounted at a market rate of interest, if material. Financial assets classified as receivable within one year are not amortised.

BASIC FINANCIAL LIABILITIES

Basic financial liabilities, including creditors, bank loans, loans from fellow group companies. Financial liabilities classified as payable within one year are not amortised.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

NOTES TO THE FINANCIAL STATEMENTS YEAR TO 30 JUNE 2022

1 Donations and legacies

	Unrestricted funds $	Restricted funds $	**2022 Total $**
Donation from International Medical Corps	1,982,651	308,265	**2,290,916**
Private grants for projects	–	1,196,270	**1,196,270**
Other Unrestricted Donations	1,385,753	–	**1,385,753**
Donated supplies	–	16,385,054	**16,385,054**
Donated services	1,218	–	**1,218**
Interest Income	1,379	–	**1,379**
2022 Total funds	**3,371,001**	**17,889,589**	**21,260,590**

	Unrestricted funds $	*Restricted funds $*	*2021 Total $*
Donation from International Medical Corps	*157,895*	*796,173*	*954,068*
Private grants for projects	–	*31,332*	*31,332*
Other Unrestricted Donations	*50,314*	–	*50,314*
Donated supplies	–	*14,747,030*	*14,747,030*
Interest Income	*252*	–	*252*
2021 Total funds	208,461	15,574,535	15,782,996

2 Income from charitable activities

	Unrestricted funds $	Restricted funds $	**2022 Total $**
Strengthening health capacity	–	41,438,682	**41,438,682**
Emergency response and preparedness	–	29,696,109	**29,696,109**
Mental health and psychosocial support	–	722,114	**722,114**
Women & children's health	–	14,273,438	**14,273,438**
Water, sanitation and hygiene	–	4,508,274	**4,508,274**
Nutrition and food security	–	9,265,265	**9,265,265**
2022 Total funds	**–**	**99,903,882**	**99,903,882**

	Unrestricted funds $	*Restricted funds $*	*2021 Total $*
Strengthening health capacity	–	*35,968,694*	*35,968,694*
Emergency response and preparedness	–	*33,213,909*	*33,213,909*
Mental health and psychosocial support	–	*1,157,854*	*1,157,854*
Women & children's health	–	*21,245,964*	*21,245,964*
Water, sanitation and hygiene	–	*2,092,262*	*2,092,262*
Nutrition and food security	–	*6,643,846*	*6,643,846*
2021 Total funds	–	*100,322,529*	*100,322,529*

3 Expenditure on raising funds

	Unrestricted funds $	Restricted funds $	**2022 Total $**
Fundraising staff costs	2,665	–	**2,665**
Other fundraising costs	6,835	21,203	**28,038**
2022 Total funds	**9,500**	**21,203**	**30,703**

	Unrestricted funds $	*Restricted funds $*	*2021 Total $*
Fundraising staff costs	*2,895*	–	*2,895*
Other fundraising costs	*5,000*	–	*5,000*
2021 Total funds	7,895	–	*7,895*

4 Expenditure on charitable activities

	Activities undertaken directly $	Support costs $	**2022 Total $**
Strengthening health capacity	37,551,240	3,047,158	**40,598,398**
Emergency response and preparedness	23,402,253	1,899,015	**25,301,268**
Mental health and psychosocial support	696,126	56,488	**752,614**
Women & children's health	3,365,564	273,104	**3,638,668**
Water, sanitation and hygiene	14,114,434	1,145,339	**15,259,773**
Nutrition and food security	23,149,251	1,878,485	**25,027,736**
2022 Total funds	**102,278,868**	**8,299,589**	**110,578,457**

	Activities undertaken directly $	*Support costs $*	*2021 Total $*
Strengthening health capacity	*36,716,175*	*2,777,137*	39,493,312
Emergency response and preparedness	*28,432,624*	*2,150,586*	30,583,210
Mental health and psychosocial support	*1,202,527*	*90,957*	1,293,484
Women & children's health	*21,731,218*	*1,643,705*	23,374,923
Water, sanitation and hygiene	*2,236,106*	*169,135*	2,405,241
Nutrition and food security	*18,161,113*	*1,373,670*	19,534,783
2021 Total funds	*108,479,763*	*8,205,190*	116,684,953

4 Charitable activities (continued)

Support costs are allocated to projects in line with the level of direct expenditure as this best reflects the level of support required by each project.

Costs of charitable activities can be further analysed as follows:

	Activities undertaken directly $	Support costs $	**2022 Total $**
Staff costs	35,693,805	1,909,753	**37,603,558**
Donated supplies and services	16,090,353	10,529	**16,100,882**
Auditor's remuneration			
• Statutory audit	–	46,265	**46,265**
Other costs	50,494,710	6,333,042	**56,827,752**
2022 Total	**102,278,868**	**8,299,589**	**110,578,457**

	Activities undertaken directly $	*Support costs $*	*2021 Total $*
Staff costs	*42,223,994*	*1,831,929*	*44,055,923*
Donated supplies and services	*14,995,867*	*10,529*	*15,006,396*
Auditor's remuneration			
• *Statutory audit*	–	*50,031*	*50,031*
Other costs	*51,259,902*	*6,312,701*	*57,572,603*
2021 Total	*108,479,763*	*8,205,190*	*116,684,953*

4 Charitable activities (continued)

	Unrestricted funds $	Restricted funds $	**2022 Total $**
Strengthening health capacity	1,171,893	39,426,505	**40,598,398**
Emergency response and preparedness	730,333	24,570,935	**25,301,268**
Mental health and psychosocial support	21,725	730,889	**752,614**
Women & children's health	440,481	14,819,292	**15,259,773**
Water, sanitation and hygiene	105,032	3,533,636	**3,638,668**
Nutrition and food security	722,437	24,305,299	**25,027,736**
2022 Total funds	**3,191,901**	**107,386,556**	**110,578,457**

	Unrestricted funds $	*Restricted funds $*	*2021 Total $*
Strengthening health capacity	*92,997*	*39,400,315*	*39,493,312*
Emergency response and preparedness	*72,016*	*30,511,194*	*30,583,210*
Mental health and psychosocial support	*3,046*	*1,290,438*	*1,293,484*
Women & children's health	*55,042*	*23,319,881*	*23,374,923*
Water, sanitation and hygiene	*5,664*	*2,399,577*	*2,405,241*
Nutrition and food security	*46,000*	*19,488,783*	*19,534,783*
2021 Total funds	*274,765*	*116,410,188*	*116,684,953*

5 Employees and staff costs

Staff costs during the year were as follows:

	2022 Total $	2021 Total $
Wages and salaries	**1,639,323**	*1,601,418*
Social security costs	**182,005**	*142,361*
Other pension costs	**88,425**	*88,150*
Total UK staff costs	**1,909,753**	*1,831,929*
International Medical Corps Worldwide on International Medical Corps (UK) projects	**35,693,805**	*42,223,994*
Total staff costs	**37,603,558**	*44,055,923*

The average number of employees during the year, analysed by function, was as follows:

	2022 No	2021 No
UK staff	**25**	26

5 Employees and staff costs (continued)

International Medical Corps (UK) contributes towards the salaries of a number of staff overseas and on local projects. Such staff may have only part of their salaries charged to projects; however, it is not meaningful to provide a full-time equivalent figure. The estimated number of such staff employed in the year was 2,546 (2021: 2,764).

The number of employees who earned £60,000 or more (including taxable benefits but excluding employer pension contributions) during the year was as follows:

	2022 No	2021 No
£60,000 – £70,000	**1**	–
£70,001 – £80,000	**2**	*3*
£80,001 - £90,000	**1**	–
£100,001- £110,000	**–**	*1*
£110,001 - £120,000	**1**	–

Key management personnel comprise those set out on page 31. The total remuneration paid to key management personnel in the year was $571,161 (2021: $549,480).

	2022 $	2021 $
Wages and salaries	**477,202**	*460,543*
Social security costs	**60,587**	*56,699*
Employer pension costs	**33,372**	*32,238*
Total costs	**571,161**	*549,480*

6 Trustees' remuneration

None of the trustees received any remuneration in respect of their services during either of the years under review.

No trustee expenses were incurred during the period (2021- £nil).

7 Taxation

International Medical Corps (UK) is a registered charity and therefore is not liable to corporation tax on income or capital gains derived from its charitable activities or use of assets, as it falls within the various exemptions available to registered charities.

The Charity is not registered for VAT and, accordingly, all expenditure is recorded inclusive of any VAT incurred.

8 Tangible fixed assets

	Office equipment $
Cost	
Total cost at 1 July 2021	413,610
Additions	62,331
Disposals	(37,881)
Total cost and 30 June 2022	**438,060**
Depreciation	
Aggregate depreciation as at 1 July 2021	383,303
Charge for the year	21,765
Disposals	(28,048)
Aggregate depreciation as at 30 June 2022	**377,020**
Net book values	
As at 30 June 2022	**61,040**
As at 30 June 2021	30,307

9 Stocks

	2022 $	2021 $
Donated goods received but not distributed	**529,667**	234,967

10 Debtors

Due within one year	2022 $	2021 $
Prepayments and deposits	**89,184**	*119,618*
Accrued income	**10,990,635**	*6,976,569*
Other debtors – Accounts Receivable	**2,388**	*45,298*
Amount receivable from IMC Croatia	**10,277**	*7,595*
Amount receivable from IMC	**3,483,188**	*560,548*
Emergency response stock	**6,720**	*6,720*
	14,582,392	*7,716,348*

11 Creditors: amounts falling due within one year

	2022 $	2021 $
Trade creditors	**13,292**	*5,485*
Accruals	**233,812**	*223,843*
	247,104	*229,328*

12 Restricted funds

The funds of the Charity include restricted funds comprising the following unexpended balances of donations held on trusts to be applied for specific purposes:

	At 1 July 2021 $	Income $	Expenditure $	At 30 June 2022 $
Strengthening health capacity	5,022,230	42,208,128	39,290,851	**7,939,507**
Emergency response and preparedness	8,350,342	29,812,157	24,486,394	**13,676,105**
Mental health & psychosocial support	10,028	722,114	728,375	**3,767**
Women & children's health	909,437	14,734,514	14,768,305	**875,646**
Water, sanitation and hygiene	402,030	4,876,957	3,521,478	**1,757,509**
Nutrition and food security	607,898	23,935,066	24,221,671	**321,293**
Restricted by country	154,074	1,504,535	390,685	**1,267,924**
	15,456,039	**117,793,471**	**107,407,759**	**25,841,751**

Restricted funds are analysed by the type of activity to which the funds relate. All restricted funds are held to carry out activities under these headings.

Transfers between funds relate to surplus funds on contracts which have been used for general purposes in line with donor requirements.

13 Analysis of net assets between funds

	Unrestricted funds $	Restricted funds $	**Total 2022 $**
Fund balances at 30 June 2022 are represented by:			
Fixed assets	56,162	4,878	**61,040**
Current assets	693,819	26,083,977	**26,777,796**
Creditors: amounts falling due within one year	–	(247,104)	**(247,104)**
2022 Total net assets	**749,981**	**25,841,751**	**26,591,732**

	Unrestricted funds $	*Restricted funds $*	*Total 2021 $*
Fund balances at 30 June 2021 are represented by:			
Fixed assets	*14,900*	*15,407*	*30,307*
Current assets	*565,481*	*15,669,960*	*16,235,441*
Creditors: amounts falling due within one year	–	*(229,328)*	*(229,328)*
2021 Total net assets	*580,381*	*15,456,039*	*16,036,420*

14 International Medical Corps (UK) flagship areas

International Medical Corps (UK) continued to operate during the financial year to 30 June 2022 under the main flagship areas of strengthening health capacity, emergency response and preparedness, mental health and psychosocial support, women and children's health, water, sanitation and hygiene (WASH) and nutrition and food security.

15 Related party transactions

On 1 November 2002, International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps, a US-based non-profit organisation, to share certain services in connection with its operations. International Medical Corps agreed to assist International Medical Corps (UK) in the achievement of its charitable objectives: to relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and healthcare projects.

On 1 July 2019 International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps Croatia, a Croatian based non-profit organisation, to share certain services in connection with its operations.

Given the close operating relationship between International Medical Corps and International Medical Corps (UK) there are a number of connected persons between the two organisations at management and trustee level. These connected persons include Nancy A Aossey, who is a founding Trustee of International Medical Corps (UK), and the President and CEO of International Medical Corps, as well as a member of its board. C. William Sundblad, a Trustee of International Medical Corps (UK) is also the Chief Knowledge Officer of International Medical Corps.

During the year ended 30 June 2022, International Medical Corps billed International Medical Corps (UK) $6,923,408 (2021: $6,806,743) in lieu of service fee as per Article 5 of the Administrative Services Agreement. During the same period, International Medical Corps (UK) has rendered services to International Medical Corps of $823,601 (2021: $776,778).

During the year ended 30 June 2022, International Medical Corps Croatia billed International Medical Corps (UK) $28,415 (2021: $17,270). During the same period International Medical Corps (UK) has rendered services to International Medical Corps Croatia of $132,154 (2021: $68,908).

16 Liability of members

The Charity is constituted as a company limited by guarantee. Each member has undertaken to contribute £1 to the assets of the company to meet its liabilities if called on to do so.

17 Contingent liability

Due to the nature of the Charity's agreement with donors, the Charity's expenditure is often subject to audit or other review by representatives of donors in a subsequent accounting period. There is a possibility that these audits or reviews would identify expenditures that do not fall within the terms of the grant agreements, and so the Charity would be required to repay the monies received. The trustees are not aware of any material circumstances in the year to 30 June 2022 that could give rise to such liability (2021: none).

18 Operating leases

International Medical Corps (UK) exited from its former office lease and moved to new office premises during September 2022. The lease obligations for the new office premises are outside the reported period of the audited financial statements and will be reported in future periods. The total of future minimum lease payments under non-cancellable operating leases as at 30 June 2022 is as follows:

	Gross commitment $	*Less sublease $*	Land and buildings Net commitment $	*Equipment $*	**Total 2022 $**
Due within one year	39,815	(23,226)	16,589	757	**17,346**
Due between 2 and 5 years	–	–	–	–	**–**
Over 5 years	–	–	–	–	**–**
	39,815	**(23,226)**	**16,589**	**757**	**17,346**

	Gross commitment $	*Less sublease $*	*Land and buildings Net commitment $*	*Equipment $*	*Total 2021 $*
Due within one year	*181,243*	*(105,725)*	*75,518*	*1,723*	*77,241*
Due between 2 and 5 years	*654,959*	*(382,059)*	*272,900*	*861*	*273,761*
Over 5 years	–	–	–	–	–
	836,202	*(487,784)*	*348,418*	*2,584*	*351,002*

CHARITABLE ACTIVITIES DETAILED ANALYSIS FOR THE YEAR ENDED 30 JUNE 2022

The following pages (pages 64-71) do not form part of the statutory financial statements.

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY

For certain projects, closeout adjustments have resulted in negative charitable Income and expenditure adjustments.

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable expenditure
Afghanistan	GAC	204154	633,559	1,027,929
Afghanistan	UNOCHA	204059	–	114,701
Afghanistan	UNOCHA	204365	544,282	251,497
Afghanistan	UNOCHA	204439	13,393	13,393
Cameroon	UNHCR	203318	(1,366)	–
Cameroon	UNHCR	204095	294,834	530,440
Central African Republic	EC	203593	3,133,120	3,147,437
Central African Republic	EC	204406	261,970	261,970
Central African Republic	ECHO	204057	94	94
Central African Republic	LDS	204265	300,025	192,789
Central African Republic	MENTOR	203734	1,036,508	1,036,508
Central African Republic	UNDP	203839	(558)	–
Central African Republic	UNOCHA	204248	320,000	313,134
Central African Republic	UNOCHA	204416	160,000	155,756
Ethiopia	UNOCHA	204001	(1,275)	–
Ethiopia	UNOCHA	204273	480,249	579,841
Ethiopia	UNOCHA	204377	200,000	35,939
Ethiopia	UNWOMEN	204082	164,023	164,023
India	LDS	204207	283,025	283,025
Iraq	French MOFA	203956	(58,156)	421
Iraq	LDS	204183		497,312
Jordan	Anonymous.	204155	19,929	80,857
Jordan	UNHCR	204086	9,853,765	10,578,753
Jordan	UNHCR	204316	9,651,628	9,690,489
Lebanon	GAC	203871	1,185,656	2,988,439
Lebanon	GAC	204375	2,347,051	562,208
Lebanon	Anonymous	204277	270,000	185,720
Lebanon	UNOCHA	204256	564,704	417,081
Libya	GIZ	203680	1,100,879	1,416,536
Libya	GIZ	204119	8,569	20,280
Mali	UNICEF	203940	(45,954)	(37,229)

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY (CONTD.)

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable expenditure
Pakistan	GIZ	204196	145,774	150,806
Palestinian Territory	NPT UK	203957	120,000	484,004
Somalia	WV	204131	13,192	13,192
Somalia	WV	204312	5,731	5,731
Somalia	WV	204423	2,817	3,919
South Sudan	UNOCHA	204243	1,248,818	1,348,474
Sudan	EC	203408	94,690	94,690
Sudan	UNHCR	204430	46,050	38,375
Sudan	UNICEF	204286	302,634	300,312
Syria	DAHW	204335	24,673	8,620
Syria	Swiss FDFA	204341	831,532	831,532
Venezuela	GAC	204405	963,809	53,356
Venezuela	UNOCHA	204302	303,623	407,473
Yemen	Avaaz	204168	–	199,080
Yemen	Misereor	204122	(4,068)	32,521
Yemen	MOFAIC	204319	3,000,000	154,231
Yemen	The Inflexion Foundation	204136	–	27,469
Yemen	UNOCHA	204109	139,200	312,304
Yemen	UNOCHA	204328	618,333	205,013
Zimbabwe	UNICEF	204428	861,920	110,405
Total Strengthening Health Capacity			**41,438,682**	**39,290,850**

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Afghanistan	UNOCHA	204276	393,449	393,449
Cameroon	KSRelief	204296	28,867	28,867
Central African Republic	IOM	204013	7,967	7,362
Central African Republic	KSRelief	204296	22,317	22,317
Democratic Rep of Congo	KSRelief	204031	–	61,271
Democratic Rep of Congo	KSRelief	204296	44,486	44,486
Democratic Rep of Congo	WHO	203621	(5,242)	–
Democratic Rep of Congo	WHO	203637	(769)	–
Democratic Rep of Congo	WHO	203710	(1,819)	–
Ethiopia	UNICEF	204112	1,060,027	1,108,639
Ethiopia	UNOCHA	204098	100,017	221,558
Ethiopia	UNOCHA	204274	375,370	240,726
Ethiopia	WHO	204068	(9,513)	–
Global	KSRelief	204031	–	128,139
Global ERU	KSRelief	204296	1,029,805	27,170
Iraq	FCDO	203500	1,902,227	1,902,227
Iraq	FCDO	204380	635,358	635,358
Iraq	French MOFA	204173	(4,440)	2,507,069
Iraq	French MOFA	204301	4,512,000	2,099,384
Iraq	GAC	203847	1,283,517	1,283,517
Iraq	GAC	204378	378,397	378,397
Iraq	KSRelief	204296	81,985	81,985
Iraq	The Volant Trust	204171	–	35,115
Iraq	UNOCHA	204317	472,500	410,064
Jordan	KSRelief	204031	–	400,096
Jordan	KSRelief	204296	47,991	47,991
Lebanon	UNOCHA	204024	(78,997)	397,535
Libya	KSRelief	204031	–	32,483
Libya	Start Network	203935	–	(124,167)
Middle East	FCDO	203500	1,062,798	1,523,493
Middle East	FCDO	204380	437,804	439,379
Middle East	GAC	203847	299,991	1,976,731

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS (CONTD.)

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Middle East	GAC	204378	3,345,303	291,378
Middle East	UNOCHA	203879	(0)	2,514
Pakistan	CESVI	204042	204,240	204,240
Pakistan	KSRelief	204296	73,212	73,212
Palestinian Territory	KSRelief	204031	–	347,790
Philippines	KSRelief	204031	–	45,327
Philippines	KSRelief	204296	49,115	49,115
Poland	Multi-donor	204388	288,679	39
Somalia	KSRelief	204296	24,594	24,594
South Sudan	UNICEF	203774	344,436	344,436
South Sudan	UNOCHA	203972	(571)	(571)
South Sudan	UNOCHA	204279	296,026	296,026
Sudan	UNOCHA	204066	386	386
Syria	FCDO	203500	1,409,513	1,409,513
Syria	FCDO	204380	352,298	352,298
Syria	GAC	203847	1,177,591	1,177,591
Syria	GAC	204378	187,745	187,745
Syria	UNOCHA	204239	355,179	344,486
Ukraine	AstraZeneca	204389	1,000,000	17
Ukraine	LDS	204390	1,000,025	174,624
Ukraine	Plan Int. Australia	204442	923,390	8
Ukraine	Plan Int. Netherlands	204412	1,429,380	61,736
Ukraine	United Group BV	204394	857,280	306,584
Ukraine	Vitol Foundation	204429	324,380	708
Venezuela	KSRelief	204296	54,129	54,129
Yemen	ECHO	203963	(1,696)	(1,696)
Yemen	GAC	203922	807	1,940,890
Yemen	GAC	204374	1,564,578	299,951
Yemen	UNOCHA	204245	360,000	188,686
Total Emergency Response and Preparedness			**29,696,112**	**24,486,397**

PROJECTS CATEGORISED UNDER MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable expenditure
Cameroon	UNHCR	203688	(7,686)	1
Cameroon	UNICEF	203976	72,098	72,098
Ethiopia	UNICEF	204011	12,851	12,851
Jordan	GIZ	204282	457,824	457,824
Jordan	UNSW	203611	–	1,732
Libya	DRC	203749	(244)	(3,403)
Libya	GIZ	204369	187,272	187,272
Total Mental Health and Psychosocial Support			**722,115**	**728,375**

PROJECTS CATEGORISED UNDER WATER, SANITATION AND HYGIENE

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable expenditure
Afghanistan	UNICEF	203811	207,395	273,400
Afghanistan	UNICEF	204310	860,468	217,644
Afghanistan	UNOCHA	204264	243,658	177,161
Afghanistan	UNOCHA	204368	439,032	46,125
Ethiopia	UNHCR	204326	1,072,570	1,357,672
Ethiopia	UNHCR	204393	302,326	302,326
Ethiopia	UNOCHA	204275	528,110	309,047
Ethiopia	UNOCHA	204376	378,783	98,224
Libya	GIZ	204433	32,628	32,628
Yemen	UNOCHA	204117	439,457	654,951
Zimbabwe	UNICEF	203988	–	188
Zimbabwe	UNICEF	204174	3,846	52,112
Total Water, Sanitation and Hygiene			**4,508,273**	**3,521,478**

PROJECTS CATEGORISED UNDER WOMEN & CHILDREN'S HEALTH

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Afghanistan	UNFPA	204088	279,685	285,427
Afghanistan	UNFPA	204309	317,288	491,184
Afghanistan	UNOCHA	204295	167,362	161,540
Cameroon	UNFPA	204266	62,464	67,579
Cameroon	UNHCR	203525	(11,617)	0
Cameroon	UNHCR	204094	220,447	391,828
Cameroon	UNHCR	204325	206,352	209,982
Central African Republic	IRC	204214	434,315	434,315
Ethiopia	UNHCR	204200	195,798	195,798
Ethiopia	UNHCR	204331	21,881	21,881
Ethiopia	UNHCR	204391	328,155	335,519
Ethiopia	UNOCHA	204083	(10,844)	–
Ethiopia	ZOA Netherlands	203287	330,985	602,737
Iraq	UNOCHA	204012	–	116,918
Jordan	FCDO	203556	(23,114)	–
Jordan	UNICEF	203844	574,112	619,519
Jordan	UNICEF	204093	1,052,965	1,084,659
Jordan	UNICEF	204314	1,036,789	1,036,789
Jordan	UNOCHA	204204	350,000	349,976
Lebanon	Plan Int. Australia	203448	(6,413)	(263)
Lebanon	Plan Int. Australia	204357	185,886	97,746
Lebanon	UNOCHA	204322	227,621	142,593
Libya	UNFPA	203895	3,257	(74,800)
Mali	GAC	204353	727,320	235,781
Mali	UNICEF	204064	310,393	367,585
Nigeria	MINBUZA	204069	603,173	698,122
Nigeria	WFP	204440	3,291	3,291
Pakistan	UNFPA	204084	(622)	–
South Sudan	FCDO	203190	3,761,058	3,764,456
South Sudan	UNFPA	204099	595,864	613,295
South Sudan	UNFPA	204305	583,780	598,759
South Sudan	UNICEF	204260	1,745,807	1,916,087
Total Women and Children's Health			**14,273,438**	**14,768,303**

PROJECTS CATEGORISED UNDER NUTRITION AND FOOD SECURITY

Country	Donor	IMC UK Project Number	Total Charitable Income	Total Charitable Expenditure
Cameroon	UNHCR	204324	357,469	393,308
Cameroon	WFP	203861	296,404	2,331,810
Ethiopia	UNHCR	204097	1,995,607	2,159,723
Ethiopia	UNHCR	204392	–	(3,186)
Ethiopia	WFP	204338	–	545,405
Ethiopia	WFP	204030	241,760	5,260,070
Ethiopia	WFP	204285	75,840	319,410
Global	ACF Canada	204284	6,806	6,806
Global	ACF Canada	204404	140	140
Global	UNICEF	203655	95,341	99,228
Global	UNICEF	204195	3,654	3,654
Jordan	UNICEF	204313	667,650	770,874
Nigeria	WFP	204085	1,098,422	4,642,549
Nigeria	WFP	204307	278,639	1,738,526
Somalia	ACF US	203735	79	79
Somalia	UNOCHA	204300	999,474	1,050,106
South Sudan	IOM	204151	128,599	128,599
South Sudan	UNHCR	203683	(3,813)	–
South Sudan	UNICEF	203695	369,175	514,433
South Sudan	UNOCHA	204072	(2,907)	21,900
South Sudan	UNOCHA	204227	937,126	926,051
South Sudan	WFP	204129	–	1,639
South Sudan	WFP	203859	220,828	369,991
South Sudan	WFP	203860	230,361	486,725
South Sudan	WFP	204304	306,185	591,267
Sudan	ECHO	203743	(16,246)	–
Sudan	WFP	204102	–	84,340
Sudan	WFP	204103	–	48,075
Sudan	WFP	204104	–	52,034
Sudan	WFP	204105	–	56,024
Sudan	WFP	204106	–	3,824
Sudan	WFP	204414	1,115	1,115
Sudan	WFP	204415	627	64,068
Sudan	WFP	204419	2,318	2,318
Sudan	WFP	204425	606	15,027
Sudan	WFP	204436	2,553	17,500
Venezuela	WFP	204431	11,453	11,453
Yemen	UNOCHA	204111	960,000	1,506,785
Total Nutrition and Food Security			**9,265,265**	**24,221,670**

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UKRAINE





PHILIPPINES



HOW YOU CAN HELP

Give hope, give health

There are many ways you can help International Medical Corps (UK) provide lifesaving care and help communities gain self-reliance after a disaster.

INTERNATIONALMEDICALCORPS.ORG.UK/DONATE

WAYS TO GIVE

Become a monthly donor

Make a one-time gift via cheque, credit card, wire transfer or online

Make a gift in honour of a loved one

Make a gift of stocks or mutual funds

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Make a gift via your donor-advised fund

Choose a Gift of Hope from our gift catalog
internationalmedicalcorps.org/giftsofhope

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Accounts

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International Medical Corps UK



INTERNATIONAL MEDICAL CORPS (UK) 2020/2021 ANNUAL REPORT

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International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

Throughout the document, where references to "affiliates" (in plural) are made, they refer to International Medical Corps and International Medical Corps Croatia.

Unless otherwise stated, projects and their statistics referred to in the first part of this report (pages 1-29) are the results of combined International Medical Corps (UK), International Medical Corps and International Medical Corps Croatia global efforts in calendar year 2020 and do not form part of the statutory annual report. Projects and their statistics referred to in the second part of this report (pages 30-80) represent the work of International Medical Corps (UK) only, and covers the 12-month period to 30 June 2021 and forms part of the statutory financial statements and trustees report.

DEMOCRATIC REPUBLIC OF THE CONGO





PHILIPPINES

TO OUR SUPPORTERS:

2020/2021 presented challenges unlike any other year in recent history. But despite a global pandemic—and the movement restrictions, travel bans and fast-closing borders it gave rise to—International Medical Corps (UK) managed to provide lifesaving assistance and training to millions of people in need across five continents.

Combatting this pandemic has served as a reminder of the critical importance of frontline health workers, and reinforced the critical role that these healthcare heroes play in communities large and small. All over the world, our teams mobilised to fight COVID-19. In places like Juba, South Sudan, we helped set up the country's first infectious disease treatment unit. In Jordan's camps for Syrian refugees, we screened and tested residents for COVID-19, treating those sick with the virus while laying the foundation for a successful vaccination programme. In Yemen, we took part in a groundbreaking project shielding vulnerable populations against the virus. In Somalia, we used toll-free phone lines to fight a different kind of fast-spreading virus: misinformation.

While many colleagues fought COVID-19, staff in 30 countries and territories around the world ensured that our other programmes continued to address longstanding needs for maternal and child healthcare, nutrition, clean water, mental health—and so much more.

International Medical Corps has maintained a presence in Afghanistan since 1984 and we're proud that we continued that work this year—establishing seven first-aid trauma posts that provide 134,605 people with access to emergency, trauma care and ambulance services.

In the Democratic Republic of the Congo (DRC) we helped end two separate Ebola outbreaks in 2020—including the world's second-largest outbreak of the disease. Yet despite this victory, in the early months of 2021, we confronted further outbreaks of the deadly disease in the DRC and in West Africa. Each time, we deploy rapid response teams and minimise cases and deaths—but our job is clearly not done.

In early August 2020, when a massive warehouse explosion at the Port of Beirut ripped through the Lebanese capital, killing more than 220, injuring thousands and displacing an estimated 300,000, our in-country team responded immediately, bringing help to survivors and support to health facilities. We also sent mobile medical units to neighbourhoods near the blast site, providing care to people affected by the crisis and reducing pressure on overburdened health centres near the explosion.

With the news cycle so often focused on COVID-19, suffering on a massive scale continued unabated in war-torn countries. Throughout the year, we maintained our assistance to thousands of innocent civilians caught up in two seemingly endless tragedies: the wars in Syria and Yemen. Throughout years of armed conflict, we have helped millions of people, saved thousands of lives and eased immeasurable suffering through training and healthcare programmes.

2020 also called upon our emergency teams to respond closer to home. In December, a 6.4-magnitude earthquake hit Croatia, causing multiple fatalities and devastating damage to infrastructure. Drawing on our longstanding presence in the country, our teams quickly deployed, distributing personal protective equipment for healthcare providers and displaced citizens, delivering temporary healthcare facilities to local communities, and even donating an ambulance to a local emergency medicine facility.

Though the year was full of challenges, we are happy to celebrate the extraordinary levels of support we have received. To our donors, supporters, volunteers and staff—whose unwavering commitment during testing times has boosted our efforts and elevated our achievements and spirits—thank you. We remain endlessly grateful.



Andrew W. Géczy
Chairman
International Medical Corps (UK)



Ognjen Radosavljevic
Managing Director
International Medical Corps (UK)



LEBANON

INTERNATIONAL MEDICAL CORPS:

A GLOBAL FIRST RESPONDER

We provide training and deliver emergency healthcare, along with related services, to those affected by conflict, natural disaster or disease. We do this no matter where they may be in the world or what the conditions. We also train people in their own communities, providing them with the skills they need to recover, to chart their own path to self-reliance and to shape their own future as they become effective first responders themselves.



DEMOCRATIC REPUBLIC OF THE CONGO

BECAUSE SPEED SAVES LIVES

Our emergency response teams deploy fast to assist those in great need—often arriving within hours to reach those even in the most remote, challenging environments.

BURUNDI



We draw on experience gained in 36 years of responding to disasters in more than 80 countries on six continents. Our surge capacity includes physicians and nurses trained in emergency medicine, supported by specialists in essential healthcare services that range from mental health and psychosocial support to technical expertise in gender-based violence, nutrition, and water, sanitation and hygiene. We maintain our capacity to respond quickly because speed saves lives in the initial hours following a disaster.

As conditions ease, we stay on and partner with survivors to build a better, more independent future for those we're helping. The key to our approach is training—an essential component of all our programmes, used to transfer the latest knowledge and skills into local hands, to help ensure a brighter future. We strengthen local health systems and work with community leaders, hire and train local staff, develop partnerships and evaluate progress to ensure quality outcomes.

With a staff that numbers more than 7,500 worldwide, more than 90% of whom are recruited locally, the strategy of International Medical Corps, International Medical Corps (UK) and International Medical Corps Croatia ensures that the knowledge and tools required to prepare for—and respond to—future emergencies are culturally compatible and remain available in the community. We work to ensure that if disaster strikes again, residents can themselves be their own first responders.



SOUTH SUDAN

Though last year was in many ways an extraordinary 12 months, International Medical Corps (UK)'s dedication to provide quality programming remained unchanged, as did our strategy of working together with leaders of communities hit by disaster to help them chart their journey from relief to self-reliance.

EMERGENCY RESPONSE AND PREPAREDNESS

On 4 August 2020, a massive explosion ripped through Beirut, Lebanon. Hundreds of people were killed and approximately 7,000 people injured. Within hours of the explosion, our teams were on the ground supporting survivors.

Over the next hours, days and months, our teams provided more than 15,000 people with health consultations, as well as mental health and psychosocial support to those affected by the devastating event—including the frontline nurses, firefighters and paramedics who dealt with its aftermath.

With clinics in the immediate vicinity of the blast damaged and non-functional, we also set to work rehabilitating four damaged health facilities with a catchment population of 197,771.

NUTRITION AND FOOD SECURITY

In Ethiopia, the crisis in Tigray has displaced hundreds of thousands of people and caused thousands of deaths. In response to gaps in health services, we launched 15 mobile medical teams—providing, among other things, 24,385 malnutrition screenings for children under 5.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

In Pakistan, we organised 19 remote psychological first aid trainings, reaching more than 400 people, and hired 12 psychosocial support workers who provide teleconsultations that reached more than 960 people, as part of a project to improve health services for communities—including Afghan refugees—facing COVID-19.

WATER, SANITATION AND HYGIENE

Yemen's ongoing civil war has left residents of the Middle East's poorest country with reduced access to clean water—leading to increased risk of disease. We provided people internally displaced by the conflict, as well as host communities, with 10 water-collection sites and provided emergency water access by trucking in water to remote areas.

WOMEN'S AND CHILDREN'S HEALTH

In Sudan, conflict, violence and a lack of essential services severely affects civilians—with women and children particularly vulnerable. As part of projects aimed at addressing this, we provided 13,158 pregnant women with at least one antenatal visit.

FAMILY AND COMMUNITY HEALTH

As part of a project aimed at preventing and responding to gender-based violence involving people affected by conflict in South Sudan, we organised community outreach activities to provide information on GBV, people's rights and available services, reaching 137,884 women, 83,909 girls, 70,377 men and 65,564 boys.

HEALTH SERVICES SUPPORT

In Afghanistan, remote communities in hard-to-reach areas suffer from gaps in health services. We established seven first-aid trauma posts—including constructing an emergency room/operation theatre—that provide 134,605 people with access to emergency, trauma care and ambulance services.

TRAINING UNDERPINS ALL THAT WE DO

THE HEART OF WHAT WE DO



PAKISTAN

Since our first response in 1984, training has been at the centre of our work. We consider it essential to our mission of helping communities recover from adversity and take greater control of their destiny as they move toward self-reliance. In 2020 and 2021, training was more important than ever, as International Medical Corps (UK) provided those we serve with the skills and knowledge needed to prevent and control COVID-19 infections in addition to other, longstanding healthcare challenges.



PAKISTAN

As the COVID-19 pandemic grew, health systems struggled to keep up—including those in many of the countries where we work. We knew that training was key to quickly build the capacity needed to contain and respond to the virus.

Working in Pakistan as part of Alliance 2015, we set to work running 49 COVID-19 training sessions for 961 people on the frontlines. Covering everything from COVID-19 infection prevention and control to psychological first aid, the sessions—sometimes delivered remotely, due to restrictions imposed because of the virus—put knowledge into the hands of those with a role to play in defeating COVID-19, from frontline responders such as doctors and paramedics, to outreach workers and janitorial staff.





SUDAN

A year of civil unrest and devastating floods left Sudan in critical need. Almost two-thirds of the population were without basic sanitation, and 40% had no access to clean drinking water. When unprecedented rains hit, areas of the country were susceptible to disease. Cases of malaria rose to 1.1 million—reaching epidemic levels in 15 of Sudan's 18 states.

Tackling that emergency and getting people the sanitation facilities and clean water that they needed required expertise on the ground.

Working in local health facilities, we rolled out training for 810 clinical staff in regions across Sudan. Covering topics from infection prevention and control to water, sanitation and hygiene, we helped impart the skills needed to battle the malaria epidemic and support access to clean water and sanitation.





JORDAN

The war in Syria has inflicted unimaginable levels of suffering on its civilian population—many of whom have fled to Jordan, which hosts more than 650,000 Syrian refugees.

In the Jordanian refugee camps of Azraq and Za'atari, where we work, parents strive in difficult circumstances to give their newborns, infants and children the best start in life. That starts with nutrition.

By establishing mother groups, training nutrition volunteers and providing remote training sessions, International Medical Corps (UK) was able to give mothers direct access to dietary information for their children while providing support and advice on breastfeeding.

IN 2020

INTERNATIONAL MEDICAL CORPS TRAINED

1,576

community health volunteers on the basics of administering psychological first aid.

13,290

people on communicable disease management and control.

6,265

members of our clinical and non-clinical staff, as well as government and other non-government staff and community health workers, on the principles of treating and preventing gender-based violence, and how to make confidential referrals.

UNITED STATES



In 2020, International Medical Corps responded directly to the needs of more than 18.5 million people in 30 countries on five continents.

Among the results of the work of International Medical Corps, International Medical Corps (UK) and International Medical Corps Croatia:

18.5 MILLION DIRECT BENEFICIARIES

Of these, nearly 3 MILLION were children under 5. Our work also reached more than 93 MILLION others who benefited indirectly from our programmes and work.

5 MILLION MEDICAL CONSULTATIONS

Of these, more than 1.4 MILLION were children under 5.

117,452 PARTICIPANTS TRAINED

This included International Medical Corps clinical and non-clinical staff, government and non-government staff, community health workers and volunteers.

113,116 DOSES OF MEASLES AND DPT/PENTA ADMINISTERED

Vaccinating children protects future generations from the dangers of measles and five other diseases: diphtheria, tetanus, pertussis, hepatitis B and Haemophilus influenza type B.

1,317 HEALTH FACILITIES SUPPORTED

In 2020, we supported 162 hospitals, more than 40 of them in the United States. To reach those in underserved, often remote areas, we operated 117 mobile clinics and provided vital assistance to 1,038 smaller clinics, health centres and health posts.

WOMEN'S AND CHILDREN'S HEALTH
The key to our future

47,389 births aided by the presence of a trained birth attendant.

NUTRITION
The foundation of life

Treated **120,492 children** and **17,778 pregnant or nursing** women for malnutrition.

WATER, SANITATION AND HYGIENE
The essence of good health

Enabled more than **2.5 million people** to meet their water, sanitation and hygiene needs.

MENTAL HEALTHCARE AND PSYCHOSOCIAL SUPPORT
The invisible wounds

Provided MHPSS services to **735,000 people**, including 201,882 individual consultations.

GENDER-BASED VIOLENCE
A violation of fundamental human rights

Offered protection and support to **993,067 people** who lived with the threat—or the reality—of gender-based violence.

MALI



WHERE WE WORK

In calendar year 2020, we provided urgently needed healthcare and related services to more than 18.5 million people in 30 countries on five continents.

- EMERGENCY RESPONSE & PREPAREDNESS
- WOMEN'S & CHILDREN'S HEALTH
- FAMILY & COMMUNITY HEALTH
- NUTRITION, FOOD SECURITY & LIVELIHOODS
- WATER, SANITATION & HYGIENE
- HEALTH SERVICES SUPPORT
- MENTAL HEALTH & PSYCHOSOCIAL SUPPORT



AMERICAS

Continental United States
Puerto Rico
Bahamas
Venezuela
Colombia

AFRICA

Burundi*
Cameroon*
Central African Republic*
Chad*
Democratic Republic of the Congo*
Ethiopia*
Libya*
Mali*
Nigeria*
Somalia*
South Sudan*
Sudan*
Zimbabwe*

EUROPE

Croatia
Ukraine

MIDDLE EAST

Gaza*
Iraq*
Jordan*
Lebanon*
Syria*
Turkey*
Yemen*

ASIA

Afghanistan*
Indonesia
Pakistan*
Philippines*
Japan

** Countries where International Medical Corps UK programmes were funded during the 12 months to 30 June 2021*



JORDAN

RESPONDING TO COVID-19

The biggest emergency in 2020 was caused by something tiny: SARS-CoV-2, the virus that causes COVID-19. By year's end, the disease had affected virtually every nation on Earth, and—despite vaccines developed in record time—continues to affect people and societies everywhere. With decades of experience treating infectious diseases, International Medical Corps quickly recognised the virus for the global threat it was. In January 2020, we began activating emergency protocols, building training programmes and releasing stocks of personal protective equipment (PPE) while urgently working to source new supplies of PPE and medical equipment in an increasingly competitive market. Our strategy of supporting hospitals and other healthcare facilities with medical equipment, supplies and staff ultimately helped millions of people worldwide.

GLOBAL RESPONSE

Throughout 2020, International Medical Corps focused on ensuring continuity of operations in the countries where we operate, while taking decisive action to respond to COVID-19, including screening patients, raising awareness and fighting misinformation, distributing PPE and infection prevention and control (IPC) items, and providing training and support to health staff. We continue to work with global, regional and local coordination bodies to support their COVID-19 responses, including vaccination efforts.

DISTRIBUTED 23,400,000 PPE AND IPC ITEMS

SCREENED 4,631,476 PATIENTS for COVID-19

IDENTIFIED 89,048 PATIENTS as suspected COVID-positive

SUPPORTED 1,388 FACILITIES with COVID-related response, supplies and training

TRAINED 22,090 FRONTLINE HEALTHCARE PROFESSIONALS on COVID-19 prevention and control measures

REACHED 5,462,026 PEOPLE with information and education on COVID-19 prevention, good hygiene and community wellness



RENEWING OUR OFFICIAL STATUS WITH THE WHO, EARNING EMT CLASSIFICATION

The Executive Board of the World Health Organization (WHO) decides to maintain its “official relationship status” with International Medical Corps, a classification we have enjoyed since 2009. The designation, which requires WHO approval every three years, is a recognition of our collaborative efforts to support the work of WHO in addressing global health needs.

In June 2021, the WHO classifies International Medical Corps as an Emergency Medical Team (EMT) Type 1 provider, capable of deploying anywhere in the world within 48 hours to respond to a rapid-onset emergency. With this classification, we become the only non-governmental organisation (NGO) in the world to offer both Fixed and Mobile EMT Type 1 capabilities. The achievement is the result of years of work and preparation by teams across our organisation, and confirms our ability to respond wherever and whenever needed.

International Medical Corps (UK) is an international humanitarian nongovernmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

INTERNATIONAL MEDICAL CORPS (UK) BOARD OF DIRECTORS

Andrew W. Geczy
CHAIRMAN
London

Nancy A. Aossey
TREASURER
Los Angeles, CA

Reto Braun
Switzerland

Hendrick Cornelis
London

C. William Sundblad
Santa Monica, CA

SOMALIA



Global Ambassador Inanna Sarkis in Jordan



GLOBAL AMBASSADORS

Sanaa Lathan
Actress, Humanitarian

Sienna Miller
Actress, Activist

Inanna Sarkis
Actress, Activist

Robin Wright
Actress, Humanitarian

Jerrold D. Green
President and CEO
Pacific Council on
International Policy

Stacy Twilley
Founder and CEO
iVolunteer.org

CELEBRITY FIRST RESPONDERS

Muna AbuSulayman
Sasha Alexander
Genevieve Angelson
Jamie Bell
Danny Clark
Mary Crosby
Lily Donaldson
Jay Ellis
Cary Elwes
Ben Foster
Nikki Glaser
Judy Greer
Jon Hamm
Chelsea Handler
Ben Harper
Jaclyn Harper
Jihae
Maz Jobrani
Keira Knightley
David Koechner
Jude Law
Kate Mara
Heidi Murkoff
Yvonne Orji
Robert Pattinson
Jeff Probst
Eddie Redmayne
Andre Reed
Tony Richardson
Tim Roth
Nina Senicar
Hannah Simone
Tom Sturridge
Tara Summers
Anne Vyalitsyna
Benjamin Watson
Avery Williamson
Anna Wintour
Usama Young

ADMINISTRATIVE DETAILS OF THE CHARITY, THE TRUSTEES AND ADVISORS

TRUSTEES

Andrew W. Géczy

Nancy A. Aossey

Reto Braun

C. William Sundblad

Hendrik Jan Cornelis (appointed 30.03.2021)

MANAGING DIRECTOR

Ognjen Radosavljevic

FINANCE DIRECTOR

Fahmida Muhit

REGISTERED OFFICE

161 Marsh Wall
London
E14 9SJ

TELEPHONE
WEBSITE

0207 253 0001
http://www.internationalmedicalcorps.org.uk

COMPANY REGISTRATION NUMBER

04474904 (England and Wales)

CHARITY REGISTRATION NUMBER

1093861

AUDITOR

Buzzacott LLP
130 Wood Street London
EC2V 6DL

BANKERS

Barclays Bank
PLC 5th Floor
Level 27
1 Churchill Place London
E14 5HP

TRUSTEES' REPORT (INCLUDING STRATEGIC REPORT) 30 JUNE 2021

The trustees, who are also directors of the company for the purposes of the Companies Act 2006, present their report along with the financial statements of the charity for the year ended 30 June 2021. The financial statements have been prepared under the accounting policies set out therein and comply with applicable law and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102).

The report as a whole has been prepared in accordance with Part 8 of the Charities Act 2011. The information in the sections headed 'Strategic Report' constitutes the strategic report as required by the Companies Act 2006 (strategic report and directors' report) Regulations 2013.

The required information to be presented in a directors' report under the Companies Act 2006 is incorporated in the remaining sections of the report.

STRUCTURE, GOVERNANCE AND MANAGEMENT

TRUSTEES AND ORGANISATIONAL STRUCTURE

International Medical Corps (UK) ('the Charity') was incorporated as a company limited by guarantee in England and Wales on July 2, 2002 and registered as a charitable organisation with the Charity Commission on September 19, 2002. Activities commenced on November 1, 2002.

International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US-registered non-profit organisation that shares the same mission, and International Medical Corps Croatia, an association registered in Croatia. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes on the ground in accordance with the terms and conditions of its grants. During the year, more than $116 million of the Charity's programmes were delivered in partnership with International Medical Corps (2020: $131 million).

This represents an 11% decrease (2020: 15% decrease compared to 2019) in activities worldwide over the previous year. International Medical Corps (UK) also maintains an Administrative Services Agreement with International Medical Corps Croatia to share certain services in connection with its operation.

For ease of reference, International Medical Corps (the non-profit organisation registered in California) will be referred to as International Medical Corps. The UK charity will be referred to as International Medical Corps (UK).

The trustees govern in accordance with the Memorandum and Articles of Association of International Medical Corps (UK) as amended by Special Resolution passed on October 25, 2002. In addition, the trustees refer to a governance document setting out clear Terms of Reference for their roles and responsibilities. The trustees are kept up to date on recent changes in legislations and sector good practice through the trustees' pack provided during board meetings.

The trustees of the Charity have the powers to appoint and remove a trustee. The Board of Directors of International Medical Corps has the right to appoint one trustee (and any successor) by notice in writing addressed to the Secretary of the Charity, and any person so appointed shall become a trustee immediately upon receipt by the Secretary of such notice.

International Medical Corps (UK) coordinates its activities with the UK and other governments, multilateral agencies and other international NGOs in order to ensure that available resources for its activities are maximised. It adheres to and supports the development of the Sphere Project's Minimum Standards in any disaster response. International Medical Corps (UK) seeks to be informed by the guiding principles of CHS Alliance's Code of Good Practice for the Management and Support of Field Staff.

The Board of Trustees is the governing body for International Medical Corps (UK) and currently comprises five members who aim to meet several times each year. Additional meetings can be called at the request of the Chair. For the 2020–21 financial year, the board of trustees met in December 2020 and June 2021. The list of trustees who served in the year is shown on page 1. At

least three members, including the Chair, must be present to ensure a quorum.

Risk and compliance and external audit functions sit with the board.

As the governing body for the Charity, the trustees take decisions and approvals on a broad level regarding strategic and operational risks, as follows:

- **Strategy.** Determine and approve International Medical Corps (UK)'s strategic direction and annual business plan, scrutinising the extent to which the Charity has been able to meet its charitable objectives.
- **Management.** Review and provide oversight of the implementation of the Charity's country programmes.
- **Financial Management and Compliance Requirements.** Review and approve annual budgets, statutory statements and ensure full compliance with all constitutional, legal, regulatory and statutory requirements.
- **Risk.** Review and approve International Medical Corps (UK)'s procedures for risk management, and ensure there is a framework of structures, policies and processes in place for the organisation and the board of trustees.

STATEMENT ON APPROACH TO SAFEGUARDING

International Medical Corps (UK) and its affiliates are committed to the security, safeguarding and safety of their staff, the people we serve and the communities in which we work. International Medical Corps (UK) receives all relevant reports from its US affiliate. As per the Charity's governance structure, the Managing Director and senior staff manage all safeguarding matters.

The Charity's US affiliate continues to reinforce its safeguarding capacity and capability through an organisation-wide approach, which includes incorporation of guidance received from the Foreign, Commonwealth & Development Office (FCDO) of UK Government (formerly Department for International Development (DfID)), other donors and the Charity Commission.

The following policies of International Medical Corps (UK) outline the Charity's approach to managing safeguarding matters. The policies are reviewed and updated periodically.

- Code of Conduct
- Safeguarding Policy,encompassing child safeguarding, protection from sexual exploitation and abuse, safeguarding adults at risk, prevention of trafficking in persons
- Whistleblowing Policy
- Guidance on Sub-Recipient Safeguarding and Ethical Conduct requirements
- Anti-Harassment and Bullying Policy
- Disciplinary Rules, including grievance procedures
- Recruitment and Selection Process
- Health and Safety Policy
- Modern-Day Slavery Statement

In addition to the policies, staff are also required to complete mandatory training and awareness-raising courses that include:

- Code of Conduct and Ethics
- Prevention of Trafficking in Persons
- Child Safeguarding
- Preventing Harassment in the Workplace
- Prevention of Sexual Exploitation and Abuse

This training is completed at induction, and refresher training is completed on an annual basis.

Key safeguarding actions taken during the reported period by the Charity's US affiliate include the following.

THE SAFEGUARDING TASKFORCE

The Safeguarding Taskforce was created in 2018 to provide focus, leadership and oversight over all global safeguarding initiatives. The Safeguarding Taskforce is a multi-disciplinary team comprising staff from key departments, including Domestic and International Affairs, Legal, Human Resources, Ethics and Compliance, Technical Unit and International Programmes. The Safeguarding Taskforce workplan covers the development and implementation of safeguarding initiatives, including policy review and updates, prevention and protection, survivor assistance guidance, capacity strengthening, training and country support.

POLICY DEVELOPMENT AND IMPLEMENTATION

The umbrella Safeguarding Policy encompasses:

- Child Safeguarding
- Protection from Sexual Exploitation and Abuse
- Safeguarding Adults at Risk
- Prevention of Trafficking in Persons

Sexual harassment in the workplace is covered under the revised Policy for Protection from Harassment, Bullying and Sexual Misconduct. All policies are reviewed and updated periodically.

SAFEGUARDING POLICY IMPLEMENTATION GUIDE AND TOOLKIT

The Safeguarding Task Force has developed a guide to support understanding and implementation of the International Medical Corps Safeguarding Policy. The guide describes priority actions that need to be undertaken by country teams to ensure the full implementation of the Safeguarding Policy at the country and programme/project level.

Each priority action has a brief explanation of its importance, an overview of the action itself, how to document or demonstrate that an action has been completed, and guidance on where further tools and information can be found within the accompanying Safeguarding Implementation Toolkit, in order to implement the actions.

The accompanying Toolkit contains tools, information and guidance to support the implementation of the Safeguarding Policy. Examples of the tools include a Safeguarding Action Plan Template, the Terms of Reference for the Safeguarding Focal Points and the Survivor Assistance Guidelines.

The Safeguarding Policy Implementation Guide and Toolkit were distributed to Country Offices at the end of June 2020.

TALENT ACQUISITION

Safeguarding is now included in the corporate staff-recruitment process, from advertisement to hiring.

Key actions include the following steps.

- Safeguarding risks are considered for each role.
- Behavioural-based safeguarding questions are included in the headquarters level interview process for all positions, including field recruitments.
- Managers' responsibilities for ensuring safeguarding measures for volunteers, employees and partners are now routinely included in job descriptions for international staff and are part of the management and staff performance-appraisal process.

SAFEGUARDING FOCAL POINTS

More than 80 Safeguarding Focal Points are identified at the country level. Safeguarding Focal Points are nominated by the Country Director. Training resources, materials and support include regular orientation sessions, terms of reference, extensive trainings and a resource library on our intranet—are available.

Safeguarding Focal Points' responsibilities include training, programme support as related to Safeguarding (e.g. proposal development), coordinating with the Headquarters Safeguarding Taskforce, and liaising with other focal points from partner agencies and working groups.

Staff globally receive an annual refresher training that covers Safeguarding. Our Safeguarding Focal Points are responsible for ensuring that this training is completed, in coordination with our Learning & Development team at Headquarters.

SAFEGUARDING VIOLATIONS— CASE MANAGEMENT

Reports of violations of International Medical Corps' safeguarding policies are referred to the Ethics and Compliance Department, which conducts investigations in consultation with the Safeguarding Case Team, an interdisciplinary group of senior leaders. Individuals who are found to have violated International Medical Corps' policies are subject to disciplinary action, up to and including termination. As well as considering individual cases, the Safeguarding Case Team analyses safeguarding data over time to identify risks and emerging themes. Key lessons learned through this process inform future safeguarding policy updates and practice, as part of an institutional culture of constantly striving to improve.

SURVIVOR/VICTIM SUPPORT

International Medical Corps works to ensure that survivors/victims of safeguarding violations receive appropriate and timely support, including medical, psychosocial and other services, according to their needs and wishes. Survivors/victims are also informed of their rights to report incidents to police and/or other relevant authorities. In contexts where reporting to authorities may

be indicated, International Medical Corps' Safeguarding Case Team advises victims and consults with Legal Counsel to determine the best course of action. To the extent possible, survivors/victims' wishes guide decisions about the types of support received, and survivors/victims are fully informed of their options and rights.

SAFEGUARDING RISKS OF DOWNSTREAM PARTNERS

Downstream partners are required to conduct all activities under sub-agreements in a manner consistent with international laws, humanitarian principles and donor regulations. Subrecipients are prohibited from engaging in any type of harmful misconduct, including but not limited to sexual exploitation, abuse, harassment and trafficking. Subrecipients are required to inform International Medical Corps of any safeguarding issues that arise under the sub-agreement. Safeguarding-specific requirements are included in the downstream partner risk-assessment guidelines.

DEFINING RISK OWNERS

Ownership of safeguarding risks is documented in the organisational risk register of the Charity and its US affiliate, explicitly stating that the risks are owned by executive staff. The Charity's trustees are updated at least twice a year.

SAFEGUARDING—PREVENTION MEASURES

A comprehensive approach to maintaining and strengthening prevention measures, includes further incorporating protection mainstreaming into programme design, and implementation and training of staff to enhance this approach, as well as the introduction of a risk mitigation approach to dealing with safeguarding violations.

THE ENVIRONMENT

International Medical Corps (UK) actively promotes policies that support the inclusion of safe environmental protection at HQ and country levels. The Charity has received assurance from its office-management company that the office premises in London use renewable energy sources. International Medical Corps, the Charity's US affiliate, is working towards integrating a commitment to maintaining environmental standards in its Code of Conduct, which is subscribed to by all its employees, volunteers, suppliers and sub-partners. Moreover, at country-level programme implementation, the Charity aims to reduce excess morbidity and mortality associated with potential exposure to environmental factors. The agency coordinates at the global level with other actors' integrated approaches to delivering environmental, social, public health-related and climate-resilient interventions.

On a project-by-project basis, teams assess the risks associated with relevant aspects such as healthcare waste and expired medicines disposal, making recommendations for controlling and mitigating these impacts through individually tailored interventions. These include capacity building, use of alternative energies, prevention of environmental degradation through sustainable groundwater use, solarisation of groundwater resources, health facility-based cold chains, soaking water, open defecations and environmental health (safe domestic- and medical waste management at the health facility and community levels). These actions aim to achieve positive changes in knowledge, attitude and behaviour of the targeted communities.

The Charity is cosignatory to the global pledge on Energy and Infrastructure, to adopting cost-efficient, environmentally sustainable solutions. We support resilient and sustainable WASH systems that address water scarcity and climate change, and that leverage renewable energy options.

The Charity is committed to maintaining high environmental standards and will continue to work and support a precautionary approach to environmental challenges, undertaking initiatives to promote greater environmental responsibility, and encouraging the development and dissemination of environmentally friendly technologies.

In addition International Medical Corps has developed guidance on reduction of its negative impact on the environment due to factors linked to logistics and the supply chain (transportation of goods and staff, sourcing, packaging, power supply, etc.), with the aim of implementing best practices and providing recommendations based on studies and recommendations of agencies such as Groupe URD (Environmental Footprint of Humanitarian Assistance—Scoping Review, May 2020), IFRC, WHO and WFP. The charity is also developing and piloting tool to measure emission generated by transport and power production to determine a baseline enabling analysis and implementation of improvement measures.

IMC UK offers to staff environmentally friendly initiative such as the Cycle to Work Scheme which is about promoting an alternative way to travel to work and allowing staff to work from home on some days as part of its flexible working policy contributing to staff welfare and less pollution due to reduced daily commute to work.

The Charity was a low energy user during the reported period and therefore is not reporting under UK Government's Streamlined Energy and Carbon Reporting (SECR) requirements.

STATEMENT ON MODERN SLAVERY

In December 2016, International Medical Corps (UK) published its modern slavery statement, committing to prevent modern-day slavery and human trafficking within the organisation and its supply chains. The Charity actively and continuously works with its affiliates to reduce and eliminate this risk. New employees are informed about organisational policies that contributes towards eliminating modern day slavery by the Human Resources function during staff onboarding orientation. Additionally, all employees are provided with annual training about the prevention of trafficking in persons, sexual exploitation and abuse, and child labour. Related information is made available to employees on the organisation's intranet, as well as through posters displayed in all field and headquarters offices. In addition, International Medical Corps' Global Safeguarding Policy has been updated, made pursuant to section 54(1) of the Modern Slavery Act 2015 (UK). It mandates that all suspicions are reported and are then reviewed and investigated by the Ethics and Compliance Investigation Unit and the Safeguarding Case Team.

In 2017 International Medical Corps revised the vendor Code of Conduct which must be signed by any supplier before entering into business with International Medical Corps. It includes a chapter on the prohibition of human trafficking. Provisions are also inserted in procurement Master Terms and Conditions. Failure to comply constitutes a breach of an essential term of the Contract, leading to revoking the vendor's registration with International Medical Corps and inclusion of the company on the watch list maintained by our Compliance & Ethics department. To further mitigate the risk of doing business with vendors engaged in any way with modern slavery, International Medical Corps is currently reviewing vendor-assessment processes, to ensure that this aspect is integrated during evaluation process.

KEY MANAGEMENT PERSONNEL

The key management team of the Charity consists of the trustees, the Managing Director and the senior management team. The trustees have delegated management of the Charity's operations to the Managing Director, who is supported by the senior management team as follows:

- International Medical Corps (UK)-contracted staff:
  - Senior Director of International Programmes
  - Senior Director of Finance, Grants and Contracts
  - Senior Director of Human Resources and Global Talent Acquisition
- International Medical Corps-contracted staff:
  - Chief Operating Officer
  - Vice President, Finance and Administration
  - Chief Advancement Officer
  - Vice President, Domestic and International Affairs

For the purposes of setting employee remuneration, delegation has been given to the Charity's Managing Director, who is also the Administrative Director for this purpose. In setting the pay and benefits of the UK-contracted senior management team, the Managing Director refers to the company's pay policy, which is periodically reviewed. Salaries and benefits are benchmarked against reliable industry data. The salary scale, including the pay policy, is approved by the Managing Director and in line with the Charity's pay policy.

The remuneration of the Managing Director is set by the trustees.

TRUSTEES' RESPONSIBILITIES

The Trustees, who are also Directors of International Medical Corps (UK) for the purposes of company law, are responsible for preparing the Trustees' Report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practices, or GAAP).

Company law requires the trustees to prepare financial statements for each financial year that give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of such resources, including the income and expenditure of the charitable company for that period. Under company law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure of the charitable company for that period.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently;
- observe the methods and principles in the Statement of Recommended Practice Accounting and Reporting by Charities;
- make judgements and estimates that are reasonable and prudent;

- state whether applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charity will continue in operation.

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company 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 charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Each trustee confirms that:

- so far as the trustee is aware, there is no relevant audit information of which the charitable company's auditor is unaware; and,
- the trustee has taken all the steps that they ought to have taken as a trustee to make themselves aware of any relevant audit information, and to establish that the charitable company's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of S418 of the Companies Act 2006.

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

OBJECTIVES AND ACTIVITIES

PUBLIC BENEFIT

In reviewing the Charity's aims and in planning future activities, the trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit. The trustees believe that the Charity benefits the public through the achievement of its goals and objectives by:

- providing timely and appropriate humanitarian aid to vulnerable victims of wars and disasters;
- building the capacity of local healthcare providers to increase the standards of healthcare for local communities and create more sustainable systems;
- contributing to the UK's agenda for international development and, in particular, the achievement of the Sustainable Development Goals, including the prevention of and response to violence against women and girls;
- contributing to the containment and reduction of infectious diseases globally; and
- contributing to the understanding of the impact of various health issues affecting the vulnerable, through the UK/EU media and humanitarian networks.

INTERNATIONAL MEDICAL CORPS (UK)'S GOALS

- To mobilise sufficient resources to realise International Medical Corps (UK)'s charitable objects and humanitarian mission.
- As per International Medical Corps (UK)'s Memorandum of Association, the objects of the organisation are to:
  a. relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and programmes, and to promote good health and preserve lives by providing medical supplies and trained medical professionals particularly, in areas that have suffered through war and conflict; and
  b. further the activities of International Medical Corps, a non-profit corporation registered in California USA, as are exclusively charitable and that may advance the objective set in (a) above.

International Medical Corps (UK)'s mission is to provide humanitarian assistance, healthcare and training to communities affected by disasters, conflict and poverty, so they can return to self-reliance.

During the reporting period, the Charity continued to report on six main areas of work:

1. Strengthening health capacity
2. Emergency response and preparedness
3. Mental health and psychosocial support
4. Woman and children's health
5. Clean water, sanitation and hygiene
6. Nutrition and food security

MONITORING OF ACTIVITIES

International Medical Corps (UK) continuously monitors programme activities through effective internal reporting mechanisms. It provides regular programmatic and financial reports on project activities and progress as required by all its institutional donors and other stakeholders. Additional internal programme reports and departmental updates supplement this information for day-to-day management. The Charity also maintains automated recruitment, financial and programme records to track performance and grant compliance.

The International Programmes team reinforces supportive monitoring and communications systems and procedures to track results. International Programmes collaborates with the Monitoring, Evaluation and Learning (MEAL) department in the collecting and analysis of programme achievements and addresses issues to progress in real time through visits, calls and written communications. Monthly calls with country teams also review the achievement of project targets, spending and procurement, as presented by project managers and their technical, financial and logistics colleagues. Bi-weekly reviews aggregate and track results for all COVID projects and integrates them into organisation-wide DHIS2 reporting and mapping software. In addition, International Programme Senior Directors, Deputy Directors Programme Managers and Programme Officers maintain regular communications with country teams to identify and address risks and provide support, working with regional platform department focal points.

Staff, in various capacities, visited country programmes during the year to provide relevant technical support. During the reported period, countries visited included Ethiopia, South Sudan and Sudan, where we provided field teams with programmatic and technical support. The Director of the Technical Unit, based in the UK, supported by a global network of Technical Advisors, ensures that support and technical oversight is provided to all projects. Remote oversight and support were put in place with the outbreak of COVID-19.

The Charity's affiliate delivers programmes through three geographical, cross-functional platforms (Middle East; Central & Southern Africa; North & East Africa, Asia and Europe), which include dedicated interdisciplinary teams of specialists in programmes, technical, finance, resource development, communications, logistics and supply chains, human resources and security. Functional specialists provide effective and efficient business support to field programmes and facilitate speedy and effective responses to disasters in the respective regions.

International Medical Corps (UK)'s Managing Director is a member of the global executive leadership team, and advises and helps evaluate opportunities, challenges and risks associated with implementation of programmes undertaken by the Charity's US affiliate. In addition, International Medical Corps (UK) relies on its US affiliate's Internal Audit, Compliance and Safeguarding Task Force's independent field reviews, evaluations and reports. Risk assessment and compliance issues are flagged in various functional units' regular reviews, and critical issues are reported back to the senior leadership team. Senior International Medical Corps' staff brief the trustees during board meetings on key developments and on risk mitigation measures that have been put in place.

STATEMENT ON CONTRIBUTIONS BY VOLUNTEERS

International Medical Corps (UK) continues to actively encourage members of the public to become involved in its work, both in the UK, to raise awareness of international development issues, and overseas, to support its operations.

STRATEGIC REPORT

ACHIEVEMENTS AND PERFORMANCE

Organisational Performance

Over the course of the financial year to June 2021, International Medical Corps (UK) provided assistance valued at $116,684,953 (2020: $131,466,324) to vulnerable populations in 21 countries (2020: 22). This included the distribution of donated medical and other supplies valued at $14,995,867 (2020: $14,831,337).

International Medical Corps (UK) supported, through its US affiliate, 2,764 staff positions in 21 countries (2020: 2,774 staff positions in 22 countries), providing essential services to beneficiaries. Globally, International Medical Corps' activities served 5.4 million and 6.0 million direct beneficiaries in the final two quarters of 2020, respectively, and 5.0 million and 5.4 million in first two quarters of 2021.* International Medical Corps (UK) contributed 37% of global funding to this mutual achievement.

Summary of Measures Used to Assess International Medical Corps (UK)'s Performance

International Medical Corps (UK) continues to use a Balanced Business Scorecard specifying the following main objectives.

*Each quarter represents direct beneficiaries within that time period only. Please note that beneficiary totals may overlap across quarters.

GOAL	COMMENT
Timely and efficient delivery of programme activities	The Charity successfully delivered activities of the value of $117M (2020: $131M), The major driver for the reduction is the ineligibility for some European Union funding mechanisms due to Brexit.
Control over corporate costs	The Charity has managed corporate expenditure within the provisions of its annual budget and according to the terms specified by its donors.
Diversification of income	The Charity continued to be funded by a wide range of government and UN agencies, as well as private sector donors.

RISK: 'Minimise risk whilst anticipating threats'

GOAL	COMMENT
Strengthened systems for identifying and raising areas of concern in a timely manner to the senior management team	The Charity continued to maintain its risk register and controlled the field operations through regular reviews, cross-team participation and reference to the Charity's scorecard mechanism. The Charity's US affiliate continues to implement, at field and HQ levels, Logistics Management Software to strengthen assets, procurement and inventory management and controls. Systems enable the creation of exception reports highlighting any potential gaps or risks to be addressed. In addition, HQ Logistics & Supply Chain team is maintaining, in collaboration with the field teams, a register to anticipate, map potential risks and determine / implement mitigation measures. Risks identified as major are elevated to the appropriate management group. In addition, the Charity has worked with its US affiliate to administer and reinforce its safeguarding mechanisms.
Mitigate financial loss through strict controls	Strict controls were maintained and updated as necessary to ensure adherence to internal procedures, requirements of donors and the requirements of the Charity Commission. Automation and strict control over the treasury platform has ensured minimisation of foreign exchange and currency exposure risks;

PEOPLE: 'Always supporting its people to develop professionally while delivering the Charity's mission.'

GOAL	COMMENT
Staff are motivated to achieve and exceed performance expectations	Staff were provided with in-house and external trainings on donor regulations and industry best practices to ensure appropriate oversight. Flexible working and specifically remote working arrangements were put in place to ensure staff safety and wellbeing during the pandemic.
Improve on the creation of opportunities for effective intercompany collaboration and improved quality of programmes	Intercompany and interdepartmental collaborations were enhanced to consider opportunities and challenges in wider contexts. Each International Medical Corps (UK) team worked closely with its peers in the US to ensure alignment where appropriate.

OPERATIONS: 'Delivering the mission efficiently, through discipline and thoroughness.'

GOAL	COMMENT
Regular review of programme performance	Programme staff at all levels monitor risks to implementation on an ongoing basis, to ensure effective programme delivery. The Charity' affiliate's cross-functional platforms continue to improve the effectiveness and efficiency of operational support to field programmes, as well as facilitate speedy and effective responses to disasters in the respective regions.
Increased monitoring and evaluation activities, training and programme development	Programme staff collaborate with other departments within the cross-functional platforms in decision making related to country programme issues. During the reporting period, the Charity, in collaboration with its US affiliate, submitted 149 proposals US affiliate's Internal Audit team conducted a comprehensive remote audit of country operations in COVID – 19 pandemic context, covering all countries as well as several cross-organisational audits at the headquarters level.
Secure multi-year grants from donors	Ongoing discussions were had with FCDO (formerly DfID) and Global Affairs Canada (GAC) on multi-year grants.

DONORS: ‘Accountable to a growing group of donors’

The Global Programme Unit continued to provide due diligence on the Charity’s grants and contracts to ensure compliance with the standards and regulations specified by its donors, with support from the US affiliate’s Compliance team and the Internal Audit. Additionally, International Medical Corps continues to be a member of the Core Humanitarian Standard (CHS) Alliance and continues to monitor its compliance with the Humanitarian Accountability Framework.

GOAL	COMMENT
Improve high-level donor interaction	Robust interaction with International Medical Corps (UK)’s donors continued at all levels throughout the year.
To improve on effective donor intelligence	Regular communications with donor agencies were maintained, to ensure that relevant opportunities were pursued. Active participation in UK NGO forums and direct communication with FCDO (formerly DfID) were prioritised, to ensure that humanitarian relief is prioritised following the UK’s exit from the European Union and other governmental efforts to shape the sector.
Compliance with reporting deadlines and improved performance on complementary information requests	The Charity remains compliant with donor reporting requirements.

INNOVATION: ‘Challenging the norm to minimise inefficiency and maximise impact’

GOAL	COMMENT
Encouraging a culture of creativity and problem solving	Organisation-wide information management systems are being used to obtain real-time reports integrating key indicators across finance, programme delivery, human resources and logistics, to ensure effective implementation of programmes. A variety of projects continue, with the aim of improving the efficiency of key areas affecting delivery of programme activities. Cross-functional platforms also ensure that real-time information is available and applied in decision making and operations.

External representation and engagement

International Medical Corps (UK)’s Technical Unit members continued to represent the Charity in forums both within the UK and abroad, and make contributions to global discussions on sectoral issues. The Charity’s Water, Sanitation and Hygiene (WASH) advisor participated in the 24th Global WASH Cluster meeting in Geneva, which considered recommendations from an Emergency WASH capacity study.

The Senior Director for International Programmes and Programme Manager attended the DG ECHO partners’ conference in December 2019, to better understand ECHO’s evolving priorities and requirements for partnership, especially in expectation of Brexit. The Managing Director and Senior Director also attended BOND Humanitarian Network meetings. Throughout this year, the Senior Director and Programme Managers for the East and Mideast regions participated in Start Network “rota” meetings to review and allocate emergency alerts and funding as requested by Start.

INTERNATIONAL MEDICAL CORPS (UK)’S HUMANITARIAN ASSISTANCE FOR THE FINANCIAL YEAR 2020/2021

EMERGENCY RESPONSE AND PREPAREDNESS

On 4 August 2020, a massive explosion ripped through Beirut, Lebanon. Hundreds of people were killed and approximately 7,000 people injured. Within hours of the explosion, our teams were on the ground supporting survivors.

Over the next hours, days and months, our teams provided more than 15,000 people with health consultations, as well as mental health and psychosocial support to those affected by the devastating event—including the frontline nurses, firefighters and paramedics who dealt with its aftermath.

With clinics in the immediate vicinity of the blast damaged and non-functional, we also set to work rehabilitating four damaged health facilities with a catchment population of 197,771.

NUTRITION AND FOOD SECURITY

In Ethiopia, the crisis in Tigray has displaced hundreds of thousands of people and caused thousands of deaths. In response to gaps in health services, we launched 15 mobile medical teams—providing, among other things, 24,385 malnutrition screenings for children under 5.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

In Pakistan, we organised 19 remote psychological first aid training, reaching more than 400 people, and hired 12 psychosocial support workers who provide teleconsultations that reached more than 960 people, as part of a project to improve health services for communities—including Afghan refugees—facing COVID-19.

WATER, SANITATION AND HYGIENE

Yemen’s ongoing civil war has left residents of the Middle East’s poorest country with reduced access to clean water—leading to increased risk of disease. We provided people internally displaced by the conflict, as well as host communities, with 10 water-collection sites and provided emergency water access by trucking in water to remote areas.

WOMEN’S AND CHILDREN’S HEALTH

In Sudan, conflict, violence and a lack of essential services severely affects civilians—with women and children particularly vulnerable. As part of projects aimed at addressing this, we provided 13,158 pregnant women with at least one antenatal visit.

FAMILY AND COMMUNITY HEALTH

As part of a project aimed at preventing and responding to gender-based violence involving people affected by conflict in South Sudan, we organised community outreach activities to provide information on GBV, people’s rights and available services, reaching 137,884 women, 83,909 girls, 70,377 men and 65,564 boys.

HEALTH SERVICES SUPPORT

In Afghanistan, remote communities in hard-to-reach areas suffer from gaps in health services. We established seven first-aid trauma posts—including constructing an emergency room/operation theatre—that provide 134,605 people with access to emergency, trauma care and ambulance services.

INSTITUTIONAL DONOR SUPPORT FOR INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

To fulfil its mission and to undertake the abovementioned activities, International Medical Corps (UK) received grants from the following private and international donor agencies during the year. The Charity gratefully acknowledges their support.

ACF Canada	Action Against Hunger, Canada
ACF Spain	Action Against Hunger, Spain
ACF US	Action Against Hunger, US
AVAAZ	Avaaz
CESVI	Cooperazione E Sviluppo Italy
Columbia University	Columbia University
Concern Worldwide	Concern Worldwide
Crown Agents	Crown Agents
DAHW	Deutsche Lepra- und Tuberkulosehilfe e.V.
DFAT Australia	Department of Foreign Affairs and Trade Australia
FCDO (formerly DFID)	Foreign, Commonwealth & Development Office (formerly- Department for International Development UK)
DRC	Danish Refugee Council
EC	European Commission
ECHO	European Commission Humanitarian Aid & Civil Protection
France MOFA	France Ministry of Europe and Foreign Affairs
GAC	Global Affairs Canada
GIZ	The Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
INTERSOS	Intersos
IOM	International Organization for Migration
IRC	The International Rescue Committee
Irish Aid	Irish Aid
King Salman Humanit. Aid	King Salman Humanitarian Aid and Relief Center
LDS	Latter Day Saints
MENTOR	MENTOR Initiative
MINBUZA	Ministry of Foreign Affairs Netherlands
Misereor	Misereor
NPT UK	NPT Transatlantic Limited
Plan Int. Australia	Plan International Australia
PUI	Première Urgence Internationale
Start Network	Start Network
The Inflexion Foundation	The Inflexion Foundation
The Volant Trust	The Volant Charitable Trust
UNDP	United Nations Development Fund
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
UNMISS	United Nations Mission in South Sudan
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
UNSW	University of New South Wales
UNWOMEN	The United Nations Entity for Gender Equality and the Empowerment of Women
Vrije Universiteit	Vrije Universiteit
WFP	World Food Programme
WHO	World Health Organisation
WV	World Vision
ZOA Netherlands	Stichting ZOA

PRIVATE DONOR SUPPORT OF INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES
Andor Charitable Trust
GM Morrison Charitable Trust
Hamish Morrison
Fulmers Charitable Trust
Maurice Heaster OBE
Souter Charitable Trust
Zak Nunns

FUNDRAISING, COMMUNICATIONS AND MARKETING ACTIVITIES

During the year, International Medical Corps (UK) has received donations from institutional donors, corporates, trusts and foundations, as well as private individuals. International Medical Corps (UK) and its US affiliate seek to raise funds to sustain its programmes across all countries where they work, as well as funds to fill gaps, support immediate emergency responses and implement innovative programmes.

The Charity responds to requests for proposals issued by institutional donors such as FCDO (formerly DfID), UN agencies and by private sector donors. The Charity works closely with its affiliate to raise funds from corporations and foundations for emergency response activities and ongoing programmes. International Medical Corps (UK) undertakes due diligence on both the financial and reputational dealings of potential partners before accepting donations.

International Medical Corps UK also utilises multiple fundraising channels, with the goal of raising funds from as diversified a base of supporters as possible. These channels include annual giving programmes and online appeals, in addition to outreach through social media, the website and other reputable online platforms that display clear terms and conditions, including General Data Privacy Regulations (GDPR) compliance. International Medical Corps (UK) and its affiliate did not employ any commercial fundraising firm to solicit individuals via telephone or door to door during the reported period. Protecting vulnerable people and other members of public is a key consideration in cultivating a supporter base for the Charity's work. The Charity and its US affiliate actively monitor all efforts to raise funds from the public, in particular vulnerable people. International Medical Corps (UK) did not receive any complaints about its fundraising activities during the reported period.

Although International Medical Corps (UK) is not registered with the UK Fundraising Regulator the Charity

has regard for and adheres to the principles and practices set out in the Code of Fundraising Practices. International Medical Corps (UK) and its affiliate are in compliance with GDPR and protect individuals' personal information. International Medical Corps (UK) communications team monitors and moderates our email and social media accounts and any complaints or concerns regarding fundraising activities are reviewed and responded to by senior management. Fundraising activities also are monitored by the senior leadership of International Medical Corps (UK), which shares regular reporting with the trustees.

INVESTMENT POLICY

Due to the nature of the Charity's programmes and funding cycles of its major donors, the Charity keeps its financial assets liquid.

RISK MANAGEMENT

A culture of risk management and mitigation is embedded in the organisation. A risk register is used by management and the trustees to examine and monitor risks to the organisation.

The register identifies and prioritises risk in relation to the likelihood and the level of impact it would have on the organisation and outlines measures in place to safeguard the company's assets against such risk. The risk categories are defined below:

- Organisational risk;
- Strategic and management risk;
- Operational risk;
- People;
- Financial risk.

The board of trustees seeks to ensure that systems are in place to monitor, manage and mitigate International Medical Corps (UK)'s exposure to major risks which are reviewed periodically. It is also recognised that the nature of the Charity's work requires active acceptance and management of risks when undertaking activities in order to achieve the objectives of the Charity.

The key business risks to the Charity continue to include the unexpected loss of funding from key donor organisations and major disruptions to programmes in countries resulting from factors either within or beyond the organisation's control. The Board of Trustees for International Medical Corps (UK) continues to implement measures to mitigate these risks, including review of the reserves policy, the introduction of new technology to ensure that assets are safeguarded to the extent possible, the continued reference to a balanced business scorecard and reviews into the Charity's funding base. These are further summarised in the table below:

KEY RISKS	TRUSTEES' PLANS TO MITIGATE THE RISK
Insufficient unrestricted reserves	The Charity continues to make sustained efforts to expand its supporter base. The Charity intends to continue to work with its institutional donors to continue delivering activities in the most hard-to-reach areas, thereby receiving contributions towards its corporate costs, and work with its US affiliate to keep effective control of its cost structure.
Adverse payment terms offered by donors affecting the liquidity of the Charity	Charity's liquidity position is closely monitored, and close collaborations are maintained with donor stakeholders to ensure life-saving activities are not impacted by liquidity issues;
Future funding opportunities affected by Brexit and developments in the UK's Foreign and Development policies.	International Medical Corps (UK) continues to pursue European Union funding streams where eligible. At the same time the Charity continues to engage with FCDO (formerly DfID) & other institutional donors on existing and potential portfolios;
Inadequate assessment, resulting in poor programming decisions and implementations.	International Medical Corps continues to invest in country-specific assessments, to ensure a relevant and quality orientated programme design.
Exposure to movement in foreign currency rates, affecting international operations	The Charity's principal currency exposures arise from translations of European and other donor monies received into US dollars, the main operational currency advanced to its field missions overseas. The continued fluctuations of currencies against USD can adversely affect International Medical Corps (UK)'s ability to deliver programmes sustainably. Within this context, global treasury management, consisting of International Medical Corps (UK)'s and International Medical Corps' senior staff, created in July 2018, continues to ensure effective use of donor funds.
Operations in sanctioned countries through the Charity's US affiliate	Donors and stakeholders are kept up to date with developments and emerging risks affecting programme implementation in sanctioned countries.

FINANCIAL REVIEW

Statement of Principal Financial Management Policies Adopted in the Year

It is the policy of International Medical Corps (UK) to maintain effective financial and other programmatic management systems with its US affiliate. Efficient budgeting, accounting, financial reporting and auditing systems are employed throughout the organisation, to meet the management and programmatic needs at various levels, and to be accountable to its donors and supporters.

This year, International Medical Corps (UK)'s total income was $116,105,525 (2020: $121,777,026). Of this, the total cash income received from institutional donors was $100,322,529 (2020: $106,027,214). International Medical Corps (UK) was able to secure $14,747,030 (2020: $14,622,440) of gifts-in-kind, comprising food, medicines and supplies.

During the reporting period, International Medical Corps (UK) supported training and assistance programmes in 21 (2020: 22) countries through its US affiliate. The Charity's programme expenditures can be disaggregated into the following humanitarian contexts.

	FY 2021	FY 2020
Strengthening health capacity	34%	35%
Emergency response and preparedness	26%	22%
Mental health and psychosocial support	1%	6%
Women & children's health	20%	14%
Water, sanitation and hygiene	2%	3%
Nutrition & food security	17%	20%

Financial Position

The Charity had restricted funds of $15,456,039 as of 30 June 2021 (2020: $15,982,576) and unrestricted funds of $580,381 as of the same date (2020: $641,167). International Medical Corps (UK) receives relevant institutional funding in meeting its restricted charitable expenditure. The balance of free reserves as of 30 June 2021 is $565,481 (2020: $575,932). Free reserves are unrestricted funds less the net book value of the fixed assets.

International Medical Corps (UK) committed resources from unrestricted reserves to provide adequate support for growth in charitable activities and to ensure compliance with growing donor regulations. International Medical Corps (UK) continues to rely on its US affiliate's commitment to meet shortfalls in programmes that do not provide full overhead cost recovery.

Reserves Policy

International Medical Corps (UK) requires reserves to:

- fund working capital requirements in the event of unexpected delays in receiving donor funds, to ensure continuity in implementation in the field;
- fund unplanned expenditures arising from programme-related contingencies, such as unforeseen events delaying implementation and leading to no–cost-extensions, and to manage exposure to exchange rate fluctuations;
- finance any gap in funding for projects of strategic importance to the Charity and its US affiliate; and
- fund requirements for additional corporate costs to maintain high-quality assurance over the organisation's programmes.

The Charity aims to maintain a level of unrestricted reserves equivalent to six month's operating expenditure of the Charity's HQ offices, which is $550,000 for FY 2021–22 and this is currently being achieved. Available unrestricted-fund balances in excess of the operational reserves' requirements are utilised to meet the other purposes as outlined above. Operating expenditure considered for reserves excludes transfers made for overseas programmes.

International Medical Corps (UK) continues to apply rigorous assessment of new opportunities and accepts projects that support its overhead costs required to maintain acceptable oversight of programme implementation, therefore mitigating the risk of insufficiently resourced projects. International Medical Corps (UK) considers accepting projects that do not fully cover its costs with its US affiliate to ensure sustainability of coverage of any gap in funding. As of 30 June 2021, the Charity held restricted reserves of $15,456,039 (2020: $15,982,576). This represents the total funds received for specific projects that are yet to be spent at 30 June 2021. These funds have been excluded from specific reserves policy, as they are not for the purposes of general working capital.

As of June 2021, the balance of free reserves was $565,481 (2020: $575,932). The Charity is resolved to maintain an adequate level of reserves and is working with its affiliate to implement a feasible strategy for marketing and public awareness of its work, to cultivate support, but accepts that in the current economic climate this may be difficult. The Charity will respond to the risks identified above as follows.

- In collaboration with its affiliate, the Charity profiles income streams and undertakes projects with acceptable terms. Also, it looks to its affiliate to cover programme funding gaps that the affiliate has reviewed and considered as acceptable.
- The Charity and its affiliate continue to closely monitor the implementation context of quality programmes around the world and resolve operational challenges with its supporters and partners.
- The Charity is part of global treasury platform.
- The Charity's operational flexibility has enabled it to address risks caused by political changes, including Brexit and the effects of the pandemic.

Section 172 Statement

International Medical Corps (UK) complies with section 172 under the Companies Act 2006, which requires our Board of Trustees act in the way that they consider, in good faith, what would be most likely to promote the International Medical Corps (UK)'s impact for our beneficiaries, while considering the long-term effect of decisions on International Medical Corps (UK)'s stakeholders, which includes its beneficiaries, employees, suppliers, partners, the communities it works in and the environment.

Engagement with employees.
International Medical Corps (UK)'s internal stakeholders are its employees. Enhancing employee engagement is an integral part of the culture of the Charity and its implementing affiliates. Senior management are actively involved in the engagement of colleagues through regular electronic communications, staff meetings and periodic Town Hall meetings that include employees working across the world. The trustees receive updates on employee matters from the Managing Director during board meetings. During the COVID-19 pandemic, enhanced support has been provided to our employees. International Medical Cops (UK) undertakes regular salary reviews to ensure that salaries for the UK contracted staff are competitive within the sector in the UK.

Engagement with Other Stakeholders

- Our beneficiaries. As a recognised first responder, we provide emergency relief, often within hours, to those hit by disaster, disease and conflict, no matter where they are, no matter what the conditions. International Medical Corps (UK) continuously monitors programme activities through effective internal reporting. We have a strict Code of Conduct and safeguarding procesess in place to ensure the security and safety of our beneficiaries.
- Our partners in project delivery. Our partnerships are critical to ensuring that we deliver programmes in the most hard-to-reach locations. We collaborate with other international and local NGOs when these partnerships bring greater benefits to the people we serve.
- Our supporters and donors. Our donors are primarily institutional, including the UK Foreign, Commonwealth and Development Office (FCDO), UN agencies, Global Affairs Canada and many others. We are committed to delivering timely, high-quality, lifesaving humanitarian assitance, and to reporting on the impact of our work. We report to our donors, and publicise our work on our website, social media and other platforms.
- Our suppliers. We are committed to eradicating modern slavery and trafficking in persons, and engage with our suppliers to promote the highest standards.
- Our wider communities and the environment. Our policies and procedures includes safe environmental protection in the different countries where we work. Our programmes aim to reduce excess mobidity and mortality associated with potential exposure to environmental factors. For example, on a project-by-project basis, our teams assess the risks associated with healthcare waste and with the disposal of expired medicines.

INTERNATIONAL MEDICAL CORPS (UK) PLANS FOR 2021/2022

International Medical Corps (UK) plans are to:

1. expand opportunities for applied research to improve the impact of providing healthcare for vulnerable communities, in line with its mission;
2. achieve institutional income of $101million during the 12-month period to 30 June 2022;
3. continue to expand the organisation's number of partnerships and non-traditional donors;
4. expand the organisation's global profile through increased awareness of its activities;
5. review and strengthen current internal processes employed by its US affiliate, with a view to increasing organisational efficiency; and
6. continue to work with its US affiliate to apply new technology and systems that mitigate risks specific to the sector in general.

The Trustees' Report incorporating the strategic report is approved by the trustees and signed on their behalf by:



Approved by the board of trustees on:

10 December 2021

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF INTERNATIONAL MEDICAL CORPS (UK)

OPINION

We have audited the financial statements of International Medical Corps (UK) (the 'charitable company') for the year ended 30 June 2021 which comprise the statement of financial activities, the balance sheet, the statement of cash flows, the principal accounting policies, and the notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 30 June 2021 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

CONCLUSIONS RELATING TO GOING CONCERN

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

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

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

OTHER INFORMATION

The trustees are responsible for the other information. The other information comprises the impact report for International Medical Corps and its affiliates worldwide included in pages 2 to 29, together with information included in the trustees' report, including the strategic report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

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

We have nothing to report in this regard.

OPINIONS ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006

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

- the information given in the trustees' report including the strategic report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report including the strategic report has been prepared in accordance with applicable legal requirements.

MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report including the strategic report.

We have nothing to report in respect of the following matters in relation to which the 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.

RESPONSIBILITIES OF TRUSTEES

As explained more fully in the trustees' responsibilities statement, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud, is detailed below:

How the audit was considered capable of detecting irregularities including fraud

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, was as follows:

- The engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities, and skills to identify or recognise non-compliance with applicable laws and regulations;
- We identified the laws and regulations applicable to the charitable company through discussions with management and from our knowledge and experience of the charity sector;
- We focused on specific laws and regulations in both the UK and overseas, which we considered may have a direct material effect on the financial statements or the activities of the charitable company. These included but were not limited to the Charities Act 2011, the Companies Act 2006, Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable to the United Kingdom and Republic of Ireland (FRS 102) (effective 1 January 2019);
- We have assessed the processes in place to ensure that the implementors of programmes are aware of and comply with UK laws and regulations;
- We have assessed the processes in place to ensure that that in country laws and regulations are followed; and
- We assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and review of minutes of trustees' meetings.

We assessed the susceptibility of the charitable company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- Making enquiries of management as to where they considered there was susceptibility to fraud, their knowledge of actual, suspected, and alleged fraud; and
- Considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.

To address the risk of fraud through management bias and override of controls, we:

- Performed analytical procedures to identify any unusual or unexpected relationships;
- Tested and reviewed journal entries to identify unusual transactions;
- Tested the authorisation of expenditure;
- Assessed whether judgements and assumptions made in determining the accounting estimates were indicative of potential bias; and
- Investigated the rationale behind significant or unusual transactions.

In response to the risk of irregularities and non-compliance with laws and regulations, we designed procedures which included, but were not limited to:

- Agreeing financial statements disclosures to underlying supporting documentation;
- Reading the minutes of meetings of trustees; and
- Enquiring of management as to actual and potential litigation and claims.

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance. Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

We did not identify any irregularities, including fraud.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

USE OF OUR REPORT

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 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 auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Edward Finch (Senior Statutory Auditor)

For and on behalf of Buzzacott LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL

16/12/21

STATEMENT OF FINANCIAL ACTIVITIES 30 JUNE 2021

	Notes	Unrestricted funds $	Restricted funds $	2021 Total funds $	Unrestricted funds $	Restricted funds $	2020 Total funds $
Income and expenditure							
Income from:							
Donations and legacies	1	208,461	15,574,535	**15,782,996**	703,492	15,046,320	15,749,812
Charitable activities	2	-	100,322,529	**100,322,529**	-	106,027,214	106,027,214
Total income		**208,461**	**115,897,064**	**116,105,525**	703,492	121,073,534	121,777,026
Expenditure on:							
Raising funds	3	7,895	-	**7,895**	3,546	-	3,546
Charitable activities	4	274,765	116,410,188	**116,684,953**	1,085,303	130,381,021	131,466,324
Total expenditure		**282,660**	**116,410,188**	**116,692,848**	1,088,849	130,381,021	131,469,870
Net (expenditure)		(74,199)	(513,124)	**(587,323)**	(385,357)	(9,307,487)	(9,692,844)
Transfer between funds		13,413	(13,413)	-	372,658	(372,658)	-
Net movement in funds		(60,786)	(526,537)	**(587,323)**	(12,699)	(9,680,145)	(9,692,844)
Fund balances brought forward at 1 July 2020		641,167	15,982,576	**16,623,743**	653,866	25,662,721	26,316,587
Fund balances carried forward at 30 June 2021		580,381	15,456,039	**16,036,420**	641,167	15,982,576	16,623,743

The analysis of income and expenditure between funds for the comparative period is shown in the notes to the financial statements.

All of the Charity's activities derived from continuing operations during the above two financial periods.

The Charity has no recognised gains and losses other than those shown above.

BALANCE SHEET
30 JUNE 2021

	Notes	2021 $	2021 $	Reclassified (note 19) 2020 $	Reclassified (note 19) 2020 $
Fixed Assets					
Tangible assets	8		30,307		91,168
Current assets					
Stock	9	234,967		483,803	
Debtors	10	7,716,348		12,880,834	
Cash at bank and in hand		8,284,126		17,612,022	
		16,235,441		30,976,659	
Creditors: amounts falling due within one year	11	(229,328)		(14,444,084)	
Net current assets			16,006,113		16,532,575
Total net assets			16,036,420		16,623,743
The funds of the charity					
Restricted funds	12		15,456,039		15,982,576
Unrestricted funds			580,381		641,167
			16,036,420		16,623,743

Approved by the trustees and signed on their behalf by:

Andrew Geczy, Chair



Approved on: 10 December 2021

International Medical Corps (UK): A company limited by guarantee, Company Registration No. 1093861 (England and Wales)

STATEMENT OF CASH FLOWS
YEAR TO 30 JUNE 2021

	Notes	2021 $	2020 $
Cash flows from operating activities:			
Net cash used in operating activities	A	(9,327,896)	(14,401,568)
Cash flows from investing activities:			
Purchase of tangible fixed assets		-	(58,670)
Net cash used in investing activities		(9,327,896)	(14,460,238)
Change in cash and cash equivalents in the year		**(9,327,896)**	(14,460,238)
Cash and cash equivalents at 1 July 2020	B	**17,612,022**	32,072,260
Cash and cash equivalents at 30 June 2021	B	**8,284,126**	17,612,022

Notes to the statement of cash flows for the year to 30 June 2021

A Reconciliation of net movement in funds to net cash used in operating activities

	2021 $	2020 $
Net movement in funds (as per the statement of financial activities)	(587,323)	(9,692,844)
Adjustments for:		
Depreciation charge	60,861	56,267
Decrease in stocks	248,837	208,897
Decrease (increase) in debtors	5,164,486	(2,400,230)
Decrease in creditors	(14,214,757)	(2,573,658)
Net cash used in operating activities	**(9,327,896)**	(14,401,568)

B Analysis of cash and cash equivalents

	2021 $	2020 $
Cash at bank and in hand	**8,284,126**	17,612,022
Total cash and cash equivalents	**8,284,126**	17,612,022

PRINCIPAL ACCOUNTING POLICIES 30 JUNE 2021

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are laid out below.

BASIS OF PREPARATION

These financial statements have been prepared for the year to 30 June 2021.

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to these financial statements.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (Charities SORP FRS 102) (effective 1 January 2020), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The accounts are presented in US dollars and rounded to the nearest dollar. The charity constitutes a public benefit entity as defined by FRS 102.

CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGEMENT

Preparation of the financial statements requires the trustees to make significant judgements and estimates.

The items in the financial statements where these judgements and estimates have been made include:

- The estimation of the value of donated goods distributed in the year and undistributed at the year-end.
- The estimation of the recoverability of accrued income balances.
- The estimation of unrealised foreign exchange difference.
- The treatment of intercompany balances with the charity's implementing affiliates.

ASSESSMENT OF GOING CONCERN

The trustees have assessed whether the use of the going-concern assumption is appropriate in preparing these financial statements. The trustees have made this assessment in respect of a period of one year from the date of approval of these financial statements.

The Charity has free reserves of $565,481 (2020: $575,932), which is above its target as per the reserves policy. The trustees have continued to use the going-concern assumption based on the relationship with its affiliate to cover programme funding gaps and provide cash-flow bridging. The trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

INCOME

Income is recognised in the statement of financial activities when the charity is entitled to the income, the amount can be measured with accuracy and it is probable that the income will be received.

Donations and gifts in kind are included in full in the statement of financial activities when receivable.

Grants receivable are credited to the statement of financial activities in the year in which they are receivable.

DONATED GOODS AND SERVICES

Donated goods, typically comprising medical and food supplies, are recognised as income when the goods are received. Amounts are included in expenditure when the goods are distributed. The balance of goods received but not distributed are included as a stock balance at the year end.

Food and other non-pharmaceutical stocks are valued according to the value placed on the items by the donor.

Pharmaceutical goods received are accounted for at fair value to the Charity with reference to market sources.

EXPENDITURE AND THE BASIS OF APPORTIONING COSTS

Expenditure is included in the statement of financial activities when incurred and includes attributable VAT, which cannot be recovered.

Expenditure comprises the following:

a. Costs of raising funds include the salaries, direct costs and overheads with generating donated income.
b. Costs of charitable activities comprise expenditure on the charity's primary charitable purposes as described in the trustees' report. Such costs include:
   - Technical advisory services
   - Programme management services
   - Gifts in kind of donated goods and services

   The majority of costs are directly attributable to specific activities. Certain shared costs are apportioned to activities in furtherance of the objects of the charity. These costs are allocated in the same proportion as directly attributable expenditure.

c. Governance costs comprise the costs incurred by finance, human resources, communications and IT departments, and the trustee costs, which are directly attributable to the management of the Charity's assets, organisational procedures and the necessary legal procedures for compliance with statutory requirements.

TANGIBLE FIXED ASSETS

Items of equipment are capitalised when the purchase price exceeds $500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets capitalised are reviewed for impairment if circumstances indicate that their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life:

- Computers – three years
- Furnitures, fixtures and fittings – five years
- Servers – five years

Vehicles and equipment for use in overseas operational programmes are not capitalised but charged in full to expenditure when purchased. This is because the expected useful life is significantly reduced in such programmes and is generally less than one year for the majority of these assets.

FUND ACCOUNTING

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund together with a fair allocation of management and support costs.

Unrestricted funds are donations and other income raised for the objects of the charity.

OTHER OPERATIONAL CURRENCIES

Transactions in US dollars are recorded at transaction value, with no exchange-rate gain or loss. Transactions in other operational currencies are recorded at the calculated monthly average rate. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. Differences arising on retranslation are charged to the statement of financial activities.

LEASED ASSETS

Rentals payable under operating leases, where substantially all the risks and reward of ownership remain with the lessor, are charged to the statement of financial activities over the period of the lease term.

PENSION COSTS

International Medical Corps (UK) sponsors a group personal pension plan. All eligible employees can participate in the scheme and contributions are based on a percentage of annual gross salary.

International Medical Corps (UK) contributes between 3% and 7% of eligible employees' gross earnings. Employees are immediately fully vested in contributions made on their behalf. The Charity is fully staged in its auto-enrolment obligations. Employees may make additional contributions should they wish to do so. Pension costs represent the employer's contributions payable during the year.

DEBTORS

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. They have been discounted to the present value of the future cash receipt where such discounting is material.

CASH AT BANK AND IN HAND

Cash at bank and in hand represents such accounts and instruments that are available on demand or have a maturity of less than three months from the date of acquisition. Deposits for more than three months but less than one year have been disclosed as short-term deposits. Cash placed on deposit for more than one year is disclosed as a fixed asset investment.

CREDITORS AND PROVISIONS

Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

FINANCIAL INSTRUMENTS

The Charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the Charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

BASIC FINANCIAL ASSETS

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price, including transaction costs, and are subsequently carried at amortised cost using the effective interest method, unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts, discounted at a market rate of interest, if material. Financial assets classified as receivable within one year are not amortised.

BASIC FINANCIAL LIABILITIES

Basic financial liabilities, including creditors, bank loans, loans from fellow group companies. Financial liabilities classified as payable within one year are not amortised.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

RECLASSIFICATION OF PRIOR YEAR BALANCES

International Medical Corps (UK) previously accounted for funds held and liabilities incurred by International Medical Corps on its behalf gross in its own balance sheet. Following a change in the inter entity arrangements during FY 2021, International Medical Corps (UK) is now accounting only for the net asset or liability from/ to International Medical Corps. Prior year comparative amounts have been restated for consistency.

NOTES TO THE FINANCIAL STATEMENTS YEAR TO 30 JUNE 2021

1 Donations and legacies

	Unrestricted funds $	Restricted funds $	**2021 Total $**
Donation from International Medical Corps	157,895	796,173	954,068
Private grants for projects	-	31,332	31,332
Other Unrestricted Donations	50,314	-	50,314
Donated supplies	-	14,747,030	14,747,030
Interest Income	252	-	252
2021 Total funds	**208,461**	**15,574,535**	**15,782,996**

	Unrestricted funds $	*Restricted funds $*	*2020 Total $*
Donation from International Medical Corps	*496,614*	*375,666*	*872,280*
Private grants for projects	*-*	*16,626*	*16,626*
Other Unrestricted Donations	*44,070*	*-*	*44,070*
Donated supplies	*-*	*14,622,440*	*14,622,440*
Interest Income	*4,834*	*-*	*4,834*
Other income	*157,974*	*31,588*	*189,562*
2020 Total funds	703,492	15,046,320	15,749,812

2 Income from charitable activities

	Unrestricted funds $	Restricted funds $	**2021 Total $**
Strengthening health capacity	-	35,968,694	35,968,694
Emergency response and preparedness	-	33,213,909	33,213,909
Mental health and psychosocial support	-	1,157,854	1,157,854
Women & children's health	-	21,245,964	21,245,965
Water, sanitation and hygiene	-	2,092,262	2,092,262
Nutrition and food security	-	6,643,846	6,643,846
2021 Total funds	-	100,322,529	100,322,529

	Unrestricted funds $	*Restricted funds $*	*2020 Total $*
Strengthening health capacity	-	*35,892,462*	*35,892,462*
Emergency response and preparedness	-	*29,832,700*	*29,832,700*
Mental health and psychosocial support	-	*5,437,628*	*5,437,628*
Women & children's health	-	*19,871,952*	*19,871,952*
Water, sanitation and hygiene	-	*3,880,152*	*3,880,152*
Nutrition and food security	-	*11,112,320*	*11,112,320*
2020 Total funds	-	*106,027,214*	*106,027,214*

3 Expenditure on raising funds

	Unrestricted funds $	Restricted funds $	**2021 Total $**
Fundraising staff costs	2,895	-	**2,895**
Other fundraising costs	5,000	-	**5,000**
2021 Total funds	7,895	-	**7,895**

	Unrestricted funds $	*Restricted funds $*	*2020 Total $*
Other fundraising costs	*3,546*	-	*3,546*
2020 Total funds	*3,546*		*3,546*

4 Expenditure on charitable activities

	Activities undertaken directly $	Support costs $	**2021 Total $**
Strengthening health capacity	36,716,175	2,777,137	**39,493,312**
Emergency response and preparedness	28,432,624	2,150,586	**30,583,210**
Mental health and psychosocial support	1,202,527	90,957	**1,293,484**
Women & children's health	21,731,218	1,643,705	**23,374,923**
Water, sanitation and hygiene	2,236,106	169,135	**2,405,241**
Nutrition and food security	18,161,113	1,373,670	**19,534,783**
2021 Total funds	108,479,763	8,205,190	**116,684,953**

	Activities undertaken directly $	*Support costs $*	*2020 Total $*
Strengthening health capacity	*42,490,392*	*3,127,646*	45,618,038
Emergency response and preparedness	*26,820,664*	*1,974,223*	28,794,887
Mental health and psychosocial support	*7,269,192*	*535,073*	7,804,265
Women & children's health	*17,599,810*	*1,295,492*	18,895,302
Water, sanitation and hygiene	*3,665,695*	*269,826*	3,935,521
Nutrition and food security	*24,607,029*	*1,811,282*	26,418,311
2020 Total funds	*122,452,782*	*9,013,542*	131,466,324

4 Charitable activities (continued)

Support costs are allocated to projects in line with the level of direct expenditure as this best reflects the level of support required by each project.

Costs of charitable activities can be further analysed as follows:

	Activities undertaken directly $	Support costs $	**2021 Total $**
Staff costs	42,223,994	1,831,929	**44,055,923**
Donated supplies and services	14,995,867	10,529	**15,006,396**
Auditor's remuneration			
• Statutory audit	-	50,031	**50,031**
Other costs	51,259,902	6,312,701	**57,572,603**
2021 Total	108,479,763	8,205,190	**116,684,953**

	Activities undertaken directly $	*Support costs $*	*2020 Total $*
Staff costs	*47,464,651*	*1,631,817*	*49,096,468*
Donated supplies and services	*14,831,337*	*5,651*	*14,836,988*
Auditor's remuneration			
• *Statutory audit*	–	*41,964*	*41,964*
• *Other auditors*	–	*25,000*	*25,000*
Other costs	*60,156,794*	*7,309,110*	*67,465,904*
2020 Total	*122,452,782*	*9,013,542*	*131,466,324*

4 Charitable activities (continued)

	Unrestricted funds $	Restricted funds $	**2021 Total $**
Strengthening health capacity	92,997	39,400,315	**39,493,312**
Emergency response and preparedness	72,016	30,511,194	**30,583,210**
Mental health and psychosocial support	3,046	1,290,438	**1,293,484**
Women & children's health	55,042	23,319,881	**23,374,923**
Water, sanitation and hygiene	5,664	2,399,577	**2,405,241**
Nutrition and food security	46,000	19,488,783	**19,534,783**
2021 Total funds	274,765	116,410,188	**116,684,953**

	Unrestricted funds $	*Restricted funds $*	*2020 Total $*
Strengthening health capacity	*166,006*	*45,452,032*	*45,618,038*
Emergency response and preparedness	*555,065*	*28,239,822*	*28,794,887*
Mental health and psychosocial support	*49,438*	*7,754,827*	*7,804,265*
Women & children's health	*119,698*	*18,775,604*	*18,895,302*
Water, sanitation and hygiene	*24,929*	*3,910,592*	*3,935,521*
Nutrition and food security	*170,167*	*26,248,144*	*26,418,311*
2020 Total funds	*1,085,303*	*130,381,021*	*131,466,324*

5 Employees and staff costs

Staff costs during the year were as follows:

	2021 Total $	2020 Total $
Wages and salaries	**1,601,418**	1,386,233
Social security costs	**142,361**	150,757
Other pension costs	**88,150**	71,666
Severance costs	**-**	23,161
Total UK staff costs	**1,831,929**	1,631,817
International Medical Corps Worldwide on International Medical Corps (UK) projects	**42,223,994**	47,464,651
Total staff costs	**44,055,923**	49,096,468

The average number of employees during the year, analysed by function, was as follows:

	2021 No	2020 No
UK Staff	**26**	23

5 Employees and staff costs (continued)

International Medical Corps (UK) contributes towards the salaries of a number of staff overseas and on local projects. Such staff may have only part of their salaries charged to projects; however, it is not meaningful to provide a full-time equivalent figure. The estimated number of such staff employed in the year was 2,764 (2020: 2,774).

The number of employees who earned £60,000 or more (including taxable benefits but excluding employer pension contributions) during the year was as follows:

	2021 No	2020 No
£60,000 – £70,000	**-**	2
£70,001 – £80,000	**3**	2
£100,001- £110,000	**1**	1

Key management personnel comprise those set out on page 37. The total remuneration paid to key management personnel in the year was $549,480 (2020: $477,817).

	2021 $	2020 $
Wages and salaries	**460,543**	400,540
Social security costs	**56,699**	49,243
Employer pension costs	**32,238**	28,034
Total costs	**549,480**	477,817

6 Trustees' remuneration

None of the trustees received any remuneration in respect of their services during either of the years under review.

No trustee expenses were incurred during the period (2020- £nil).

7 Taxation

International Medical Corps (UK) is a registered charity and therefore is not liable to corporation tax on income or capital gains derived from its charitable activities or use of assets, as it falls within the various exemptions available to registered charities.

The Charity is not registered for VAT and, accordingly, all expenditure is recorded inclusive of any VAT incurred.

8 Tangible fixed assets

	Office equipment $
Cost	
Total cost at 1 July 2020 and 30 June 2021	**413,610**
Depreciation	
Aggregate depreciation as at 1 July 2020	**322,442**
Charge for the year	60,861
Aggregate depreciation as at 30 June 2021	**383,303**
Net book values	
As at 30 June 2021	**30,307**
As at 30 June 2020	91,168

9 Stocks

	2021 $	2020 $
Donated goods received but not distributed	**234,967**	483,803

10 Debtors

Due within one year	**2021 $**	Reclassified (note 19) 2020 $
Prepayments and deposits	**119,618**	97,983
Accrued income	**6,976,569**	12,733,889
Other debtors – Accounts Receivable	**45,298**	392
Amount receivable from IMC Croatia	**7,595**	41,850
Amount receivable from IMC	**560,548**	-
Emergency response stock	**6,720**	6,720
	7,716,348	12,880,834

11 Creditors: amounts falling due within one year

	2021 $	Reclassified (note 19) 2020 $
Trade creditors	**5,485**	85,127
Amounts owed to International Medical Corps	**-**	14,035,818
Accruals	**223,843**	129,084
Payable to Madad Fund Sub-partners	**-**	194,055
	229,328	14,444,084

12 Restricted funds

The funds of the Charity include restricted funds comprising the following unexpended balances of donations held on trusts to be applied for specific purposes:

	At 1 July 2020 $	Income $	Expenditure $	Transfers $	At 30 June 2021 $
Strengthening health capacity	7,923,522	36,225,677	39,126,969	-	**5,022,230**
Emergency response and preparedness	4,758,700	33,893,281	30,299,517	2,122	**8,350,342**
Mental health & psychosocial support	29,131	1,262,383	1,281,486	-	**10,028**
Women & children's health	2,429,601	21,637,932	23,158,096	-	**909,437**
Water, sanitation and hygiene	443,697	2,341,263	2,382,930	-	**402,030**
Nutrition and food security	263,742	19,709,024	19,353,577	11,291	**607,898**
Restricted by country	134,183	827,504	807,613	-	**154,074**
	15,982,576	115,897,064	116,410,188	13,413	**15,456,039**

Restricted funds are analysed by the type of activity to which the funds relate. All restricted funds are held to carry out activities under these headings.

Transfers between funds relate to surplus funds on contracts which have been used for general purposes in line with donor requirements.

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13 Analysis of net assets between funds

	Unrestricted funds $	Restricted funds $	Total 2021 $
Fund balances at 30 June 2021 are represented by:			
Fixed assets	14,900	15,407	30,307
Current assets	565,481	15,669,960	16,235,441
Creditors: amounts falling due within one year	-	(229,328)	(229,328)
2021 Total net assets	**580,381**	**15,456,039**	**16,036,420**

	Unrestricted funds $	*Restricted funds $*	*Total 2020 $*
Fund balances at 30 June 2020 are represented by:			
Fixed assets	*65,235*	*25,933*	*91,168*
Current assets	*575,932*	*31,527,871*	*32,103,803*
Creditors: amounts falling due within one year	*-*	*(15,571,228)*	*(15,571,228)*
2020 Total net assets	*641,167*	*15,982,576*	*16,623,743*

14 International Medical Corps (UK) flagship areas

International Medical Corps (UK) continued to operate during the financial year to 30 June 2021 under the main flagship areas of Strengthening health capacity, Emergency response and preparedness, Mental health and psychosocial support, Women and children's health, Water, sanitation and hygiene (WASH) and Nutrition and food security.

15 Related party transactions

On 1 November 2002, International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps, a US-based non-profit organisation, to share certain services in connection with its operations. International Medical Corps agreed to assist International Medical Corps (UK) in the achievement of its charitable objectives: to relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and healthcare projects.

On 1 July 2019 International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps Croatia, a Croatian based non-profit organisation, to share certain services in connection with its operations.

Given the close operating relationship between International Medical Corps and International Medical Corps (UK) there are a number of connected persons between the two organisations at management and trustee level. These connected persons include Nancy A Aossey, who is a founding Trustee of International Medical Corps (UK), and the President and CEO of International Medical Corps, as well as a member of its board. C. William Sundblad, a Trustee of International Medical Corps (UK) is also the Chief Knowledge Officer of International Medical Corps.

During the year ended 30 June 2021, International Medical Corps billed International Medical Corps (UK) $6,806,743 (2020: $7,815,070) in lieu of service fee as per Article 5 of the Administrative Services Agreement. During the same period, International Medical Corps (UK) has rendered services to International Medical Corps of $776,778 (2020: $650,682).

During the year ended 30 June 2021, International Medical Corps Croatia billed International Medical Corps (UK) $17,270 (2020: $27,465). During the same period International Medical Corps (UK) has rendered services to International Medical Corps Croatia of $68,908 (2020: 19,596).

16 Liability of members

The charity is constituted as a company limited by guarantee. Each member has undertaken to contribute £1 to the assets of the company to meet its liabilities if called on to do so.

17 Contingent liability

Due to the nature of the Charity's agreement with donors, the Charity's expenditure is often subject to audit or other review by representatives of donors in a subsequent accounting period. There is a possibility that these audits or reviews would identify expenditures that do not fall within the terms of the grant agreements, and so the Charity would be required to repay the monies received. The trustees are not aware of any material circumstances in the year to 30 June 2021 that could give rise to such liability (2020: none).

18 Operating leases

The total of future minimum lease payments under non-cancellable operating leases is as follows:

	Gross commitment $	Less sublease $	Land and buildings Net commitment $	Equipment $	**Total 2021 $**
Due within one year	181,243	(105,725)	75,518	1,723	**77,241**
Due between 2 and 5 years	654,959	(382,059)	272,900	861	**273,761**
Over 5 years	-	-	-	-	**-**
	836,202	**(487,784)**	**348,418**	**2,584**	**351,002**

	Gross commitment $	*Less sublease $*	*Land and buildings Net commitment $*	*Equipment $*	*Total 2020 $*
Due within one year	*162,095*	*(94,555)*	*67,540*	*1,541*	*69,081*
Due between 2 and 5 years	*648,379*	*(378,221)*	*270,158*	*2,311*	*272,469*
Over 5 years	*99,477*	*(58,028)*	*41,449*	*-*	*41,449*
	909,951	*(530,804)*	*379,147*	*3,852*	*382,999*

19 Reclassification of prior year balances

International Medical Corps (UK) previously accounted for funds held and liabilities incurred by International Medical Corps on its behalf gross in its own balance sheet. Following a change in the inter entity arrangements during FY 2021, International Medical Corps (UK) is now accounting only for the net asset or liability from/to International Medica Corps. Prior year comparative amounts have been restated for consistency.

CHARITABLE ACTIVITIES DETAILED ANALYSIS FOR THE YEAR ENDED 30 JUNE 2021

The following pages (pages 68-75) do not form part of the statutory financial statements.

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY

For certain projects, closeout adjustments have resulted in negative charitable Income and expenditure adjustments

Country	Donor	IMC UK Project ID	Total Charitable Income USD	Total Charitable Expenditure USD
Afghanistan	Columbia University	203426	11,927	11,927
Afghanistan	GAC	203931	-	1,092,613
Afghanistan	GAC	204154	659,609	242,414
Afghanistan	UNOCHA	204059	373,623	226,087
Cameroon	UNHCR	203318	-	(1,366)
Cameroon	UNHCR	203855	676,213	744,454
Cameroon	UNHCR	204095	598,879	580,129
Central African Republic	EC	203593	3,655,165	3,655,165
Central African Republic	ECHO	204057	950,545	950,545
Central African Republic	MENTOR	203734	1,082,183	1,082,183
Central African Republic	UNDP	203839	189	(369)
Chad	UNICEF	203872	(4,376)	(8)
Ethiopia	UNOCHA	204001	973,343	972,068
Ethiopia	UNWOMEN	204082	155,978	155,978
Global	ACF Canada	203961	66,121	66,121
Global	UNICEF	203857	77,324	77,324
Iraq	ECHO	203753	(3,289)	(3,289)
Iraq	French MOFA	203956	4,344,151	4,285,574
Iraq	GAC	203297	(1,768)	(1,768)
Iraq	LDS	204183	500,025	2,713
Iraq	PUI	203951	274,924	549,428
Iraq	WHO	204175	22,805	22,805
Jordan	DFAT Australia	203721	-	385,477
Jordan	ANONYMOUS	204155	180,000	119,073
Jordan	UNHCR	203691	-	1,398
Jordan	UNHCR	203843	5,082,123	7,218,439
Jordan	UNHCR	204086	6,888,194	6,281,528
Jordan	UNOCHA	204021	374,448	374,448
Lebanon	EC	203528	3,210	3,210
Lebanon	EC	203696	10,255	10,255
Lebanon	GAC	203871	2,372,029	2,139,280
Lebanon	KSRelief	203771	172,622	172,622

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY (CONTD.)

Country	Donor	IMC UK Project ID	Total Charitable Income USD	Total Charitable Expenditure USD
Libya	GIZ	203680	1,358,430	1,298,115
Libya	GIZ	204119	91,721	80,009
Mali	ACF Spain	203973	1,024,059	1,024,131
Mali	ACF Spain	204033	270,365	270,365
Mali	UNICEF	203940	609,248	836,730
Pakistan	GIZ	204196	-	6,631
Palestinian Territory	NPT UK	203957	-	522,346
Somalia	ECHO	203072	(340)	-
Somalia	WV	204015	21,583	21,583
Somalia	WV	204131	9,730	9,730
South Sudan	Columbia University	203426	14,373	14,373
South Sudan	Crown Agents- Various		(2,096)	-
Sudan	DRC	203912	1,879,377	1,879,377
Sudan	EC	203408	574,974	1,559,577
Yemen	Avaaz	204168	200,000	920
Yemen	Concern Worldwide	204073	79,679	79,679
Yemen	Misereor	204122	97,545	60,956
Yemen	The Inflexion Foundation	204136	34,305	6,836
Yemen	UNOCHA	204109	208,800	20,654
Total Strengthening health capacity			**35,968,203**	**39,108,470**

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS

Country	Donor	IMC UK Project ID	Total Charitable Income USD	Total Charitable Expenditure USD
Afghanistan	UNOCHA	203779	(7,029)	-
Afghanistan	UNOCHA	203830	(8,011)	-
Burundi	KSRelief	204031	115,678	115,678
Burundi	Start Fund	203948	(7)	158,573
Cameroon	Start Network	203921	-	1,432
Cameroon	Start Network	204114	87,645	87,645
Central African Republic	IOM	204013	1,991,844	1,991,844
Central African Republic	MENTOR	203254	(5,543)	(5,543)
Ethiopia	UNHCR	203865	1,472,123	1,533,252
Ethiopia	UNICEF	204112	416,437	417,714
Ethiopia	UNOCHA	203773	(1,557)	(1,557)
Ethiopia	UNOCHA	204098	600,000	489,157
Ethiopia	WHO	204068	110,000	172,215
Global	ACF Canada	203775	(1,823)	-
Global	KSRelief	204031	1,069,176	54,071
Global ERU	The Volant Trust	204171	35,115	-
Iraq	FCDO	203500	4,615,449	4,615,449
Iraq	French MOFA	203834	(96,214)	867
Iraq	French MOFA	204173	2,802,780	291,271
Iraq	GAC	203847	1,681,540	1,681,539
Lebanon	ANONYMOUS	203974	-	300,000
Lebanon	UNOCHA	204024	1,175,262	698,730
Libya	KSRelief	204031	14,026	14,025
Libya	Start Network	203935	(9,075)	772
Middle East	FCDO	203500	1,963,207	2,395,119
Middle East	GAC	203847	2,391,069	2,368,260
Middle East	UNOCHA	203879	235,078	232,748
Pakistan	CESVI	204042	265,680	265,680
Palestinian Territory	KSRelief	204031	33,088	33,088
Philippines	KSRelief	204031	49,745	49,745
Somalia	ACF US	203983	36,546	36,546
South Sudan	KSRelief	204031	314,005	314,005
South Sudan	UNHCR	203854	(13,665)	-
South Sudan	UNICEF	203760	(34)	(34)
South Sudan	UNICEF	203774	2,198,569	2,291,385
South Sudan	UNICEF	203820	(2,241)	(2,241)
South Sudan	UNICEF	203942	(1,485)	24,354
South Sudan	UNOCHA	203972	289,933	289,933
South Sudan	WHO	203924	(339)	-

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS (CONTD.)

Country	Donor	IMC UK Project ID	Total Charitable Income USD	Total Charitable Expenditure USD
Sudan	KSRelief	204031	123,782	123,782
Sudan	Start Fund	204107	22,344	22,344
Sudan	UNDP	203842	555,578	561,333
Sudan	UNOCHA	204066	499,614	499,614
Sudan	WV	203887	232,125	232,125
Syria	DAHW	203873	-	33,836
Syria	FCDO	203500	2,717,644	2,717,644
Syria	GAC	203847	1,266,927	1,266,927
Syria	UNOCHA	203717	(17,691)	-
Yemen	ECHO	203963	1,656,434	1,742,004
Yemen	GAC	203922	1,805,894	1,078,149
Yemen	UNOCHA	203868	535,237	1,149,864
Total Emergency response and preparedness			**33,214,861**	**30,343,346**

PROJECTS CATEGORISED UNDER MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Country	Donor	IMC UK Project ID	Total Charitable Income USD	Total Charitable Expenditure USD
Afghanistan	EC	202426	(1,644)	(1,644)
Cameroon	UNHCR	203688	-	(7,686)
Cameroon	UNICEF	203799	442	442
Cameroon	UNICEF	203976	170,984	170,984
Ethiopia	UNICEF	203883	199,123	286,255
Ethiopia	UNICEF	204011	121,887	139,284
Jordan	UNSW	203611	12,538	10,806
Jordan	Vrije Universitet	203293	30	30
Nigeria	MINBUZA	203674	64,418	92,939
Turkey	ECHO	203681	590,077	590,077
Total Mental health and psychosocial support			**1,157,854**	**1,281,486**

PROJECTS CATEGORISED UNDER WATER, SANITATION AND HYGIENE

Country	Donor	IMC UK Project ID	Total Charitable Income USD	Total Charitable Expenditure USD
Afghanistan	UNICEF	203811	207,464	289,627
Afghanistan	UNOCHA	203541	(1,802)	(1,802)
Ethiopia	UNOCHA	203877	233,967	256,394
Somalia	ACF Spain	203852	603,370	653,932
South Sudan	UNMISS	204062	20,029	20,029
Syria	UNOCHA	203850	(70,080)	52,395
Yemen	UNOCHA	203864	388,504	628,626
Yemen	UNOCHA	204117	292,971	76,427
Zimbabwe	UNICEF	203988	362,900	535,754
Zimbabwe	UNICEF	204174	54,939	6,673
Total Water, sanitation and hygiene			**2,092,262**	**2,518,053**

PROJECTS CATEGORISED UNDER WOMEN & CHILDREN'S HEALTH

Country	Donor	IMC UK Project ID	Total Charitable Income USD	Total Charitable Expenditure USD
Afghanistan	UNFPA	203845	321,623	340,445
Afghanistan	UNFPA	204088	280,714	304,394
Cameroon	INTERSOS	203950	730,777	730,777
Cameroon	UNHCR	203525	-	(11,617)
Cameroon	UNHCR	203856	428,348	604,573
Cameroon	UNHCR	204094	453,064	281,612
Ethiopia	UNOCHA	204083	270,000	259,156
Ethiopia	ZOA Netherlands	203287	561,778	773,927
Iraq	UNOCHA	203700	(303)	(303)
Iraq	UNOCHA	203818	180,323	180,323
Iraq	UNOCHA	204012	800,000	683,082
Jordan	FCDO	203556	1,619,748	1,596,634
Jordan	INTERSOS	203911	2,165,237	2,165,237
Jordan	UNICEF	203844	2,239,243	2,778,502
Jordan	UNICEF	204093	1,004,062	1,004,062
Kenya	EC	203022	(48,480)	(48,480)
Lebanon	Plan Int. Australia	203448	373	473,274
Libya	UNFPA	203895	1,205,760	1,427,368
Mali	UNICEF	204064	556,164	533,413
Nigeria	MINBUZA	204069	437,427	238,078
Pakistan	UNFPA	203851	165,298	213,697
Pakistan	UNFPA	204084	72,649	75,885
South Sudan	FCDO	203190	5,531,421	6,210,079
South Sudan	UNFPA	203848	1,158,677	1,158,677
South Sudan	UNFPA	204099	1,046,550	1,110,892
South Sudan	UNICEF	204070	65,511	65,511
Total Women & children's health			**21,245,965**	**23,149,199**

PROJECTS CATEGORISED UNDER NUTRITION AND FOOD SECURITY

Country	Donor	IMC UK Project ID	Total Charitable Income USD	Total Charitable Expenditure USD
Cameroon	UNICEF	203979	43,612	43,611
Cameroon	WFP	203701	(9,795)	-
Cameroon	WFP	203711	(15,187)	-
Cameroon	WFP	203861	435,923	2,488,150
Chad	ECHO	202803	(38,894)	(38,894)
Democratic Rep of Congo	WFP	203900	107	107
Ethiopia	IMC UK GIK	204074	-	191,949
Ethiopia	UNHCR	203694	-	(4,003)
Ethiopia	UNHCR	204097	1,391,513	1,539,556
Ethiopia	WFP	203703	-	631,210
Ethiopia	WFP	203794	(658)	472,234
Ethiopia	WFP	204030	272,717	3,799,505
Global	Irish Aid	203672	-	76,862
Global	UNICEF	203655	199,010	195,123
Global	UNICEF	204115	9,995	9,995
Global	UNICEF	204120	14,747	14,747
Nigeria	WFP	203806	1,181,034	4,071,326
Nigeria	WFP	204010	84,724	84,724
Nigeria	WFP	204085	794,885	2,852,972
Somalia	ACF US	203735	529,743	529,743
South Sudan	IOM	204151	90,457	90,457
South Sudan	UNHCR	203683	(2,431)	(6,244)
South Sudan	UNICEF	203695	346,677	441,519
South Sudan	UNOCHA	204072	300,000	275,192
South Sudan	WFP	203859	191,173	446,037
South Sudan	WFP	203860	186,470	480,727
Sudan	ECHO	203743	1,108	(15,138)
Sudan	WFP	203890	-	8,669
Sudan	WFP	203891	-	111,008
Sudan	WFP	203892	-	20,573
Sudan	WFP	203893	-	81,629
Sudan	WFP	204102	-	120,019
Sudan	WFP	204103	-	17,266
Sudan	WFP	204105	-	69,026
Sudan	UNDP	203707	(3,084)	(3,084)
Sudan	WFP	204104	-	7,960
Yemen	UNOCHA	204111	640,000	72,382
Yemen	WFP	203747	-	18,238
Total Nutrition and food security			**6,643,846**	**19,195,153**



IMAGE CREDITS

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