



International Health Partners (UK) Limited

Trustees' report and financial statements
For the year ended 31 December 2023

Registered Charity No. 1105455
Company Registered No. 05044723 (England & Wales)

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Reference and administrative details of the charity, its trustees and advisers
For the year ended 31 December 2023

Patron	HM King Charles III
Trustees	Peter O'Driscoll (Chair) Barbara Brese Dr Joanna Hobbs Simon Howard Helen Leighton Wei-Lynn Lum (until 17 May 2023) Alexander Stewart Glyn Williams Aurora Chen Sean Greathead (from 17 May 2023)
Company registered number	05044723
Charity registered number	1105455
Registered office	Fox Court 14 Gray's Inn Road London WC1X 8HN
CEO	Adele Paterson
Company secretary	Tina Grear
Independent auditors	Saffery LLP 71 Queen Victoria Street London EC4V 4BE
Bankers	HSBC Bank plc 60 Queen Victoria Street London EC4N 4TR



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Chair's review

For the year ended 31 December 2023

Objectives and activities

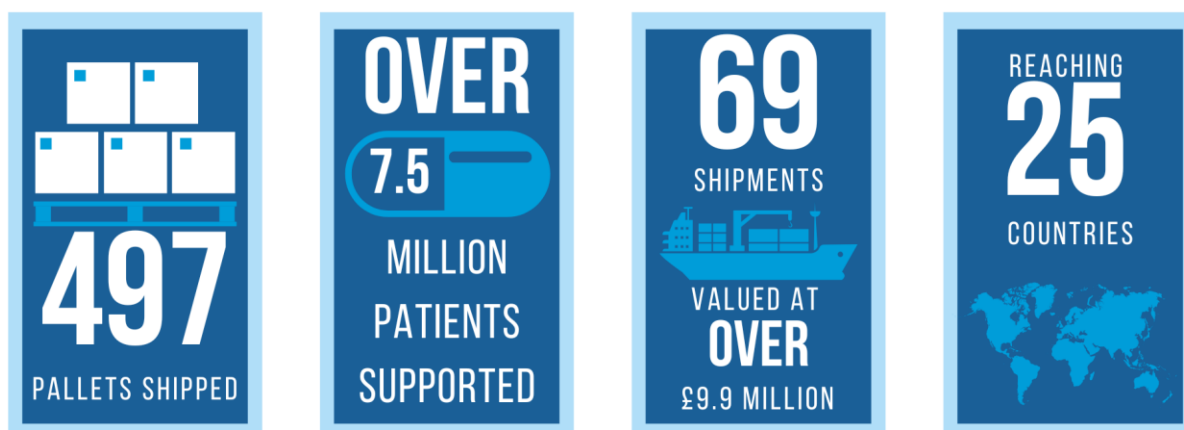
International Health Partners (IHP) was founded with a clear vision of ending the suffering caused by a lack of access to healthcare. Since our inception in 2004, we have grown into a professional and trusted organisation. Working with a global network of healthcare companies that donate high-quality and long-dated medicines and supplies; logistics providers that help store and deliver products; and programme partners on the ground, we respond to disasters and crises, support long-term health programmes, and equip medics with the tools they need to support people in some of the world's most challenging places.

As we mark our 20th anniversary in 2024, we are proud to have achieved a significant milestone, reaching more than **106 million patients** to date with essential medicines and supplies. This commitment, specifically to Sustainable Development Goal (SDG) 3 regarding good health for all continues to drive our vision. Reaching this milestone is a reminder of the power of partnerships as set out in SDG17 and embodied in our business model.

2023 was another year of significant challenge for the organisation as the continued threats of climate change, extreme weather events, food insecurity, conflict and displacement intersected, causing deeper and increasingly complex health emergencies. According to the UN Office for Coordination of Humanitarian Affairs (UNOCHA), over 363 million people needed humanitarian assistance last year – a staggering increase of almost 1 million more people than in 2022. New conflicts in Gaza and Sudan, flood disasters in Libya and East Africa, and earthquakes in Morocco, Syria and Turkey, showed humanitarian crises are driving more and more people into need at a time when the world is experiencing increasing global insecurity, political division and economic crises.

However, we still managed to reach over **7.5 million patients in 25 countries, shipping medicines and supplies with a value of over £9.9 million**. For those facing emergencies and disruptions to essential health services, these medicines often meant the difference between life and death. From mothers giving birth during conflict, to aid to young children in drought-affected regions, to those receiving cancer treatment or dialysis, IHP's work last year to deliver quality medical products, free at the point of use, offered a vital lifeline.

Our Software as a Service supports the year on year growth of our impact to many more patients worldwide as pharmaceutical companies take on their own licensed versions of our Boaz software. In addition this extends IHP's own reach through a regular income from license fees and supports our growing sustainability.



Chair's review (continued)

For the year ended 31 December 2023

Despite new challenges and against a backdrop of global uncertainty, our work continues to change lives for the better. Below, we outline some of the major focal points of our work in 2023 and illustrate how, by enhancing access to medicine, we are supporting the world's most vulnerable people.



Impact stories:

Disaster response: Turkey & Syria Earthquakes

On Monday 6 February 2023, a series of powerful earthquakes struck southern and central Turkey and northwest Syria, killing more than 50,000 people and injuring many more.

The need for healthcare support in the affected areas was critical, with millions of people displaced. Antibiotics, access to chronic disease medications, mental health and psychosocial support (MHPSS), wound care, maternal and paediatric health, cholera treatment and clean water were just some of the top reported needs.

IHP responded immediately to support our partners in the aftermath by sending medicines to support mental health and psychosocial services, primary healthcare, chronic diseases, and products for personal hygiene. In Syria, we resourced the Independent Doctors Association (IDA) with **35,352 units of essential medicines and healthcare to reach 80,310 patients with essential medicines and healthcare.**

Chair's review (continued)

For the year ended 31 December 2023

In Turkey, IHP focused its response on women and children's health through the provision of **14,310 units of medical supplies**, supporting sanitation and hygiene needs. This enables basic dignity with the provision of items such as sanitary pads for menstrual hygiene and supports SDG 3 (Gender Equality) empowering women and girls.



"It was a terrifying thing that we had never experienced before", Noor, from northern Syria described the moments the devastating earthquakes shook her home. "The whole house cracked, and my little brother was injured. After that, we spent our time moving...and every time we [settled] in a house, it was torn apart."

"Sometimes the available medicine becomes limited depending on the demand and pressure on the centre. We cannot go to a private pharmacy. Prices are very high. We do not have a job and we do not have a source of income. The situation is very difficult."

But IHP's medicines are making a difference to patients like Noor, who told us: "a lot has changed..., more medicines became available, and the service in general is good. We go to the data entry, then to the doctor, a complete examination is performed, then we go to the pharmacist. We [get] all the medications that we need."

Disaster Response: Gaza and the Middle East

On 7 October, the militant group Hamas launched a violent coordinated attack on Israel, killing more than 1,400 people and taking over 200 people hostage. In response, Israel declared a state of war and began a series of retaliatory air strikes and bombardments across Gaza. Intense airstrikes continue without pause across the Gaza Strip, including in areas in the south where people have been instructed to flee.

More than 34,000 Palestinians have now been killed in Gaza, with around 70% of those killed reported to be women and children. Over 70,000 people have been injured and in addition, an estimated 1.7 million Palestinians are displaced within Gaza (nearly 75% of the total population.)

The health situation in Gaza has reached catastrophic levels. Intense airstrikes and a lack of medical supplies, food, water and fuel have virtually depleted an already under-resourced health system. Just 13 out of 36 hospitals remain functioning. With health services in the north largely destroyed, the healthcare system in the south is



Chair's review (continued) For the year ended 31 December 2023

now on the brink of collapse as all hospitals in the Gaza Strip become overcrowded and short on medical supplies. Diseases such as acute respiratory infections, diarrhoea, scabies and meningitis have become rampant across the region.

With acute food insecurity in the region, at least 576,000 people are 'one step away from famine' as the current situation of intense conflict or restricted humanitarian access persists. Gaza is facing 'catastrophic levels of food insecurity' with 93% of the population facing crisis levels of hunger, with 335,000 being children under 5 who are at risk of severe malnutrition and death.

Even in the event of an end to the conflict, the number of excess deaths projected by a study from John Hopkins University and the London School of Hygiene and Tropical Medicine, is alarmingly high. The long-term health implications of the conflict will be far reaching.

Prior to the escalation, IHP had an existing long-term programme in Gaza and the West Bank. Despite incredibly limited and challenging access for humanitarian aid, this meant that we were well positioned to launch a response immediately. Despite being a smaller agency this has meant IHP has taken a leading role in the humanitarian response to this crisis, playing an activating role within our external networks including PQMD and Integral, issuing an Integral Alert for the first time. We continue to participate in wider fora including logistics and health cluster meetings. A clear expertise and position within the response, enabled IHP to launch a successful and ongoing fundraising campaign which raised over £430,000 by the year end, representing one of our highest responses to date.



To date (April 2024), IHP has sent three shipments to Gaza, working with our partner Anera to **provide 102,121 patients with urgently needed medicines, and 261,044 patients with medical supplies.** Despite multiple challenges including access restrictions, frequent communications blackouts and the ongoing threat from air and ground hostilities, our in-country partner, hosted free medical days in Gaza between January and March 2024 utilising IHP shipments to support patients in need of healthcare.

We have also coordinated four shipments to Lebanon, and two to the West Bank since the start of the escalations, as the spillover of the conflict has drastically increased the need for healthcare access in neighbouring regions.

As the conflict continues, this disaster response is looking like it will dominate much of our work in 2024, particularly as we are committed to the long-term rebuilding of health systems in the region. We currently have an additional eight shipments in the works with more anticipated throughout the year.

Chair's review (continued)
For the year ended 31 December 2023

Non-Communicable Diseases (NCDs)

Each year 41 million people die from NCDs, accounting for 74% of all deaths worldwide. The UN's SDG target 3.4 states that premature mortality from NCDs between the ages of 30 and 70 should reduce by a third by 2030 (from 2010). NCDs are typically long-term chronic conditions which both external and genetic factors influence. These include diseases such as cancer, diabetes, asthma, and hypertension. Many of these fatalities are premature and even preventable with the right medication and lifestyle changes, however NCDs disproportionately affect people in low-and middle-income countries where access to long-term medication and treatment can be expensive and difficult to obtain and maintain over an extended period. Without access to appropriate medication, NCDs can quickly become life-threatening.

IHP is working in 19 countries to support NCD programmes and ensure disruptions to supply are minimised. Last year, we shipped £839,234 worth of medicines for the management of NCDs. This works towards achieving the UN's prevention and treatment of NCDs aims outlined in SDG 3.4.



Cancer – Malawi

Cancer is a leading cause of death worldwide, with **less than 15% of children surviving cancer in low-income countries**. **Accessing medicine is one of the main barriers to treating cancer and increasing survival rates, particularly in Malawi**. Oncology medicines can be extremely expensive, especially for long-term courses of treatment. Whilst most cancers diagnosed in Malawi can be easily treated, a lower diagnostic capacity and limited knowledge around cancer can mean that diagnosis can be delayed, this can often mean that children start their treatment too late to cure them. It is estimated that 1,200 children are expected to develop cancer each year in Malawi, yet only 500 of these patients will be diagnosed and even fewer will receive treatment.

Richard Sabawo, Programme Coordinator at World Child Cancer Malawi, explained to us that “delays start in communities, then at the primary healthcare level (local clinics). By the time patients come to the tertiary level for cancer treatment, it can be too late”

Through our partnership with World Child Cancer at the Queen Elizabeth Central Hospital (QECH) in Blantyre, Malawi, we are supporting the Paediatric Oncology Unit with oncology medicines and supplies. **90% of the medicines used in the Paediatric Oncology Unit at QECH are donated**. The Unit sees over 200 new admissions per year and over 1,300 children during clinics annually. **The average survival rate of common and curable cancers is around 55%**. This programme is working to change these odds – improving the chances of children's survival after cancer diagnosis. IHP was able to visit World Child Cancer's work in Malawi in September 2023 and see first-hand the impact our medicines are having.

Chair's review (continued)
For the year ended 31 December 2023

Towera is 15 years old. She lives in Blantyre with her 6 siblings and enjoys learning maths and playing ball games. 4 months ago, she was diagnosed with Germ Cell Tumour at the QECH after she started to experience malarial symptoms such as fever and fatigue and a mass developed in her abdomen.

Towera was admitted to the special care unit for 2 weeks and from there was referred to the gynaecology unit due to the mass in her abdomen, to undergo surgery to remove the left ovary as this had become damaged by the cancer. After surgery, she was sent home and was given an appointment to start chemotherapy.



Aniza, the Matron at the hospital told us: "she requires eight cycles of carboplatin, neomycin and etoposide. She is currently on her second cycle of treatment. So far, she is responding well."

Whilst Towera's eldest brother is caring for the family, Towera's mother shared the impact of this on her and the family saying: "I am a single parent. It is my responsibility to make money and provide for my family but I cannot do that while Towera is sick. We are struggling financially. I am so thankful that the medicines are for free as I had fears about this when we came. I thought we would have to pay. We have also received other things for free too such as food. **The money we have saved here is helping the family at home.**"

As soon as Towera received treatment, her symptoms improved. The medication is doing a good job of shrinking the cancer in her uterus. Towera is hopeful and able to look to the future, telling us that "when I grow up I want to be a nurse as I have had such good care here."

In 2023, IHP supported 839 children through our child oncology programmes in Malawi and Cameroon.

Cancer – North Macedonia and Kosovo

North-Macedonia and Kosovo face a high burden of NCDs. Populations are at risk from high blood pressure, smoking, high blood sugar, poor diet and alcohol consumption. These factors are huge public health concerns, particularly as NCD related deaths have increased since the early 2000s, now accounting for 58% of mortalities. Cardiovascular and cerebrovascular diseases and cancers are the most common causes of adult mortality and morbidity.

Since 2016 IHP has partnered with Project HOPE in The Balkans and together in 2019 launched an adult oncology programme, supporting health facilities in Skopje, North Macedonia and Pristina, Kosovo.

Stock shortages are a common barrier to patients accessing the medicines they need due to low health budgets in the region. The cost of procuring these medicines for patients can also be crippling over a long period of time and create added financial pressures. The unavailability of medicines and cost is a significant concern for the population, particularly in relation to a cancer diagnosis where treatment must be consistent and accessible to increase chances of survival and eliminating the cancer.

Chair's review (continued)

For the year ended 31 December 2023

Through our work with Project HOPE, we are creating a more sustainable supply of medicines and filling the resource gap to make the diagnosis and treatment of cancer more accessible, leading to better health outcomes for the population.



"I live in Mitrovica, around 50km from Pristina. I am 62 years old and I have 7 children, 5 boys and 2 girls. I am Albanian and I was born in Kosovo. My town is on the border of Kosovo and Serbia and even now there is some trouble. The war has had a big impact on all Kosovo lives."

"I used to work in mining minerals in the caves until I started feeling ill. I began to feel weak and so I went to the doctor, and they saw my level of haemoglobins was low. I originally received my diagnosis in Macedonia. They performed a bone marrow biopsy and confirmed I have chronic lymphocytic leukaemia."

"In the beginning of my treatment, I received three blood transfusions from a family doctor. I was

then referred to the hospital here in Pristina. I had to pay for some tests and treatments. I have to buy my medicines and my family has to pay for this as I cannot afford on my own. If the doctor were not here, if the medicines were not here, I would die."

"When I was ill I had many problems, but now I feel much better thanks to receiving the medicines I need. I now live a normal life again. I hope to visit my children abroad soon. I am very thankful to the donors who have helped provide me some of the medicine for free. This has been a huge relief and I want to say thank you very much. I am now feeling well because of the doctors and because of you."

Last year, we shipped oncology medicines to the value of £957,760 to The Balkans, supporting 177 patients with sustainable access to cancer treatment.

Hypertension – Zanzibar

Zanzibar has a high burden of non-communicable disease (NCDs), particularly among the adult population. A particular challenge contributing to the burden of these conditions on the health system is complications associated with unmanaged conditions. Conditions can be unmanaged due to multiple factors, including: lack of screening and late diagnosis; availability of medicines; and not taking medicines.

Hypertension, also known as high blood pressure, is a condition in which the blood vessels have consistently raised pressure. It is a serious condition that can increase the risk of heart, brain, kidney disease as well as other diseases. It is a major cause of premature death worldwide, and two thirds of cases are found in low- and middle-income countries. If left untreated, hypertension can cause persistent chest pain (also called angina), heart attacks, heart failure, and an irregular heartbeat, which can lead to sudden death. Hypertension can also cause strokes, as well as kidney damage, which can lead to kidney failure.

Chair's review (continued)

For the year ended 31 December 2023

In Zanzibar hypertension is a significant problem, affecting around 33% of the adult population. Community specific risk factors for this population are high rates of obesity and smoking. However, only 12.7% of those with hypertension in Zanzibar are on treatment, and of those, only 7.8% have adequate blood pressure control. Consequently, hypertension is one of the leading causes of hospital admission and death in adults across Zanzibar (along with diabetes).

There is a profound gap in diagnosis, and a severe gap in treatment for those who are diagnosed with Hypertension. Our in-country partner HIPZ are working with the government to improve screening, increase the supplies of vital lifesaving medication and increase knowledge in the community to better inform the choices people are making in relation to their health. In a collaboration with AstraZeneca, HIPZ is working on this programme across 3 districts (covering 32 facilities) to improve awareness, screening, and access to treatment through hypertension clinics. IHP is supporting this programme through access to medicine to manage hypertension in Makunduchi hospital in the south of the island and Kivunge Hospital in northern Zanzibar, as well as smaller health initiatives across the island.

"My name is Mosi, and I am a farmer in Kijini, where I live with my wife and six children. I have long experienced issues with my blood pressure and so have come to see the clinical officer at the hospital to measure it. They first diagnosed my high-blood pressure after I had the flu and then I experienced pain which moved from my legs to chest and finally to my head which was very heavy and painful, so I came to the hospital. I had to wait three days to be seen and then I had to come back after two weeks to be monitored. I continue to come to the clinic for health check-ups and also receive free medication which helps manage my blood pressure. It has really helped my life so much- I could have died otherwise. "



"If I had to pay for the medicine's life would be challenging because we would struggle to get the money. The way my life is now, I'm very grateful. The medicine helped me, and I can go to my work healthy and do what I need to do without worry."

Mental Health

Mental health is a critical aspect of overall health and wellbeing, and it is increasingly recognised as a global health priority. The UN's SDG 3.4 lays out a target to promote mental health and wellbeing universally. However, in low-and middle-income countries (LMICs) a complex landscape of socioeconomic, cultural and structural factors are having increased adverse effects on people's mental health. These countries often face significant challenges in addressing mental health needs due to limited resources, stigma, and competing health priorities.

One of the primary issues in LMICs is the scarcity of mental health resources, including mental health professionals, facilities, and funding. This shortage exacerbates the burden of mental disorders, leading to underdiagnosis, undertreatment, and a lack of access to appropriate care for patients. LMICs frequently face significant social determinants of mental health, such as poverty, unemployment,

Chair's review (continued)

For the year ended 31 December 2023

conflict, and gender inequality, which disproportionately affect vulnerable populations. These factors increase the risk of developing mental health problems and hinder recovery efforts.

The situation is frequently made worse by the stigma that is linked to mental illness in many different cultures, which inhibits people from seeking care for their mental health issues.

Chronic exposure to instability, insecurity and violence increases the risk of people needing support for their mental health. Refugees for example, can often be exposed to various factors that affect their mental health, especially when they have experienced trauma when displaced, and a disruption in their continuity of care. Mental disorders, including depression, anxiety, and post-traumatic stress disorder, are prevalent due to the lack of access to mental health services or medicines they need.

Over the course of 2023, we were able to reach a total of **14,555** patients across **eight countries** with our mental health programming, also aligning with our core SDG 3 goal.

Lebanon

According to a study published in 2021, data from Lebanon shows severe levels of distress among the people, in a country with minimal resources. It is estimated that among the Arab states, Lebanon has the highest prevalence of anxiety. Lebanon's economic, political, and health crises have adversely impacted the mental health of people across the country. The COVID-19 pandemic, continuing economic crisis, and trauma of the Beirut blast have drastically increased the need for mental health support.

The influx of Syrian refugees into Lebanon in the last decade, currently roughly 840,900 people, has also increased the need for psychosocial services. A study conducted by the WHO and the National Mental Health Programme (NMHP) found that **22% of displaced, war-affected Syrians in Lebanon suffer from moderate to severe depressive symptoms**.

Lebanon's protracted crises have been particularly harmful to children, with a recent study finding that a third of children and adolescents studied in Lebanon showed signs of at least one psychiatric disorder. The study found that only 5% of those children and adolescents had sought professional help.

Yet while the demand for mental health support has increased, the availability of treatment has lagged behind.

A key constraint on mental health treatment in Lebanon is the shortage of accessible medicine. Most drugs used to treat neurological conditions are imported but not subsidized by the government. Like other imported goods, prices for psychiatric drugs have soared as the Lebanese pound has collapsed, leaving most of the population unable to afford them. For instance, **the cost of one common sedative increased from 25,000 Lebanese pounds to 420,000 pounds in just two months**. As a result, many go without, or are forced to ration their medicine. Others turn to the black market.

In September of 2021, The World Health Organization (WHO) estimated that nearly 40% of Lebanon's doctors and 30% of nurses had departed the country since 2019. As a result, many patients are left without therapists or treatment options. The circumstances for patients are extremely challenging.

Chair's review (continued)
For the year ended 31 December 2023

Through our partnership with Anera in Lebanon, we are working hard to improve access to medicines for neurological conditions and in 2023, shipped **32,500 packs of antidepressants**, reaching **4,550 patients** to the region.



Mohammad Kalash, a respected psychiatrist and UNRWA consultant in Beirut, underscores the gravity of Lebanon's mental health issues. He says mental health concerns have surged, particularly in free clinics. Kalash emphasizes the significance of amitriptyline, a versatile antidepressant that targets multiple neurotransmitters, and offers a comprehensive solution for patients battling depression, anxiety, and psychosis.

Kalash calls the medicine "a valuable tool in our efforts to address the rising tide of mental health issues." He also stresses the importance of a holistic approach, acknowledging that medication alone may not always be the sole solution. He stresses the crucial role of therapy in supporting mental well-being.

Alaa Morra, the mental health and psychosocial support field coordinator at UNRWA, provides first-hand insights into the impact of our donations, saying it fills critical gaps in access to vital medicines that has been exacerbated by rising prices and increased demand.

"The amitriptyline donation addresses the needs of patients dependent on this medication, preventing potential disruptions in their mental health treatment," says Morra.

The surge in medication prices and consultation costs has redirected patients to free clinics, significantly impacting their operations. Using IHP's donated medicines, ensures that these clinics can continue to provide essential mental health support.

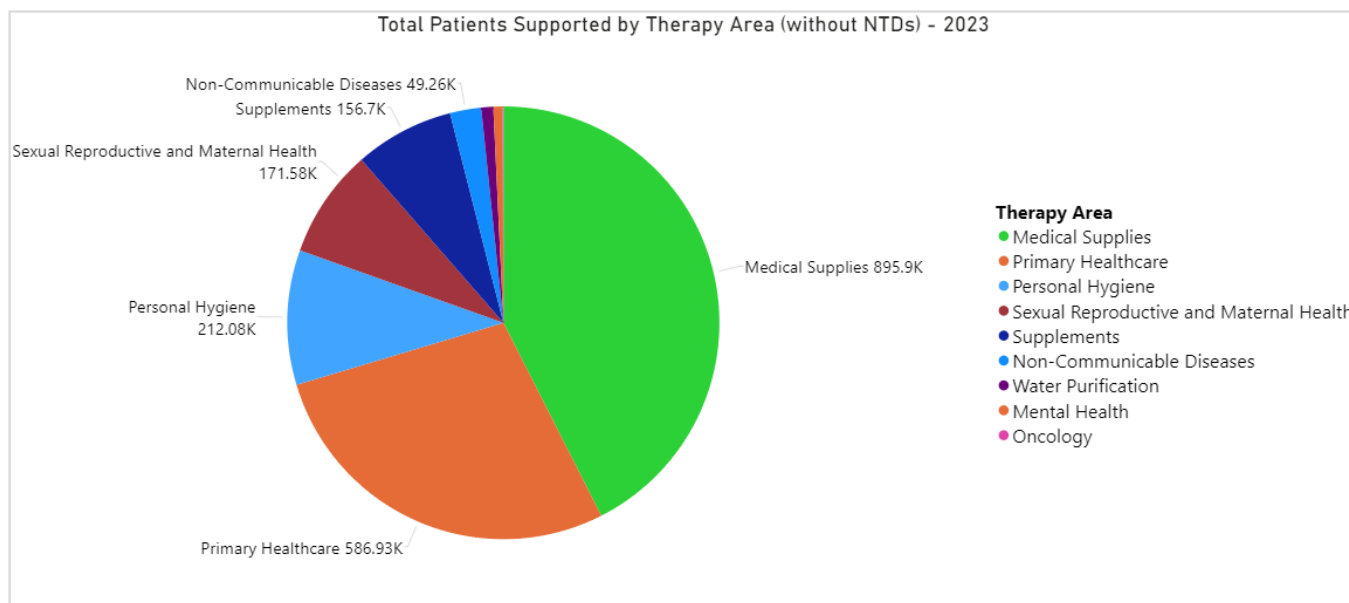


Chair's review (continued)

For the year ended 31 December 2023

Achievements and performance:

We have been running a large multi-year neglected tropical disease programme targeting deworming in a number of different countries. This programme has reached over 5.4 million patients in the last year. The rest of our work continues to span a number of therapy areas as the pie chart below illustrates.



We are proud to have reached over **7.5 million patients in 25 countries in 2023** across a range of healthcare conditions. We made good progress against all areas of our Business Plan objectives and the following three sections speak to the objectives set for the year.

Objective One: Strengthen the impact of our work

In February 2023 IHP hosted an event at the Royal College of Surgeons where partnerships were celebrated and we debuted a refresh of our 2018 video. Our new Ambassador Liz Earle MBE joined us to kick off our Radio 4 Appeal which, with the support of the MacDaibhidh Charitable Trust, saw us raise over £50,000 for our women's health work. This is part of a global effort to reduce the maternal mortality rate in line with SDG 3.1. IHP continues to work with pharmaceutical partners to showcase key health challenges – during 2023 this included an online event on maternal health with Becton Dickinson on the occasion of International Women's Day.

A new social media partnership with Swim saw healthy growth across all our communication platforms. A focus on supporter engagement was assisted by webpage developments including new 'charity challenge' and a free Will making service provided by Guardian Angels. We continued the output of video to increase impressions and worked with two social media influencers to support our Big Give campaign at the end of 2023.

Towards the end of 2023 IHP became a member of the CHS Alliance and in 2024 will be launching a self-assessment process using the Core Humanitarian Standards to help us build on the quality and accountability of our humanitarian work.

Chair's review (continued)

For the year ended 31 December 2023

The number of patients reached fluctuates year to year and 2023 saw a planned reduction in a high reach programme of deworming tablets. This programme commenced during the height of the COVID-19 period when we were offered large volumes of excess medicines by Janssen which are now reducing to more usual donation levels. Patient reach was also impacted by the reduction in excess PPE available following a previous period of over-production and the fact that 2022 levels of shipments to Haiti were unsustainable as internal unrest grew. At the same time, we increasingly focused on some high impact programmes such as oncology where patient reach is low, but reduction of mortality is high. We also ceased work with a high-volume partner as we focused on these more strategic partnerships and sought to elevate regulatory compliance. Overall, therefore whilst patient reach reduced, our strategic focus increased during the year.

We undertook a strategic review of our Essential Health Pack programme and decided to continue with bulk provision of packs which are particularly utilised in disaster response but withdraw the packs provided to individual carriers, often medics on short term missions. This was for a range of reasons, not least the low patient reach versus the organisational capacity required to deliver this programme.

Objective Two: Strengthening our organisation

The team was strengthened during 2023 using designated funds assigned for this purpose. This included investment in core functions such as data and business analysis, HR and inventory management and is reflected in the growing staff costs in the accounts.

As IHP changes from a small to a medium size charity we have tackled similar growth challenges to many others on this trajectory, including internal communications, shared objectives and capacity management. 2023 saw a step change in our metrics, business evaluation and reporting, underpinned by greater coherence in our monitoring and evaluation. The relatively new quarterly business review is now established, bringing together managers to assess and critique outputs, allowed for better understanding of key areas of performance, opportunities and risks. Alignment of activity to our strategic goals through clear objectives from the organisation level to the individual level has been a growing discipline and focus throughout the year.

Staff training during the year included public speaking training and new business development training for our corporate and fundraising teams. This is part of an internal effort to provide education and promote lifelong learning to our staff in alignment with SDG 4 – Quality Education. The focus on systems as part of our ongoing organisational development review saw new HR software chosen and put in place, supporting numerous efficiencies. Whilst a new database was delayed until 2024 our expenses system improved with the addition of a new app for all staff.

With this planned investment and the ever-increasing demand for our services we have expanded our staff from 27 at the end of 2022, to 36 as we step into 2024. We managed a mini-move within Fox Court in support of our growing numbers and the need for more collaborative office arrangements. To support these growing operational costs, our income needed to increase, and in 2023 grew by 7% from the previous year. Excluding donated medicines and other gifts-in-kind, in 2023 our income exceeded £2.2 million.

Chair's review (continued)

For the year ended 31 December 2023

We were also able to increase our logistics capacity with the onboarding of an additional pro bono warehouse, provided by Accord and run by DHL, which witnessed its first shipments in Q1 of 2023. Onboarding of a new pro bono warehouse partnership with Alloga in Netherlands will support shipments in 2024 and onwards. Other strategic partnerships included a new agreement with Bollore Logistics, a well-respected freight forwarder, which will enhance our shipping options particularly to 'hard to reach' destinations.



We restructured our Logistics team – splitting Logistics (shipping) and Supply Chain groups – to support clarity of roles and responsibilities to meet our business plan objective to provide a wider range of product support to our partners. A permanent stockholding of essential medicines means new approaches to our supply chain and we were delighted to welcome a secondee from Johnson and Johnson to help us streamline our supply chain and efficiency across our whole donation process. Our approach to cold chain shipments was strengthened in 2023 by way of training and processes in support of our increased work in oncology programmes requiring this facility. Oncology programmes remain strategically important to IHP despite the complexity of these shipments and the significantly lower patient reach per shipment.

Our staff team remains a priority and we were delighted to report satisfaction scores over 80% again in our annual staff survey. Areas raised by the staff and addressed during 2023 included improving salary transparency and increased clarity on our flexible working approach. A new Learning and Development Policy captured and clarified our development approach, and each staff member continues to be supported and encouraged in their Personal Development Plan.

Seven staff were trained as mental health first aiders to help maintain a valued culture which staff report as caring and supportive. We will continue to focus on the challenges outlined in the survey which include aspects of effective and efficient meetings, feedback and office equipment.

EIDO Research facilitated IHP in creating our first Theory of Change which has been used across the organisation and particularly by the SLT to support a review of our strategic focus.

Objective 3: Strengthen the Wider Product Environment

Our vision to create a user-friendly intuitive system that could revolutionise medical donation and make it work better for all involved has been realised through the development of Boaz. We onboarded one new licencing customer over the 2023 period and advanced development work with an existing client. As we continue to enable excellence in medical donation programmes by those who utilise the software we extend our impact and ensure access to healthcare for millions more patients

Licensed versions of Boaz supported 7.3 million units of donated consumer products and over the counter medicines during 2023, 79% of which was placed with NGO partners during the period.

Chair's review (continued) For the year ended 31 December 2023

The development of Boaz continued apace in 2023 and, to support the marketability of the product, we undertook a business and brand strategy project with the services of growth and transformation consulting firm, Prophet. This vital piece of work was generously done by Prophet on a pro bono basis and has been invaluable in developing the next stage of the system. The materials have been used with six new enquiries and helped us to be shortlisted for the Aid Innovation Challenge (AIDEX) and Pharma Industry Innovation of the Year. Prophet also supported our evaluation of our organisational design in support of software as a service. As we closed the year we were moving towards a full time Director



focusing on Boaz, operations and compliance and had recruited a new Customer Success Manager meaning that our intended growth of the Software as a Service was finally equipped as planned. A new Board committee was established to oversee this strategic work.

IHP is recognised as a leader in best practice medical donation and is an active member of the Partnership for Quality Medical Donations (PQMD) which is a global network of key healthcare companies and NGOs and others who operate in, or support, medical donations. During 2023 IHP's voice in support of best practice medicine donation was boosted by the election of our Corporate Partnerships Director as Chair of the PQMD Guidelines Committee. She is overseeing one of the largest updates to the guidelines since PQMD began in 1999 with new definitions, measures around shipping processes and risks and even aspirations around carbon emissions.

IHP speaks regularly at conferences across the healthcare, logistics and development sectors. In 2023 this included Medicines for Europe where we shared the stage with long- time partner Accord, the annual conference of Cencora (previously Amerisource Bergen) and Logipharma where IHP facilitated a main session. In addition, we were involved in and/or attended conferences with CCIH, Integral Alliance, H2H, PQMD and the Healthcare Distribution Association.

Plans for the future period

The Board has approved a three-year business plan from 2023-2025 and a refreshed 2024 plan which reflects our progress to date, risks and opportunities. In terms of organisational development, we plan some changes to the fundraising team structure, a new electronic Quality Management System and a re-focus on our culture as we grow as a team and evolve in our ways of working together.

We aim to grow our Signature Programmes of mental health, non-communicable diseases and disaster response. Our response in the Middle East will continue to be an area of priority. We aim to recruit a programme partner able to accept quality healthcare products at scale in order to extend our patient reach and accept the generosity of corporate donors of appropriate large volume 'excess' product. We will continue to extend our Software as a Service and be a leading voice in best practice donation of healthcare products.

With a new Business Plan on a page and clearer metrics for the organisation we will better align the organisation around these objectives.

2024 marks the start of IHP's 20th anniversary year and as such, an opportunity to look back on the past two decades of impact and expertise, and ahead to the future of the organisation. Various activities are planned throughout the year, including the launch of a new 'Bridging the Gap' fund aimed at growing, strengthening, and developing IHP's services to those in need of quality healthcare. This will be launched

Chair's review (continued)
For the year ended 31 December 2023

by an appeal in Spring to individuals and founding corporate donors. The calendar of events will kick off with a commemorative evening in February involving some of the original team members of IHP and those who have played a profound part in shaping the organisation over the past 20 years. Various fundraising and communications initiatives for stakeholders will follow during the year, culminating in IHP convening an industry event to rally key stakeholders in the pharmaceutical and healthcare industry, to recognise the pivotal role of donated medicines in advancing global health and achieving the Sustainable Development Goals (SDGs). The event will seek to urge industry leaders to commit to supporting IHP over the next two decades and beyond, either through financial contributions or product donations, to enhance its capacity to address pressing health challenges worldwide. We look forward to celebrating IHP's 20th birthday and hope you will join us in thanking all those have played a part in its success over its lifespan so far.

Peter O'Driscoll, Chair, 2023



IHP Staff Team, January 2024 with IHP Founders, Anthony and Ruth Dunnett, centre left & centre right.

Trustees' report

For the year ended 31 December 2023

Trustees report

The Trustees (who are also directors of the charity for the purposes of the Companies Act) present their annual report together with the audited financial statements of International Health Partners (UK) Limited (the charity) for the year ended 31 December 2023. The Trustees confirm that the Annual Report and Financial Statements of the charity comply with the Charities Act 2011, the Companies Act 2006, the requirements of the charity's governing documents 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 UK and Republic of Ireland (FRS 102).

Company structure: IHP was legally constituted as a company limited by guarantee on 16 February 2004. Charitable status was received on 12 August 2004. IHP was launched on 11 November 2004 and made its first product donations in late December 2004.

Board of Trustees and Members: Directors are appointed either by the Charity at an AGM or, between AGMs, by the other Directors. Each person who is appointed a Director shall, for the duration of his/her appointment, be a member of the Charity. At each annual general meeting, one-third of the Directors must retire from office, provided that the retiring Directors may be reappointed by the members entitled to vote. In an effort to maintain a broad skills mix, Trustees are requested to provide a list of their skills, and in the event of particular skills being absent or lost due to retirements, individuals are approached to offer themselves for election to the Board. New Trustees are provided with an Induction Pack, attend induction sessions with members of the SLT and undertake IHP's safeguarding training.

The following served as Trustees from 1 January 2023 to the date of this report unless otherwise stated:

- Peter O'Driscoll, General Counsel, Seacrest Capital Group
- Helen Leighton, former Pharmaceutical Executive (GSK)
- Simon Howard, Businessman
- Glyn Williams, Chartered Accountant
- Barbara Brese, Consultant Pharmacist
- Wei-Lynn Lum, Solicitor (until 17 May 2023)
- Alexander Stewart, Commercial Lawyer
- Dr Joanna Hobbs, General Practitioner
- Aurora Chen, Business Executive
- Sean Greathead, Head of People and Talent (from 17 May 2023)

Additional Members

- Peter Ballard, Chair: British Generic Manufacturers Association
- Dr Richard Barker OBE, Founding Director: New Medicine Partners
- Professor Raman Bedi, Chair: Global Child Dental Fund, former Chief Dental Officer for England
- Viscount Brentford
- Gary Davies, Partner: Indigo Marketing
- Laura Jordan, Actuary: AXA XL
- Professor The Lord (Ian) McColl CBE: Surgeon
- Dr Nigel Pearson, GP and international health adviser
- Andrew Russell, Chartered Accountant

Patron: In October 2020, HRH the former Prince of Wales agreed to extend his term as Royal Patron for a period of a further 5 years. Following his succession to the throne HM King Charles III agreed in May 2024 to extend his Royal Patronage, continuing his dedication to supporting IHP's vision and mission.

Trustees' report (continued)

For the year ended 31 December 2023

Aims and objectives including public benefit

The charity's main objects, as set out in its Memorandum and Articles, reflect its mission, which is "the relief of sickness and the improvement, preservation and protection of good health and social welfare of those in need around the world, without regard for ethnic or religious background, operating through partnership with those with similar charitable objectives and through Christian principles and the Christian ethos".

IHP is at the forefront of medical product donations in Europe, and works with a strong network of healthcare industry donors to coordinate humanitarian relief for those most in need. We respond rapidly to humanitarian disasters, support long-term healthcare development projects and equip medics with supplies to serve hard-to-reach communities.

In setting objectives and planning for activities, the Trustees have given due consideration to general guidance published by the Charity Commission relating to public benefit. Strategy and performance is reviewed regularly to ensure activity continues to contribute to our vision of a world in which all suffering due to lack of healthcare is eradicated.

Achievements and performance

The Chair's review on pages 4-18 outlines the key achievements for the period.

Financial review

The Statement of Financial Activities set out on page 31 shows the total income and total expenditure for the period. The value of medical products and logistics gifts-in-kind is recognised both in income and expenditure. The table below shows an abridged operating income and expenditure account which excludes the value of gifts in kind donations relating to medical products, logistical support and marketing consultancy for Boaz.

Abridged Operating Figures	Unrestricted 2023 £	Restricted 2023 £	Total 2023 £	Total 2022 £
Donation Income	577,976	1,257,628	1,835,604	1,989,394
Handling fees & shipping ^[1]	70,538	0	70,537	0
Boaz SaaS licencing	318,791	0	318,791	91,629
Charitable income total	967,305	1,257,628	2,224,933	2,081,023
Charitable Activities	(862,338)	(1,313,157)	(2,175,495)	(1,485,385)
Raising Funds	(126,346)	(6,650)	(132,996)	(110,986)
Total expenditure	(988,684)	(1,319,807)	(2,290,491)	(1,596,371)
Bank interest	10,073	0	10,073	1,747
Net income	(11,306)	(62,179)	(73,485)	282,458
TOTAL FUNDS at start of year	837,251	344,419	1,181,670	899,212
TOTAL FUNDS at end of year	825,945	282,240	1,108,185	1,181,670
Designated funds	170,000			
Free Reserves	655,945			

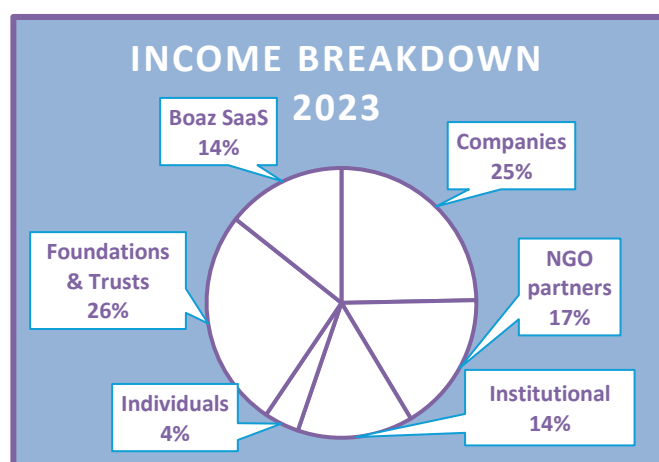
Trustees' report (continued)

For the year ended 31 December 2023

^[1] Historically, contributions towards IHP's handling costs and shipping charges were voluntary donations. During the year IHP moved towards a model of invoicing our receiving partners for their contribution towards our handling costs and, where relevant, shipping charges so this income is now a Charitable Activity. This payment towards our administration costs is not related to the value of the donated products supplied.

The value of donated pharmaceuticals, medical supplies and other health and hygiene items distributed in the period was £9,938,064 (2022: £22,242,732). The total costs incurred in sourcing, handling and delivery of medical products and strengthening the wider medical product donation environment were £2,249,421 (2022: £1,749,520) which included £58,926 (2022: £60,194) provided as logistics gifts in kind and £15,000 (2022: £nil) provided as marketing consultancy gifts in kind.

IHP enjoys a breadth of income support which has enabled our stable growth over the past few years. During 2023 we have grown our supporter base, extending our reach through social media campaigns and targeting as well as our involvement in a BBC Radio 4 appeal. The most significant area of growth has been in our income from developing and licensing Boaz SaaS to companies with a strong commitment to effective, compliant product donation.



Reserves position

Our reserves policy and designated funds were reviewed in 2023. The Trustees have agreed that the reserves are necessary to fund working capital and to provide contingencies against reductions in income and unexpected costs. In addition, reserves are held to enable the charity to plan for growth and development in line with our Business Plan and to respond to unexpected opportunities and challenges. In determining the appropriate level of funds held in reserve, account is taken of the legal commitments of the charity such as employment and facilities obligations, current projects and the risks faced by the charity. As such, the unrestricted reserves of the charity are targeted to be in the range £750k - £1.2m.

At the end of the year unrestricted funds stood at £825,945. Free reserves (which is unrestricted funds excluding fixed assets and designated funds) are £645,562 which, although slightly below our reserves target, is sufficient to enable IHP to support the investment required in the business plan objectives for 2024-2025. At the beginning of 2023, £270,000 of unrestricted reserves were designated to support the need to increase staff numbers in line with strengthened core capacity. £100,000 of these designated reserves were utilised during the year focusing on organisational development, new business and fundraising. Going forward into 2024 we will retain £150,000 of designated reserves to continue our work on organisational development and monitoring and evaluation to support strengthened impact. We will also continue to designate £20,000 into our Disaster Fund to enable IHP to respond quickly and efficiently whenever a sudden onset disaster occurs and where there is an appropriate need for our support.

Our treasury policy is designed to enable the charity to generate appropriate returns on cash held whilst minimising the risks associated with sums held. There are no investments held at this time.

Trustees' report (continued)

For the year ended 31 December 2023

Fundraising

We are grateful to our broad range of funding partners whose generous financial support has meant IHP's work continues to grow and meet the significant humanitarian needs of our world. The majority of our income is received from institutional donors, trusts and foundations, other NGOs who share our aims, individuals and companies. IHP is registered with the Fundraising Regulator and subscribes to their standards, committing to be legal, open, honest and respectful in our fundraising.

During the year IHP strengthened compliance with the requirements of GDPR (see more on this below). No fundraising complaints were received. We received fundraising support from Trew Fundraising Ltd/Linda Trew to cover maternity leave within the team. This was monitored by the CEO through regular catch ups and the Director of Finance for performance against financial targets. No other third party fundraisers were used.

During the year, we were the beneficiaries of a BBC Radio 4 appeal raising funds to enable the distribution of life-saving medicines for women's health including women suffering from haemorrhaging after childbirth. Through a successful appeal with a match donor and the support of our ambassador, Liz Earle MBE, we raised £47,811.23.

We continued to respond to the needs of those countries suffering from protracted disasters and conflicts, such as Ukraine, Central Africa and the Horn of Africa, thanks to our multi-year strategic partnerships including institutional funding from Jersey Overseas Aid. We also responded to rapid onset emergencies such as the earthquake which hit Turkey and Syria in February, which caused widespread destruction and issues to the healthcare system in many regions. Through an individual giving appeal and support from NGOs, including World Concern and Tearfund Belgium and foundations such as CML Foundation, IHP were able to raise more than £200,000.

In the later part of the year, conflict began across Israel and Gaza, with many thousands of people being affected. This major incident required a coordinated response in 2023 and continues into 2024. Working with our partner NGOs to deliver medicines safely to those in need and through financial support from partners at Integral Alliance including Transform Aid International, Tearfund New Zealand, Food for the Hungry, World Renew and World Relief as well as corporates, individuals, trusts and foundations and long-term funding from Jersey Overseas Aid. Since the beginning of the conflict until the time of publishing this report (April 2024), we have been able to arrange shipments of essential medicine and medical supplies to support over 900,000 patients.

We continue to receive significant support from our corporate partners which include Tanner Pharma, Vitabiotics, Accord, BD, Astra Zeneca, and others. This financial support is in addition to the donated healthcare products which make our work possible.



Trustees' report (continued)

For the year ended 31 December 2023

Structure, Governance and Management

The Charity Governance Code underpins IHP's approach to governance including the agendas of the Board and executive team. We seek to reflect the breadth of focus encouraged across the 7 principles of the code and the code has guided our agenda setting (governance schedule) and self-evaluation for several years. Post-meeting surveys suggest we are improving the strategic focus of trustee meetings and support improvements to effectiveness.

During 2023 the trustees held a highly interactive Away Day at which they discussed a number of key strategic documents including IHP's new Theory of Change. Using a psychometric tool to build understanding of self and other they agreed strategies to build their team effectiveness, setting aspirations and an action plan to achieve this. A number of the initiatives that followed in 2023 were guided by this plan.

During 2023 the executive worked to improve reporting to the Trustees by way of more strategic content and clearer metrics of success in the quarterly CEO report. The trustees took a close look at our Programmes work, and particularly the selection, requirements, and maintenance of strong partnerships to enable IHP's vision.

In support of succession planning and a fair distribution of trustee responsibilities, a new Chair was appointed to our Nominations, Remuneration and Employment Committee. As a reflection of our growing business in Software as a Service, we established a new Board sub-committee to oversee this work. Appropriate skills and experience for members were agreed and terms of reference established. New members joined this committee and our Governance and Risk Management Committee. Our Chair who has served nine years as a trustee will be standing down in 2024 and a process, guided by the Governance Code, is underway to recruit a successor.

As usual the Board reviewed the Business Plan (updated for 2024) and Budget. During the year the Board approved three new policies covering Learning and Development, Social Media, and Income Recognition. The Complaints Policy was reviewed in 2023; any complaints are reviewed annually as part of our Quality Management review. Other policies reviewed and updated included:- Health and Safety Policy, Safeguarding Policy, Finance Code of Conduct, Conflicts of Interest and Proprietary Policy, Privacy Policy and Staff Expenses Policy.

DLA Piper was engaged pro bono as IHP's legal advisors and provided support on a range of issues from our Software as a Service contracts to new policies. During 2024 it is likely that they will advise on an update of our Articles of Association.

Environmental Sustainability and Governance (ESG)

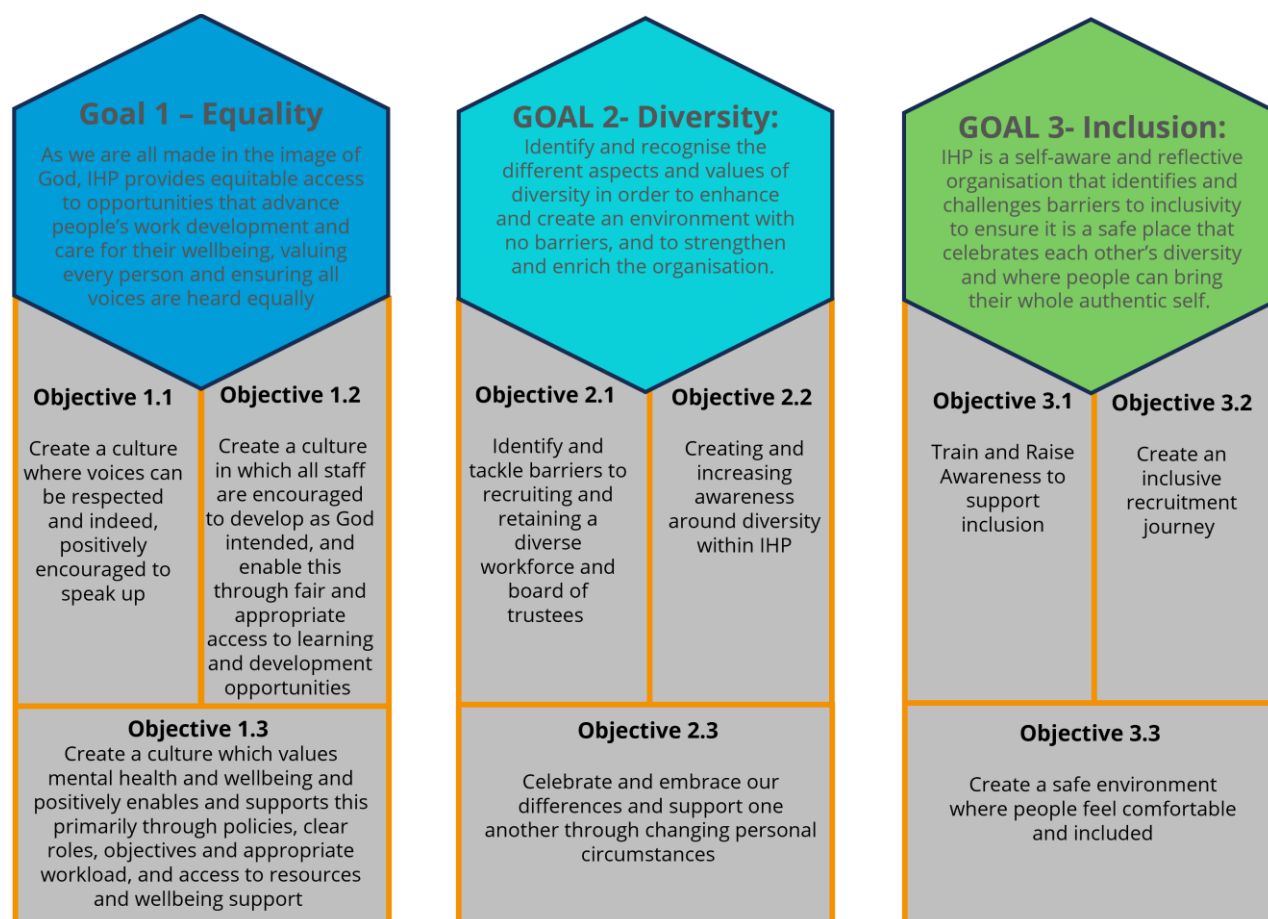
Our staff working groups continued to assess our ESG approach, with new targets and measures being achieved during the year. In support of SDG 8 - decent work and economic growth - we improved a dedicated resource area for employee benefits. Building on our Environmental approach, the SLT have agreed to an Eco-Audit in 2024. This will help us assess our carbon profile and set targets for impact reduction. An important measure that we are keen to calculate as an organisation is the carbon emissions averted from the use of excess medicines that otherwise would have been destroyed. Our first ESG Report is being prepared for release in 2024 to report in more detail on our objectives and progress.

Trustees' report (continued)

For the year ended 31 December 2023

Equality Diversity and Inclusion (EDI)

IHP's staff working group finalised our first EDI Action Plan which was reviewed and discussed by the Board. During the year we were pleased to progress a number of key elements of the plan including reviewing our recruitment and our learning and development approach, introducing a buddy system for new staff and creating greater transparency around our salaries. We also reviewed and clarified our flexible working arrangements to enable and support those with changing personal circumstances, for example ill health or caring responsibilities. Critically, decision-making was simplified for short term changes to working patterns. To support the wellbeing and mental health of all our staff we trained seven staff as Mental Health First Aiders. Activities and ideas are emerging to develop these and related wellbeing initiatives in 2024. We will be running our next demographics and EDI survey in 2024 and the trustees and staff will explore and discuss the trends and information.



Risk Management and Compliance

All new staff receive an induction covering IHP's approach to risk and this is reviewed at quarterly business reviews and SLT meetings.

Staff training to support governance and risk management included annual refreshers on safeguarding, and risk management as well as a periodic training on clinical governance.

The Safeguarding Action Group meets regularly and is chaired by the CEO who also attended additional training this year. Safeguarding is a standing agenda on the Board agenda and is reviewed in more

Trustees' report (continued)

For the year ended 31 December 2023

detail by our Governance and Risk Management Committee four times annually. Our strengthened approach generated additional queries from in country partners and UK colleagues, shaped guidance on communications practices and had lead to improved support to staff and NGO partners.

IHP completed a GDPR data audit with the support of Hope and May. As a result policies and processes were updated and the risk reduced on our register. Staff training in early 2024 will ensure we begin 2024 ever stronger in both our understanding and approach. In November we achieved the Cyber Essential mark, giving peace of mind that our defences will protect against the vast majority of common cyber attacks. We also introduced regular awareness and training with the support of Phishline. IHP maintains a register which details risks across a range of areas specific to our work, including the donation, storage, and shipping of pharmaceutical products, as well as more general risks such as governance, finance and operations. The Governance and Risk Management Committee of the Board reviews the Risk Register at least three times a year or when any specific new or urgent area of risk is identified. IHP has a standard operating procedure setting out the operational approach to risk management and the responsibilities of staff overseeing this. During 2023, the Risk Register was updated to reflect new risks. These included risks relating to staff and organisational structure change affecting business continuity, rapid expansion affecting recruitment and HR practices and risk of non-compliance by our NGO partners to various regulations. Control measures were put in place and these risks were reduced or fully addressed.

As a WDA (wholesale distribution authorisation) licence holder, IHP adheres to Good Distribution Practice (GDP). A quality management framework underpins our approach, our operations are guided by Standard Operating Procedures, and we undertake regular self-inspections to check compliance and ensure processes are fit for purpose. During 2023 our Compliance Manager oversaw a growing body of compliance documentation and processes to maintain our best practice approach. As a result, in 2024 we are introducing an electronic Quality Management System to support compliance.

Remuneration policy for key management personnel

The directors, who are the charity's trustees, give of their time freely and no director received remuneration in the year. Details of directors' expenses and related party transactions are disclosed in notes 8 and 17 to the accounts.

Staff pay is reviewed annually following appraisals and otherwise in the event of significant job description changes. An inflationary rise is given, as appropriate. Senior staff salaries are reviewed and approved by the Nominations, Employment and Remuneration Committee of the IHP Board.

Trustees' responsibilities statement

The trustees (who are also directors of IHP for the purposes of company law) are responsible for preparing the Trustees' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the trustees to prepare financial statements for each financial year. 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 then apply them consistently.
- observe the methods and principles in the Charities SORP (FRS 102)

Trustees' report (continued)
For the year ended 31 December 2023

- make judgments and accounting estimates that are reasonable and prudent.
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements.
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charitable company's transactions and 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.

Disclosure of information to auditors

Each of the persons who are trustees at the time when this Trustees' report is approved has confirmed that:

- so far as that trustee is aware, there is no relevant audit information of which the charitable company's auditors are unaware.
- that trustee has taken all the steps that ought to have been taken as a trustee in order to be aware of any information needed by the charitable company's auditors in connection with preparing their report and to establish that the charitable company's auditors are aware of that information.

Auditors

Saffery LLP have expressed their willingness to remain in office as auditors of the company.

This report has been prepared in accordance with the provisions of Part 15 of the Companies Act 2006 relating to small companies.

This report was approved by the trustees on 21 May 2024 and signed on their behalf by:

Glyn Williams
Trustee

Peter O'Driscoll
Chair

Independent auditors' report to the members For the year ended 31 December 2023

Opinion

We have audited the financial statements of International Health Partners (UK) Limited for the year ended 31 December 2023 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and notes to the financial statements, including significant accounting policies. 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 charitable company's state of affairs as at 31 December 2023 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with 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 information included in the annual 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

Independent auditors' report to the members (continued)

For the year ended 31 December 2023

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' Annual Report (which comprises the Chairman's review and the Trustees' report) which includes the Directors' Report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Trustees' Annual Report which includes the Directors' 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' Annual Report.

We have nothing to report in respect of the following matters where 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; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and to take advantage of the small companies exemption in preparing the Trustees' Annual Report and the Strategic Report.

Responsibilities of trustees

As explained more fully in the Trustees' Responsibilities Statement set out on page 22, the trustees (who are also 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 to do so.

Independent auditors' report to the members (continued)

For the year ended 31 December 2023

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditors under the Companies Act 2006 and report in accordance with regulations made under that Act.

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 specific procedures for this engagement and the extent to which these are capable of detecting irregularities, including fraud are detailed below.

Identifying and assessing risks related to irregularities:

We assessed the susceptibility of the charitable company's financial statements to material misstatement and how fraud might occur, including through discussions with the trustees, discussions within our audit team planning meeting, updating our record of internal controls and ensuring these controls operated as intended. We evaluated possible incentives and opportunities for fraudulent manipulation of the financial statements. We identified laws and regulations that are of significance in the context of the charitable company by discussions with trustees and updating our understanding of the sector in which the charitable company operates.

The charitable company is subject to laws and regulations which would have a direct impact on the financial statements, including the Companies Act 2006 and guidance issued by the Charity Commission for England and Wales.

Further the charitable company is subject to other laws and regulations where the consequences of non-compliance could have a material effect on amounts or disclosures in the financial statements; through a significant fine, litigation or restrictions on the charitable company's operations. We identified the most significant laws and regulations to be those issued by the Medicines and Healthcare products Regulatory Agency ('MHRA') covering the distribution of medicinal products for human use.

Audit response to risks identified:

We considered the extent of compliance with these laws and regulations as part of our audit procedures on the related financial statement items including a review of financial statement disclosures. We reviewed the charitable company's records of breaches of laws and regulations, minutes of meetings and correspondence with relevant authorities, including the MHRA, to identify potential material misstatements arising. We discussed the charitable company's policies and procedures for compliance with laws and regulations with members of management responsible for compliance.

During the planning meeting with the audit team, the engagement partner drew attention to the key areas which might involve non-compliance with laws and regulations or fraud. We enquired of management whether they were aware of any instances of non-compliance with laws and regulations or knowledge of any actual, suspected or alleged fraud. We addressed the risk of fraud through management override of controls by testing the appropriateness of journal entries and identifying any significant transactions that were unusual or outside the normal course of business. We assessed whether judgements made in making

Independent auditors' report to the members (continued)
For the year ended 31 December 2023

accounting estimates gave rise to a possible indication of management bias. At the completion stage of the audit, the engagement partner's review included ensuring that the team had approached their work with appropriate professional scepticism and thus the capacity to identify non-compliance with laws and regulations and fraud.

There are inherent limitations in the audit procedures described above and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we would become aware of it. Also, the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery or intentional misrepresentations, or through 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.

.....
Cara Turtington (Senior Statutory Auditor)
for and on behalf of Saffery LLP

Chartered	71 Queen Victoria Street
Accountants Statutory	London
Auditors	EC4V 4BE

Date:

Saffery LLP is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006

Statement of financial activities
(Incorporating income and expenditure account)
For the year ended 31 December 2023

		2023	2023	2023	2022
		Unrestricted	Restricted	Total	Total
		funds	funds	funds	funds
	Note	£	£	£	£
Income from:					
Donations	2	577,976	1,257,628	1,835,604	1,989,394
Charitable activities					
Boaz SaaS licensing	3a	318,791	-	318,791	91,629
Handling fees & shipping	3b	70,538	-	70,538	-
Donations of medical products	3c	9,938,064	-	9,938,064	22,242,732
Donations of storage and shipping	3d	58,926	-	58,926	60,194
Donated professional services	3e	15,000	-	15,000	-
Investments		10,073	-	10,073	1,747
Total		10,989,368	1,257,628	12,246,996	24,385,696
Expenditure on:					
Charitable activities					
Management of product donation		862,338	1,313,157	2,175,495	1,689,326
Donations of medical products	3c	9,938,064	-	9,938,064	22,242,732
Donations of storage and shipping	3d	58,926	-	58,926	60,194
Donated professional services	3e	15,000	-	15,000	-
Charitable activities total	4	10,874,328	1,313,157	12,187,485	23,992,252
Raising funds	5	126,346	6,650	132,996	110,986
Total		11,000,674	1,319,807	12,320,481	24,103,238
Net income/(expenditure) and net movement in funds					
	6	(11,306)	(62,179)	(73,485)	282,458
Reconciliation of funds:					
Total funds brought forward		837,251	344,419	1,181,670	899,212
Total funds carried forward	12	825,945	282,240	1,108,185	1,181,670

Balance sheet

As at 31 December 2023

	Note	2023 £	2023 £	2022 £	2022 £
Fixed assets					
Tangible assets	9		10,383		13,528
			<u>10,383</u>		<u>13,528</u>
Current assets					
Debtors	10	317,412		208,203	
Cash at bank and in hand		981,967		1,160,632	
		<u>1,299,379</u>		<u>1,368,835</u>	
Creditors: amounts falling due within one year	11	(201,577)		(200,693)	
Net current assets			1,097,802		1,168,142
Total net assets			<u><u>1,108,185</u></u>		<u><u>1,181,670</u></u>
Charity funds:	12				
Restricted funds			282,240		344,419
Unrestricted funds			825,945		837,251
Total funds			<u><u>1,108,185</u></u>		<u><u>1,181,670</u></u>

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies' regime.

The financial statements were approved by the Board of Trustees on 21 May 2024 and were signed on its behalf by:

.....

Glyn Williams
Trustee

Company number: 05044723

Statement of cash flows

For the year ended 31 December 2023

	Note	2023 £	2022 £
Cash flows from operating activities:			
Net cash provided by operating activities	A	(172,396)	321,796
Cash flows from investing activities:			
Purchase of fixed assets		(6,269)	(13,610)
Net cash provided by investing activities		(6,269)	(13,610)
Change in cash and cash equivalents in the year		(178,665)	308,186
Cash and cash equivalents at the beginning of the year		1,160,632	852,446
Cash and cash equivalents at the end of the year		981,967	1,160,632
A. Reconciliation of net income to net cash flow from operating activities			
Net income/(expenditure) and net movement in funds for the year		(73,485)	282,458
Depreciation charge		9,414	8,244
(Increase)/decrease in debtors		(109,209)	(60,858)
Increase in creditors		884	91,952
Net cash provided by operating activities		(172,396)	321,796

Notes to the financial statements
For the year ended 31 December 2023

1 Accounting policies

1.1 Basis of preparation of financial statements

The financial statements have been prepared under the historic cost convention. The accounts have been prepared in accordance with "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (effective 1 January 2019) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), the Charities Act 2011 and UK Generally Accepted Accounting Practice.

International Health Partners (UK) Ltd meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

The financial statements are presented in pounds sterling and rounded to the nearest pound.

The charity benefits from donated services and facilities which do not impact on the charity's cashflow.

1.2 Company Status

International Health Partners (UK) Ltd is a charitable company limited by guarantee incorporated in England and Wales. The address of the registered office is Fox Court, 14 Gray's Inn Road, London WC1X 8HN. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £10 per member of the charity. At 31 December 2023 the total of such guarantees was £180 (2022:£180).

1.3 Going concern

The trustees have reviewed the charity's serves, forecasts and projections and have a reasonable expectation that the charity will continue in operational existence for the foreseeable future. The charity there continues to adopt the going concern basis in preparing its financial statements.

1.4 Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the trustees in furtherance of the general objectives of the charity and which have not been designated for any other purpose.

Designated funds are unrestricted funds the trustees have chosen to designate for a specific purpose. This designation is shown through a transfer from the general funds after the approval has been given by the trustees. The designation can be cancelled if the project is no longer within the charity's plans. Expenditure is subsequently allocated the designated fund.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors.

Notes to the financial statements
For the year ended 31 December 2023

1 Accounting policies continued

1.5 Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the item(s) of income have been met, it is probable that the income will be received, and the amount can be measured reliably.

Income from government and other grants, whether 'capital' grants or 'revenue' grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

Gifts and donations are included in the Statement of Financial Activities when they are receivable.

Performance related grants relating to long term projects are accounted for as receivable over the period of the project in line with qualifying expenditure.

Legacy income is recognised in the Statement of Financial Activities when receipt is probable, amounts receivable can be measured with sufficient reliability, and the charity is entitled to the income. Entitlement is considered to be the earlier of the charity being notified of an expected distribution and the legacy being received.

1.6 Donated services and facilities

Donated professional services and donated facilities are recognised as income when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable, and that economic benefit can be measured reliably.

On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

1.7 Donated product

Donations of pharmaceuticals and health supplies are valued based on independently published, publicly available, price lists. Whenever possible, IHP uses the NHS indicative price as published by the NHS Prescription Pricing Authority.

Donated product is recognised as an incoming resource, in line with our stock policy, when the offer has been accepted by a receiving partner and approved by IHP.

1.8 Platform licensing

Income from software platform licensing is recognised over time during the period of the licence contract.

Notes to the financial statements

For the year ended 31 December 2023

1 Accounting policies continued

1.9 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required, and the amount of the obligation can be measured reliably.

All expenditure is accounted for on an accruals basis. Charitable expenditure includes the value of donated product distributed together with the costs of sourcing, handling and delivering.

Costs incurred in developing software for use in the charity and licensing to third parties are charged as an expense when the expenditure is recognised.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

1.10 Allocation of support costs

The trustees have defined the work of the charity as a single charitable activity of running the distribution programme and all support costs are allocated to that activity. Support costs include back office costs, finance, personnel, payroll and governance costs which support the charity's activities.

1.11 Tangible fixed assets and depreciation

Donated assets are included in the accounts at their current value at the date of the gift and included in the Statement of Financial Activities as incoming resources.

Tangible fixed assets are stated at cost less depreciation. Depreciation is provided at rates calculated to write off the cost of fixed assets, less their estimated residual value, over their expected useful lives on the following bases:

Motor vehicles	25% straight line
Computer and other equipment	33.33% straight line
Mobile phone handsets	50% straight line

The gain or loss arising on disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset and is recognised in the Statement of Financial Activities.

1.12 Stock

Stock is included at the lower of cost or net realisable value. The charity does not recognise the value of donated stock held at year end where:

- i. the charity has not paid for stock purchases,
- ii. the charity would not pay to replace stock, and
- iii. the stock cannot be resold.

Notes to the financial statements
For the year ended 31 December 2023

1 Accounting policies continued

1.13 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, and bank overdrafts.

1.14 Financial instruments

The trust only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value. 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.

1.15 Taxation

No provision has been made for taxation as the charity is a public benefit entity which is exempt from UK direct taxation on its charitable activities.

1.16 Employee benefits

The costs of short-term employee benefits are recognised as a liability and an expense. The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received. Termination benefits are recognised immediately as an expense when the company is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.17 Foreign exchange

Transactions in currencies other than pounds sterling are recorded at the rates of exchange prevailing at the dates of the transactions. At each reporting end date, monetary assets and liabilities that are denominated in foreign currencies are retranslated at the rates prevailing on the reporting end date. Gains and losses arising on translation are included in the Statement of Financial Activities for the period.

1.18 Critical accounting judgements and key sources of estimation uncertainty

In the application of the accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised and in future periods where necessary.

Notes to the financial statements
For the year ended 31 December 2023

2 Income from donations

	Total funds 2023 £	Total funds 2022 £
Gifts from individuals	93,449	62,643
Gifts from companies	549,109	588,633
Gifts from foundations, trusts and other organisations	1,193,046	1,338,118
	<u>1,835,604</u>	<u>1,989,394</u>

Included in Gifts from foundations, trusts and other organisations are six donations totalling £307,930 (2022: £214,720) from Jersey Overseas Aid supporting our response to the Turkey & Syria Earthquake, and in the Horn of Africa, Gaza and West Bank, Central Africa and Ukraine.

In the preceding period, income of £1,230,123 was restricted.

3 Income from charitable activities

3a Donations Platform licensing

IHP received income of £318,791 (2022: £91,629) from two commercial companies for the licensing and maintenance of online donations platform Boaz that allows for global view of available products, donation tracking, and for non-governmental organisations to request medical product donations.

3b Handling fees & shipping costs

During the year IHP began issuing invoices to partners receiving donated medical product towards overhead costs for sourcing, compliance and transportation, rather than relying on donations for these services provided. In 2023 £70,538 (2022: £nil) was received as charitable activities income towards overheads and shipping. This income is not related to the value of the product supplied.

3c Donations of medical products

The value of donated medicines and health supplies distributed in the period was £9,938,064 (2022: £22,242,732). This is recognised both in income and expenditure. The valuations are calculated at the time of donation and based typically on UK NHS reimbursement value. The values are justifiable, appropriate and publicly available. The values can fluctuate significantly from year to year according to the type of donated stock we receive that can meet partners' requirements.

3d Donations of shipping & storage facilities

IHP identifies the cost of storage and transportation as provided by freight carriers on a pro bono or sub market cost basis as Gifts in Kind. The total amount of gifts in kind for logistics recognised both in income and expenditure is £58,926 (2022: £60,194).

3e Donations of consultancy and legal support

IHP identifies the cost of consultancy as provided by legal or specialist consultants on a pro bono or sub market cost basis as Gifts in Kind. The total amount of gifts in kind for consultancy services for Boaz recognised both in income and expenditure is £15,000 (2022: £nil).

Notes to the financial statements
For the year ended 31 December 2023

4 Expenditure on charitable activities

	Total funds 2023 £	Total funds 2022 £
Programme costs		
Product delivered (note 3c)	9,938,064	22,242,732
Programme staff costs	1,101,783	780,985
Direct programme costs	97,140	53,485
Logistics, shipping and storage (note 3d)	289,211	286,659
Boaz Donation Platform (note 3e)	206,156	286,503
Overheads related to programmes	215,182	137,947
	<u>11,847,536</u>	<u>23,788,311</u>
Support costs		
Staff costs	180,997	126,935
Publicity, marketing and media costs	18,907	20,435
Professional services	20,659	12,160
Depreciation	9,414	8,244
Exchange (surplus)/loss	27,937	(34,326)
Overhead costs	60,690	48,468
<i>Governance costs</i>		
Audit fees	14,350	14,150
Board costs	6,995	7,875
	<u>12,187,485</u>	<u>23,992,252</u>

In the preceding period, £904,328 of expenditure was from restricted funds.

5 Expenditure on raising funds

	Total funds 2023 £	Total funds 2022 £
Fundraising costs	32,372	1,136
Fundraising staff	100,624	109,850
	<u>132,996</u>	<u>110,986</u>

In the preceding period, £34,200 of expenditure was from restricted funds.

Notes to the financial statements
For the year ended 31 December 2023

6 Net income/(expenditure)

	2023 £	2022 £
Net income/(expenditure) is stated after charging/(crediting):		
Depreciation of tangible fixed assets	9,414	8,244
Auditors' remuneration for audit services	14,350	14,150
	<u> </u>	<u> </u>

7 Staff costs

	2023 £	2022 £
Wages and salaries	1,201,473	885,611
Social security costs	127,239	93,353
Employer's pension contributions	54,692	38,806
	<u> </u>	<u> </u>
	<u>1,383,404</u>	<u>1,017,770</u>

	Number 2023	Number 2022
The average monthly full time equivalent number of employees during the year was as follows:	29	23
The average number of employees during the year was as follows:	31	24
	<u> </u>	<u> </u>

The number of higher paid employees based on annual costs, was:

In the band £60,001 - £70,000	1	3
In the band £70,001 - £80,000	2	-
In the band £90,001 - £100,000	1	1
	<u> </u>	<u> </u>

Pension contributions on behalf of these employees was £15,454 (2022: £14,120).

Total remuneration of key management personnel in the period was £198,478 (2022: £186,138)

Notes to the financial statements
For the year ended 31 December 2023

8 Transactions with trustees

No trustees received any remuneration in the year (2022: £nil).

No trustees received any reimbursement of expenses in the year (2022: £nil).

In addition, the charity received £8,250 (2022: £7,030) in personal donations from the trustees for which we are very grateful.

9 Tangible fixed assets

	Office & IT equipment £
Cost	
At 1 January 2023	38,594
Additions	6,269
Disposals	(1,372)
At 31 December 2023	43,491
Depreciation	
At 1 January 2023	25,066
Charged for the year	9,414
On disposals	(1,372)
At 31 December 2023	33,108
Net book value	
At 31 December 2023	10,383
At 31 December 2022	13,528

Notes to the financial statements
For the year ended 31 December 2023

10 Debtors

	2023 £	2022 £
Debtors	76,889	93,600
Prepayments and accrued income	240,523	114,603
	<u>317,412</u>	<u>208,203</u>

Included in accrued income is an amount of £10,000 (2022: £10,000) which is expected to be received after more than one year.

11 Creditors: amounts falling due within one year

	2023 £	2022 £
Social security and taxes	35,558	38,529
Pension contributions	8,920	6,204
Accruals and deferred income	157,099	155,960
	<u>201,577</u>	<u>200,693</u>

Deferred income of £48,780 (2022: £24,450) included in the above relates entirely to the next financial year.

Notes to the financial statements
For the year ended 31 December 2023

12 Movement on funds

Current year	Brought forward £	Income £	Expenditure £	Transfers £	Carried forward £
Restricted funds					
Donations platform -					
Boaz	-	62,219	(62,219)	-	-
Humanitarian relief					
Disaster Fund	5,000	57,428	(5,000)	-	57,428
Child Health	-	53,096	(53,096)	-	-
Neglected Tropical Diseases	-	40,327	(40,327)	-	-
Gaza & West Bank	36,400	456,045	(344,711)	-	147,734
Haiti	85,518	-	(85,518)	-	-
Honduras	-	16,000	(16,000)	-	-
Horn of Africa Crisis	72,233	53,000	(94,939)	-	30,294
Lebanon & Jordan	15,000	69,988	(64,949)	-	20,039
Libya Earthquake	-	84,840	(84,840)	-	-
Maternal Health	18,640	17,960	(36,600)	-	-
S Sudan/Central Africa	22,176	36,930	(32,361)	-	26,745
Turkey/Syria					
Earthquake	-	205,474	(205,474)	-	-
Ukraine	87,703	45,829	(133,532)	-	-
Women's Health		47,747	(47,747)	-	-
Yemen	1,749	745	(2,494)	-	-
Zanzibar	-	10,000	(10,000)	-	-
	344,419	1,257,628	(1,319,807)	-	282,240
Unrestricted funds					
General fund	567,251	10,989,368	(10,900,674)		655,945
Designated funds	270,000	-	(100,000)		170,000
	837,251	10,989,368	(11,000,674)	-	825,945
Total funds	1,181,670	12,246,996	(12,320,481)	-	1,108,185

Notes to the financial statements
For the year ended 31 December 2023

12 Movement on funds continued

Prior year	Brought forward £	Income £	Expenditure £	Transfers £	Carried forward £
Restricted funds					
Boaz Donations platform	-	270,407	(270,407)	-	-
Humanitarian relief					
Afghanistan					
Earthquake	-	28,484	(28,484)	-	-
Disaster Fund	-	9,040	(4,040)	-	5,000
Central African Republic	-	12,500	(12,500)	-	-
Child Health	-	22,342	(22,342)	-	-
Covid-19 response	-	5,000	(5,000)	-	-
Neglected Tropical Diseases	-	179,985	(179,985)	-	-
Gaza & West Bank	32,500	52,000	(48,100)	-	36,400
Haiti	-	98,602	(13,084)	-	85,518
Horn of Africa Crisis	-	122,786	(50,553)	-	72,233
Lebanon & Jordan	-	35,000	(20,000)	-	15,000
Guatemala & Honduras	3,000	9,981	(12,981)	-	-
Maternal Health	-	27,735	(9,095)	-	18,640
S Sudan/Central Africa	17,324	27,720	(22,868)	-	22,176
Ukraine	-	326,792	(239,089)	-	87,703
Yemen	-	1,749	-	-	1,749
	52,824	1,230,123	(938,528)	-	344,419
Unrestricted funds					
General funds	846,388	23,155,573	(23,164,710)	(270,000)	567,251
Designated funds	-	-	-	270,000	270,000
	846,388	23,155,573	(23,164,710)	-	837,251
Total funds	899,212	24,385,696	(24,103,238)	-	1,181,670

Notes to the financial statements
For the year ended 31 December 2023

12 Movement on funds continued

Designated funds

Designated funds are split £150,000 to continue our work on organisational development and £20,000 for our Disaster Fund to enable IHP to respond quickly and efficiently whenever a sudden onset disaster occurs and where there is an appropriate need for our support.

Restricted funds

Humanitarian Relief

Funds for Humanitarian Relief included responding to earthquakes in Turkey, Syria & Libya and crises in the Horn of Africa, Central Africa and Ukraine. We have continued to respond in the middle east despite the humanitarian crisis. Other area-specific funding supported hospitals and medical provision in areas where there are often complex protracted humanitarian crises and access to safe, quality healthcare is severely limited. We also support oncology and mental health programmes where access to medicine is severely limited.

Boaz Product donations platform

Funding for Boaz supported ongoing development of this vital system which helps match product donations and overseas needs. The system is operational with further development for the next stages currently in progress. Additional funding was received to continue to develop a bespoke version of the product licensed to one of our core partners.

13 Analysis of net assets between funds

	Unrestricted funds £	Restricted funds £	Total funds £
Current year			
Fixed assets	10,383	-	10,383
Net current assets	815,562	282,240	1,097,802
	<u>825,945</u>	<u>282,240</u>	<u>1,108,185</u>
Prior year			
Fixed assets	13,528	-	13,528
Net current assets	823,723	344,419	1,168,142
	<u>837,251</u>	<u>344,419</u>	<u>1,181,670</u>

Notes to the financial statements
For the year ended 31 December 2023

14 Operating lease commitments

At 31 December 2023 the charity had total future commitments under non-cancellable operating leases as follows:

	2023 £	2022 £
Within one year	186,375	220,000
Between two and five years	15,575	100,000
	<u>186,375</u>	<u>220,000</u>

15 Related party transactions

All transactions with trustees and board members fall within the framework of IHP's Financial Code of Conduct, Conflicts of Interest and Propriety Policy

International Health Partners Inc ('IHP Inc') donated £96,785 during the year (2022: £96,785). There was no sum due to or from IHP Inc at 31 December 2023 (2022: £24,790 (\$30,000) due from IHP Inc to IHP UK in grant funding). Peter O'Driscoll, trustee of IHP (UK), is also a Board member of IHP Inc. Adele Paterson (CEO of IHP UK) and Tina Gear (COO of IHP UK) are also Board members of IHP Inc.

There were no other related parties during the year.