

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

England & Wales · Charity number 1127569

## Details

|                |                                                         |
|----------------|---------------------------------------------------------|
| Other names    | THE WORLDWIDE PALLIATIVE CARE ALLIANCE                  |
| Status         | Registered                                              |
| Legal form     | Charitable company                                      |
| Company number | <a href="#">06735120</a>                                |
| Registered     | 2009-01-16                                              |
| Register       | <a href="#">View on the Charity Commission register</a> |

## Contact

Address 34-44 Britannia Street  
Whpca  
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WC1X 9JG

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Email [info@thewhpca.org](mailto:info@thewhpca.org)

Website [www.thewhpca.org](http://www.thewhpca.org)

## Activities

**Objects:** TO FACILITATE AND PROMOTE THE RELIEF, CARE AND TREATMENT OF THE SICK, ESPECIALLY THE CHRONICALLY AND INCURABLY ILL AND THE DYING, AND THE SUPPORT AND CARE OF THEIR FAMILIES AND CARERS AND OF THE BEREAVED, IN PARTICULAR BY:1 IMPROVING ACCESS TO, AND THE QUALITY OF PALLIATIVE CARE, WORLDWIDE AND IMPROVING THE EFFICIENCY AND EFFICACY OF INSTITUTIONS CONCERNED WITH THE CHARITABLE PROVISION OF PALLIATIVE CARE; AND2 PROVIDING OR FACILITATING EDUCATION AND TRAINING IN PALLIATIVE CARE AND INCREASING AWARENESS AND UNDERSTANDING AMONG THE GENERAL PUBLIC OF THE VALUES, PRINCIPLES AND PRACTICE OF HOSPICE AND PALLIATIVE CARE

**Activities:** The WHPCA works through the collaboration and partnership with its member organisations to:a) Improve access to, and the quality of, palliative care worldwide b) Build a worldwide network of international and national palliative care organisations c) Provide or facilitate education and training in palliative care d) Increase awareness and understanding of hospice and palliative care

## Classification

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- **How:** Makes Grants To Organisations, Provides Human Resources, Provides Buildings/facilities/open Space, Provides Services, Provides Advocacy/advice/information, Acts As An Umbrella Or Resource Body, Other Charitable Activities
- **What:** Education/training, The Advancement Of Health Or Saving Of Lives, Overseas Aid/famine Relief, Human Rights/religious Or Racial Harmony/equality Or Diversity
- **Who:** Other Charities Or Voluntary Bodies, Other Defined Groups

## Geography

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- **Area of benefit:** WORLDWIDE

- Argentina
- Armenia
- Australia
- Bangladesh
- Canada
- Ethiopia
- Greece
- India
- Ireland
- Jordan
- Kazakhstan
- Kenya
- Malaysia
- Nigeria
- Panama
- Philippines
- Sierra Leone
- Singapore
- South Africa
- Uganda
- Ukraine
- United States
- Zimbabwe
- Throughout England

## Finances

| Period end | Income   | Expenditure | Assets | Employees |
|------------|----------|-------------|--------|-----------|
| 2025-03-31 | £81,313  | £174,678    | -      | -         |
| 2024-03-31 | £206,444 | £201,262    | -      | -         |
| 2023-03-31 | £193,932 | £257,374    | -      | -         |
| 2022-03-31 | £180,971 | £156,142    | -      | -         |
| 2021-03-31 | £326,925 | £309,153    | -      | -         |

## Trustees

| Name                            | Role | Appointed  |
|---------------------------------|------|------------|
| DR James Francis Cleary         |      | 2016-12-08 |
| DR Julia Dorothy Downing        |      | 2017-03-10 |
| Dr Babe Eunice Gorata Gaolebale |      | 2020-12-10 |
| Dr Douglas Crispim              |      | 2023-06-16 |
| Dr EMMANUEL LUYIRIKA            |      | 2012-11-13 |
| Dr Frank Patrick Brennan        |      | 2016-12-08 |
| Dr Ghauri Aggarwal              |      | 2024-09-30 |
| Dr Meera Agar                   |      | 2020-10-01 |
| Dr Samy Alsirafi                |      | 2022-05-01 |
| Dr Stephen Watiti               |      | 2019-01-01 |
| Dr Yoshiyuki Kizawa             |      | 2020-10-01 |
| Joanne Brennan                  |      | 2025-10-01 |
| Laurel Gillespie                |      | 2021-03-11 |
| Maria Mercedes Marroquin        |      | 2020-08-01 |
| Professor Richard Harding-Swale |      | 2016-08-14 |
| Toby Porter                     |      | 2023-09-07 |

**THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE**

England & Wales - Charity number 1127569

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# Accounts

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# **ANNUAL REPORT AND FINANCIAL STATEMENT**

**31 March 2025**

The Worldwide Hospice Palliative Care Alliance Company Limited by Guarantee

Registered in England and Wales No 6735120

Registered Charity No 1127569

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### TRUSTEES ANNUAL REPORT

#### 1. ADMINISTRATIVE DETAILS

##### Registered name

The Worldwide Hospice Palliative Care Alliance  
Any other working name (or abbreviation): WHPCA

##### Charity and Company Registration

Registered charity: 1127569  
Company limited by guarantee in England and Wales: 6735120

##### Principal and Registered Office

Hospice House  
34-44 Britannia Street  
London  
WC1X 9JG

##### Independent Examiner

Shaun Jordan  
Price Bailey LLP  
3<sup>rd</sup> Floor  
24 Old Bond St  
Mayfair  
London  
W1S 4AP

##### Banker

Coutts and Co.  
440 Strand  
London  
WC2 0QS

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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### Trustees (During Fiscal Year)

|                      |                                                                                                                                                                     |
|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Dr James Cleary      | Director and Walther Senior Chair of Supportive Oncology, Indiana University<br>Chair July 2024 to present                                                          |
| Dr Richard Harding   | Kings College, Cicely Saunders Institute<br><u>Appointed</u> : October 2016 <u>Re-appointed</u> Mar 2020 Vice Chair                                                 |
| Dr Frank Brennen     | Physician<br><u>Appointed</u> : October 2017 <u>Re-appointed</u> Dec 2020<br><u>Appointed</u> : October 2017 <u>Re-appointed</u> Dec 2020 Treasurer                 |
| Dr Julie Ling        | Chief Executive Officer, European Association for Palliative Care<br><u>Appointed</u> : December 2014 (Chair from June 2018 to 2024)                                |
| Dr Julia Downing     | Chief Executive Officer, International Children's Palliative Care Network<br><u>Appointed</u> : October 2017 Unlimited Term                                         |
| Dr Emmanuel Luyirika | Executive Director, African Palliative Care Association<br><u>Appointed</u> : November 2012 Unlimited Term                                                          |
| Dr Ednin Hamzah      | Chair, Asia Pacific Hospice Palliative Care Network_<br><u>Appointed</u> : November 2013 <u>Re-appointed</u> : August 2017 Unlimited Term <u>Resigned</u> June 2024 |
| Mr. Toby Porter      | CEO, Hospice UK<br><u>Appointed</u> : June 2023                                                                                                                     |
| Dr Agnes Csikos      | Pecs-Baranya Hospice Foundation, Hungary<br><u>Appointed</u> : October 2017 <u>Re-appointed</u> Mar 2021                                                            |
| Ms. Maria Marroquin  | Administrator, Latin American Palliative Care Assoc.<br><u>Appointed</u> : August 2020 Unlimited Term                                                               |

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|-----------------------|---------------------------------------------------------------------------------------------------------|
| Ms Laurel Gillespie   | Executive Director, Canadian Hospice Palliative Care Association <u>Appointed:</u> May 2022             |
| Dr Stephen Watiti     | Trustee with Lived Experience Palliative Care <u>Appointed:</u> December 2018 Reappointed November 2022 |
| Dr Savita Butola      | Secretary, Indian Association of Palliative Care <u>Appointed:</u> June 2020 Unlimited Term             |
| Prof Yoshiyuki Kizawa | President, Japanese Society for Palliative Medicine <u>Appointed:</u> September 2020                    |
| Prof Meera Agar       | Chair, Palliative Care Australia <u>Appointed:</u> September 2020                                       |
| Dr Babe Gaolebale     | Botswana Ministry of Health <u>Appointed:</u> May 2020                                                  |
| Dr Sami Alsafari      | Professor, Kasr Al-Ainy School of Medicine, Cairo University. <u>Appointed:</u> May 2022                |
| Dr Douglas Crispim    | Brazilian National Academy of Palliative Care <u>Appointed:</u> December 2022                           |
| Prof Ghauri Aggarwal  | Chair, Asia Pacific Hospice Palliative Care Network <u>Appointed</u> September 2024 Unlimited Term      |

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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### 2. STRUCTURE, GOVERNANCE AND MANAGEMENT

#### Nature of Governing Document

The Worldwide Hospice Palliative Care Alliance is a charitable company limited by guarantee constituted on 28 October 2008 and governed by articles and memorandum of association which were last amended on 25 July 2017. The trustees are also directors of the charity for the purposes of the Companies Act.

#### How the Charity is Constituted

The charity is an international non-governmental organization with trustees from each region of the world. There are currently 500 organizational members of the WHPCA from 103 countries. WHPCA members are not currently required to pay dues. The only voting members are the trustees.

#### The Board of Trustees

Trustees are elected and appointed according to the byelaws, which identify the number of trustees from each world region. Qualified candidates for election to the Board are identified with our regional members and are elected by current trustees.

Most trustees retire from office after four years. Retiring trustees can be reappointed but a trustee who has served for two consecutive terms must take a break from office and may not be reappointed for one year. Trustees that represent named organizations in the byelaws can serve unlimited terms. An officer of the board can remain on the board as long as they remain seated.

The trustees delegate day-to-day management of the charity to the Executive Director, Dr Stephen Connor.

The trustees set the remuneration of key management personnel based on market rates within the sector

### 3. PUBLIC BENEFIT

We have referred to Charity Commission's general guidance on public benefit when reviewing our aims and objectives and in planning our future activities. In particular, the trustees consider how planned activities will contribute to the aims and objectives they have set. Our achievements and performance in section 5 show how we have met the public benefit requirements.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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The Worldwide Hospice Palliative Care Alliance (WHPCA) is an international nongovernmental organisation (INGO) focusing exclusively on hospice and palliative care development worldwide. Its members are national and regional hospice and palliative care organisations and affiliate organisations supporting hospice and palliative care and supporters of hospice and palliative care worldwide.

Our vision is “A world with universal Access to quality palliative care.”

Our mission is “To improve access to timely, quality palliative care globally and to reduce serious health related suffering through impactful collaboration with the global health community.”

Hospice and palliative care services relieves the pain and suffering of patients with life-limiting illness, supporting them and those around them physically, emotionally, and spiritually. Care for patients can be in a variety of settings including their own home, at the hospice, in a hospital or in the community and can be for days, months or years.

We are here to support national hospice and palliative care organisations in promoting and developing hospice and palliative care in their countries. In the following sections, we aim to give you a snapshot of the key activities we have undertaken this year to meet our charitable objectives. This review demonstrates how our work is carried out for public benefit and how we have supported our members and others to provide and develop palliative care.

#### 4. OBJECTIVES AND ACTIVITIES

The goals of the charity are:

Strategic Goal 1: We will advocate for the inclusion of palliative care services under universal health coverage at all levels including primary care.

Strategic Goal 2: We will work with member organizations to facilitate building leadership, management capacity, evidence, advocacy & policy skills, technical assistance, and communications ability.

The main activities undertaken in relation to those purposes (from 1 April 2024 to 31 March 2025) are set out in section 5 below.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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### 5. ACHIEVEMENTS AND PERFORMANCE

- *Secretariat and Governance*

This year, there were no face-to-face board meetings. However, the board did meet by teleconference four times during the year.

The executive committee held teleconference meetings between board calls.

Our first executive director, Dr Stephen Connor, was originally appointed in January 2016, and continues to lead the organization to present.

- *Risk Management*

The trustees, together with the executive director and staff, identify risks to which the Worldwide Hospice Palliative Care Alliance is exposed and ensure that appropriate controls and systems are in place to monitor and manage those risks. A risk register is maintained and is reviewed by staff monthly, by the executive committee quarterly, and by the full board annually. Current risks include securing income, dealing with potential economic downturn, ensuring compliance with UK General Data Protections Rules, ensuring our partner organizations are compliant with all safeguarding and grant funding rules and procedures, and ensuring on-line donations and grants are accurately accounted for.

*We influence policy at the highest levels*

#### *Advocacy*

This year we continued to focus our advocacy around integrating palliative care as part of health system strengthening and Universal Health Coverage reforms. We continued to work together with palliative care advocates and palliative care allies worldwide to achieve our aims for palliative care for all as part of UHC, with a particular focus on enabling the voice of people with lived experience of palliative care to be heard. We continue to work with WHO, as a non-state actor in official relations, the United Nations as an NGO with Consultative Status, and to develop strong, collaborative links with other non-state actor partnerships to deliver our objectives.

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### *Our key activities through the year include:*

We contributed to high level events ensuring the voice of palliative care, and more specifically, people with palliative care needs were heard. This included the May 2024 World Health Assembly where we organized a side event on progress since the resolution sponsored by four member states and ten civil society organizations (see flyer). WHPCA Interventions included:

- Constituency statements we are joining
  - GHC's statement on health emergencies (and NCDAs)
  - GHC's statement on NSAs in official relations
  - NCDAs statement on health workforce
- Individual statement we are giving
  - UHC intervention on global health financing
  - NCD intervention on lung health
  - Mental Health & SC
  - Global health plans supporting dementia

At the January 2025 WHO Executive Board meeting where we gave interventions on non-communicable disease, mental health and social connection, and children, adolescent, and women's health.

- We have worked to support the implementation of the WHO Palliative Care Action Plan through active engagement on the WHO palliative care working group and with partners, including:

- Bi-annual meetings with the WHO Internal Palliative Care Working Group
- Group (PCWG) Executive Director heads one of the subgroups of the PCWG

Membership in and support of:

- The WHO HIV Quality of Care Working Group
- The WHO Noncommunicable Disease and Mental Health Dept The WHO Global TB Programme
- The WHO Global Network for Long Term Care
- The WHO Cervical Cancer Elimination program
- The WHO Childhood Cancer Initiative
- The WHO Civil Society Working Group on NCD's and Pandemic Preparedness

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**77<sup>th</sup> Session of the World Health Assembly**

**In-Person Side Event**

**10 Years Since the WHA Resolution on Palliative Care....**



**Invitation**

**Ten Years Since the WHA Resolution on Palliative Care: Access is Increasing Slowly in LMICs, How Can We Expedite it?**

In 2014 after several years of advocacy, and with support from the WHO Executive Board, a stand-alone resolution on Palliative Care was unanimously approved by Member States at the 69<sup>th</sup> World Health Assembly. Resolution (67.19) titled: *"Strengthening of Palliative Care as a Component of Comprehensive Care Throughout the Life Course."*

2024 marks the 10<sup>th</sup> Anniversary of this historic resolution. Progress towards implementation of the resolution has been limited with disparate implementation between high income and low- and middle-income countries, particularly for access to essential medicines, palliative care integration into primary care and inclusion in Universal Health Coverage. *This side event will review progress, catalyze current movements, reignite commitments, spark new strategies and galvanize efforts for effective implementation to reduce serious health-related suffering. Please Join Us!*

Organized by 

Supported by Member States:







Supported by Non-State Actors:









 **Thursday 30 May 2024**  
**18:00 – 19:30 Geneva / CET**

 **Union for International Cancer Control**  
**Avenue Giuseppe Motta 31/33,**  
**1202 Genève, Switzerland**

 **Register Online, follow this link:** <https://tinyurl.com/ye8dpmte> **OR Scan this QR Code:** 

**CO-CHAIRS:**

|                                                                                                                                                                                                                                     |                                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>H.E. Ambassador Ghislain D'Hoop</b><br/><i>Acting Director General, Multilateral Affairs &amp; Globalization<br/>Kingdom of Belgium; EU Presidential Delegation; Former<br/>Chair, Commission on Narcotic Drugs (CND)</i></p> | <p><b>Mr. Blair Exell</b><br/><i>Deputy Secretary, Health Strategy, First Nations and<br/>Sport, Australian Government Department of Health and<br/>Aged Care</i></p> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**PANELISTS:**

|                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>INTRODUCTIONS from WHO:</b></p> <p><b>Dr. Bente Mikkelsen, MD</b><br/><i>Director, WHO Non-Communicable Diseases</i></p> <p><b>Dr. Rudi Eggers, MD</b><br/><i>Director, WHO Integrative Health Services</i></p> | <p><b>Dr. Stephen Connor, Moderator</b><br/><i>Worldwide Hospice Palliative<br/>Care Alliance (WHPCA)</i></p> <p><b>Dr. Vilma Tripodoro, MD, PhD</b><br/><i>ATLANTES Global Observatory in<br/>Palliative Care; WHO Collaborating<br/>Centre in Palliative Care</i></p> | <p><b>Professor Julia Downing</b><br/><i>International Children's Palliative<br/>Care Network (ICPCN)</i></p> <p><b>Dr. Zipporah Ali</b><br/><i>Board of Directors, Kenya<br/>Hospices &amp; Palliative Care &amp; APCA</i></p> |
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- We continued to disseminate our report titled: *Advocacy Guide: Palliative Care and Universal Health Coverage* to help our members to better advocate for UHC in their countries
- We also were involved in published the following articles during the fiscal year:
  1. Rosa, W.E., Connor, S., Aggarwal, G., Alsirafy, S., Brennan, J., Davies, H., Downing, J., Ferrell, B. Harding, R., Knaul, F.M., Luyirika, E., Marroquín, M., Marston, J., Radbruch, L., Rajagopal, M.R., Sallnow, L., & Krakauer, E.L. (2025). Relieve the suffering: Palliative care in the next decade. *The Lancet*.
  2. Knaul F, Bhadelia A, Kwete XJ, Rosa W, Méndez-Carniado O, Enciso VV, Calderon-Anyosa R, **Connor** S, ..... Radbruch L. The evolution of serious health-related suffering from 1990 to 2019: an update to the Lancet Commission on Global Access to Palliative Care and Pain Relief. *The Lancet Global Health*, 13: e422–36.
  3. Knaul F, Arreola-Ornelas H, Kwete XJ, Bhadelia A, Berterame S, Connor SR, De Lima L, Krakauer EL, Mendez-Carniado O, Pastrana T, Perez-Cruz P, Portenoy RK, Rosa WE, Touchton M, Enciso VV, Radbruch L. (2025). Distributed Opioids in Morphine Equivalent: A Global Measure of Availability of Palliative Care. *Journal of Pain and Symptom Management*, 69(2):204-215.
  4. Xiaoxiao J Kwete, Afsan Bhadelia, Hector Arreola-Ornelas, Oscar Mendez, William E. Rosa, Stephen **Connor**, Julia Downing, Dean Jamison, David Watkins, Renzo Calderon, Jim Cleary, Joe Friedman, Liliana De Lima, Christian Ntizimira, Tania Pastrana, Pedro E. P´erez-Cruz, Dingle Spence, M.R. Rajagopal, Valentina Vargas Enciso , Eric L. Krakauer, Lukas Radbruch , Felicia Marie Knaul , Global Assessment of Palliative Care Need: Serious Health-Related Suffering Measurement Methodology, *Journal of Pain and Symptom Management* (2024), doi: <https://doi.org/10.1016/j.jpainsymman.2024.03.027>
  5. Keiichi Fujiwara, Stephen R. Connor, Noriko Fujiwara, Raimundo Correa, Anisa Mburu, Debbie Leopold, Mary Eiken, Michael L. Pearl. The International Gynecologic Oncology consensus statement on palliative care. (2024) *J Gynecol Cancer* 2024;0:1–5. doi: <https://doi.org/10.1136/ijgc-2024-005729>
  6. Reid E, Abathun E, Zerihun M, Lorenz K, Connor S, Hauser J, Ayres N, Harding R, Gebre N. (2024) It takes a village: bringing palliative care to Ethiopia. *J Pall Care*. DOI: [10.1089/jpm.2023.0632](https://doi.org/10.1089/jpm.2023.0632)
  7. Xiaoxiao J Kwete, Afsan Bhadelia, Hector Arreola-Ornelas, Oscar Mendez, William E. Rosa, Stephen Connor,
  8. Julia Downing, Dean Jamison, David Watkins, Renzo Calderon, Jim Cleary, Joe Friedman, Liliana De Lima, Christian Ntizimira, Tania Pastrana, Pedro E. P´erez-Cruz, Dingle Spence, M.R. Rajagopal, Valentina Vargas Enciso , Eric L. Krakauer , Lukas Radbruch , Felicia Marie Knaul , Global Assessment of Palliative Care Need: Serious Health-Related Suffering Measurement Methodology, *Journal of Pain and Symptom Management* (2024), doi: <https://doi.org/10.1016/j.jpainsymman.2024.03.027>
  9. Lichtenthal W, Breen LJ, Roberts KE, **Connor** S, Aoun SA, Rosa B. Investing in Bereavement Care as a Public Health Priority A Transitional Care Model. *Lancet Public Health*. Published **Online** March 13, 2024 [https://doi.org/10.1016/S2468-2667\(24\)00030-6](https://doi.org/10.1016/S2468-2667(24)00030-6)

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### *Communications*

WHPCA publishes on the international edition of ehospice (a separate charity) which supported WHPCA programmes and advocacy activity by reporting on WHPCA programmes and efforts to achieve Universal Health Coverage and palliative care services for those who need it as part of the WHO General Programme of Work, access to medications, rights of older persons, and advocacy at the World Health Organization Executive Board Meeting and World Health Assembly. ehospice international published 45 (April 24' – March 25') articles with stories from around the world during this fiscal year.

The International edition of ehospice reported 32,617 (2024: 40,485) sessions, 26,000 (2024: 37,065) new users and 206,004 (2024: 129,301) page views over the reporting period. The WHPCA has continued to build up its communications tools including:

- Our monthly e-newsletter which is circulated to over 526 (2024: 453) member recipients and 3,117 (2024: 3,202) newsletter subscriber recipients equal a total of 3,595 (2024: 3,599) in over 120 (2024: 120) countries with an increase from the previous year.
- We have been managing and updating our WHPCA website with regular news updates relating to hospice and palliative care worldwide. There were 39,734 (2024: 36,311) sessions and 79,777 (2024: 84,751) page views, 29,541 (2024: 24,677) users on the WHPCA website during the reporting period.
- We have increased our engagement on social media mechanisms, including Facebook, and Twitter. We currently, as of 2025 have 6,394 (2024: 6,205) followers on Facebook. WHPCA also has 7,863 (2024: 8,001) followers on Twitter/X. Our LinkedIn page has 1,116 (2024: 975) followers and our Instagram account where we have 974 (2024: 783) followers.
- World Hospice and Palliative Care Day theme for 2024 was Ten Years Since the Resolution: How are we doing? Everyone deserves the best care possible regardless of who they are or where they live in the world. Palliative care is yet to be fully integrated into the healthcare system of most countries especially the low and middle-income countries. Materials were produced and utilised around the world and 161 events were registered on the website from 56 different countries. 2023 was the most successful year based on number of countries (76) and (233) events.

*WHPCA Communications continued to provide support to the Executive Director, Advocacy and, Compassionate Korail project in Bangladesh by working with the WHPCA Programmes Manager to advise on communications aspects of the project. We are building a diverse and strong movement demanding care for all*

*We are building a diverse and strong movement demanding care for all*

Our membership of the **UK working group (UKWG) on NCDs** enables us to contribute to work being undertaken by the NCDA where appropriate and importantly keeps us up to date with projects being undertaken by the other members of the UKWG and to learn from these. Membership allows WHPCA to keep up to date with advocacy initiatives from other organisations and provides information about activities at meetings such as WHA EB and UN HLM.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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In partnership with the American Eurasia Cancer Alliance, I was invited to give a plenary presentation on palliative care at the annual meeting of the **Oncologists of Uzbekistan** 17-18 May in Bukhara. The presentation was well received and was preceded by visits to the children's hospice and the construction site for a new purpose-built hospice in Tashkent. Following the conference, I attended and presented along with Julie Ling (remotely) at a roundtable in the Ministry of Health. Uzbekistan is expanding all its oncology services with a strong inclusion of palliative care.

On 25 March WHPCA organized a **World Stroke Academy** webinar on Palliative Care for People with Stroke. We've been planning for this event for over two years and the webinar reached 728 registrations from 101 countries. The presentation is available from the WSA on YouTube at: <https://youtu.be/yl4lZxTW4ug?si=AjiTBWtE9P2nnebG>

We participated in and attended the **World Innovation Summit on Health** in Qatar in November 2024. A report was released titled: "Palliative Care: How can we respond to ten years of limited progress" that will be used to inform advocacy efforts going forward.

Our executive director is part of a new **Lancet Commission on HIV and Ageing** and is a member of the writing group on managing complexity. The report will be released in early 2026.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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### *Organisational Development and Programme Support*

#### **Kenya Project Update:**

The overall goal of the ***Increasing Palliative Health Workforce Capacity in Kenya, through the Hi-Five approach project*** is to develop the health workforce in Kenya, aiding them to build stronger, resilient health systems for post-pandemic recovery and to make progress towards universal health coverages. The project team in Kenya has successfully concluded the project.

The project was selected and funded by THET. Beginning in February 2024, after the inception of all the initiatives funded, the project implementation started. This included undertaking a quick desk survey to agree on the specific needs in the 5 Lake region economic block counties that were selected to implement the initiative. A total of 71 mixed health care professionals, to include medical officers, clinical officers, nurses and pharmacists were selected to be the index beneficiaries of the course. 71 trainees completed the course which consisted of six online modules and practicum sessions which run for 3 at least 36 hours. The 71 health care workers were then charged with the responsibility of mentoring at least 5 other health care workers from a mixed pool of cadres at their workstations and to participate in the direct care provision of at least 5 patients and or families of people with palliative care needs. At each decision point, thought and planning was included to encourage and empower women participation. The “Hi 5” project has significantly contributed to upskilling the existing health workforce to integrate palliative care into their current settings with the support of and under the oversight of the county health representative. This model used train the trainer approach which helped in the creation of an expanded pool of palliative care resource persons. KEHPCA and WHPCA knew that for systematic impact more than training was needed, so a critical component was the action learning during the practicum and the commitment to use the knowledge gained to benefit patients. 270 healthcare workers were trained by trainees, and 1505 patients were seen by trained healthcare workers.

KEHPCA continues to support and provide technical assistance to help realization of fully integrated palliative care services and eventually scale up of palliative care to reach all the 14 lake Region Economic block counties, with an eventual vision of scaling this further to the entire Country through future partnerships and grants. KEHPCA was asked to apply for a next round of funding, a small amount of funding to cover six months of activities to expand and continue the Hi5 project. They were successful in this application. The donor has expressed interest in inviting WHPCA and KEHPCA to apply for future funding but to date no application process has opened.

#### **Bangladesh Project Update:**

The Bangladesh PC Model project has built an integrated age-attuned model of supportive care in Bangladesh over three years, with the project currently in the last quarter of the third year. The project is implemented through AYAT Education, Bangabandhu Sheikh Mujib Medical University (BSMMU) and St. Christopher’s Hospice in the UK and covers Bandar Upazila Health Complex, Narayanganj, Bangladesh. The overall goal of the project is to provide equitable, compassionate supportive and palliative care available, accessible, and acceptable in Narayanganj especially for elderly, poor, disabled and vulnerable women and men, serving as a model for other parts of Bangladesh.

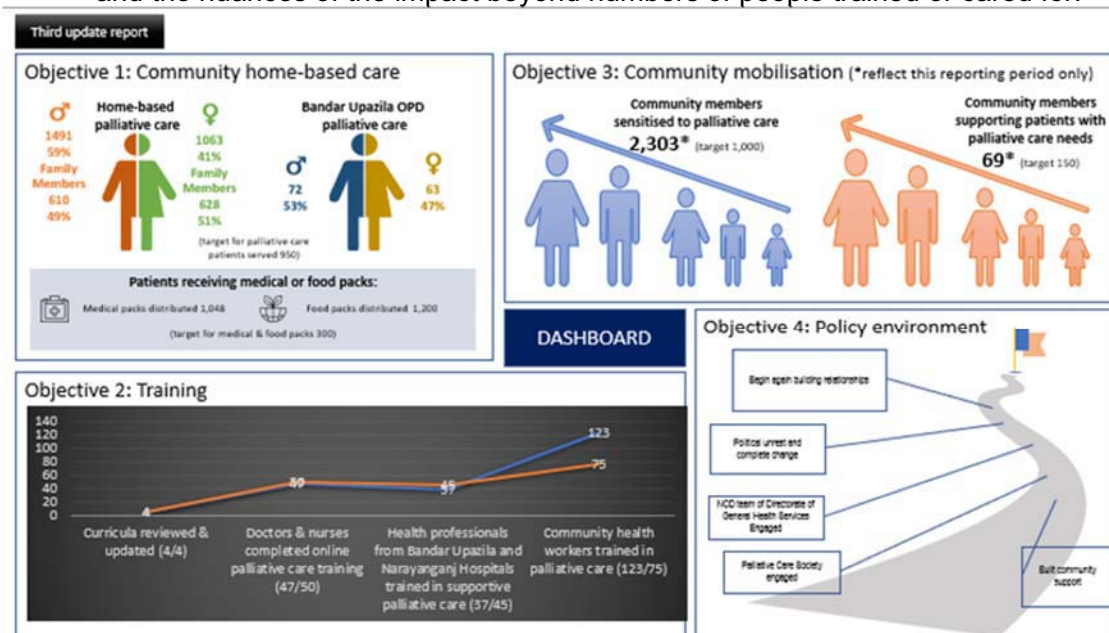
# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

The project has recently completed the year three report, and the most recent data is included at the end of this write up. The following focus areas are critical updates to the work in Bangladesh:

- As the project is coming to an end, AYAT has spent the funding requested and has very little funding to continue the work.
- BSMMU has approximately \$20,000 in reserve and we will be requesting a no-cost extension. BSMMU indicates they will use the funds to support community healthcare workers.
- WHPCA will work with the partners to conduct a self-evaluation of the project to be completed and submitted with the final report to the donor submitted in July 2025.
- WHPCA has been in contact with the donor. Future funding may be a possibility with the process to begin late Summer or Fall.
- WHPCA is also participating in an evaluation process with the donor to redesign the process they use to drive data collection and evaluation. This has been an intensive process but allows WHPCA to demonstrate the complexity of the project in Bangladesh and the nuances of the impact beyond numbers of people trained or cared for.



Our work with the Ministry of Health in **Greece** remains on hold until approval of their national strategy.

Our executive director is assisting WHO EURO to conduct a national needs assessment in **Uzbekistan**. This work is ongoing.

We continue to support palliative care colleagues in **Ukraine** with training. This year we did four virtual case conference trainings with volunteer US palliative care physicians from Harvard, Johns Hopkins and Fox Chase Cancer Centre. Difficult palliative care patients are discussed.

We continued to support the **International Gynaecological Cancer Society's** initiative to get their members to commit to integration of palliative care into specialist practices.

WHPCA is supporting pilot studies on palliative care in **Ethiopia** we hope will lead to funding for scale up of services in partnership with local burial societies.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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Our executive director travelled to Xaimen **China** to speak at a regional conference on palliative care on World Hospice & Palliative Care Day.

Work has begun on the next third edition of the **Global Atlas of Palliative Care** in cooperation with WHO, a major part of our official relations work plan. The Atlas continues to be downloaded thousands of times annually along with the **Palliative Care Training Manuals**.

### 6. FINANCIAL REVIEW

Income for the financial year was £81,313 (2024: £206,444), including grants from an Anonymous donor, the Tropical Health & Education Trust, and Global Giving Foundation. We are extremely grateful to them for their support. Expenditure for the year totalled £174,678 (2024: £201,262).

During the year WHPCA recorded a deficit of £93,365 (2023/24 surplus of £5,182) due to commitments to spend funds from the previous fiscal year. There was a large unrestricted general funds expenditure of £42,308 (2023/24: £48,428) that brings total unrestricted funds to £31,818 (2023/24: £19,606). Total funds carried forward at the end of the fiscal year were £52,451 (2023/24: £145,816).

### 7. RESERVES

The charity holds limited free reserves at the end of the year. The trustees aim to hold reserves of at least £50,000, based on an analysis of our expenditure commitments, charitable need and the security of our income streams. As the current free reserves are £31,818 (2024: £19,606), the trustees believe this level of reserves is inadequate, but we remain a going concern for the next twelve months.

### 8. PLANS FOR FUTURE PERIODS

The WHPCA will continue to work toward achieving its mission through the implementation of our new three-year strategic plan (2025-27). Currently the two strategic areas of focus are:

1. Strategic Goal 1: We will advocate for the inclusion of palliative care services under universal health coverage at all levels including primary care.
2. Strategic Goal 2: We will work with member organizations to facilitate building leadership, management capacity, evidence, advocacy & policy skills, technical assistance, and communications ability.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### STATEMENT OF TRUSTEES RESPONSIBILITIES

The trustees (who are also directors of Worldwide Hospice Palliative Care Alliance for the purposes of company law) are responsible for preparing the Report of the Trustees 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 which give a true and fair view of the state of affairs of the charitable company and its subsidiaries and of the incoming resources and application of resources, including the income and expenditure, of the charitable company and its subsidiaries for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently
- observe the methods and principles in the Charities Statement of Recommended Practice 2019 (FRS102)
- make judgements and 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 business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and its subsidiaries 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.

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom

governing the preparation and dissemination of financial statements may differ from legislations in other jurisdictions.

The Report of the Trustees has been prepared in accordance with the special provisions applicable to companies' subject to small companies' regime.

*Independent examiner*

Price Bailey LLP was re-appointed as the charity's independent examiner for this fiscal year.

Approved by the trustees on 11/12/2025 and signed on their behalf by



Dr James Cleary

Chair, WHPCA

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

The Worldwide Hospice Palliative Care Alliance

### Statement of Financial Activities (Incorporating an income and expenditure account)

**For the year ended 31 March 2025**

|                                                       |      | Unrestricted         | Restricted           | 2025<br>Total        | 2024<br>Total  |
|-------------------------------------------------------|------|----------------------|----------------------|----------------------|----------------|
|                                                       | Note | £                    | £                    | £                    | £              |
| <b>Income</b>                                         |      |                      |                      |                      |                |
| Donations and legacies                                | 2a   | 54,520               | 26,793               | 81,313               | 206,444        |
| <b>Total income</b>                                   |      | <u>54,520</u>        | <u>26,793</u>        | <u>81,313</u>        | <u>206,444</u> |
| <b>Expenditure</b>                                    |      |                      |                      |                      |                |
| Charitable activities                                 | 3    | 42,308               | 132,370              | 174,678              | 201,262        |
| <b>Total Expenditure</b>                              |      | <u>42,308</u>        | <u>132,370</u>       | <u>174,678</u>       | <u>201,262</u> |
| <b>Net(expenditure) / income<br/>before transfers</b> |      | <b>12,212</b>        | <b>(105,577)</b>     | <b>(93,365)</b>      | <b>5,182</b>   |
| Transfers between funds                               |      | -                    | -                    | -                    | -              |
| <b>Net (expenditure) / income<br/>after transfers</b> |      | <b>12,212</b>        | <b>(105,577)</b>     | <b>(93,365)</b>      | <b>5,182</b>   |
| <b>Reconciliation of funds</b>                        |      |                      |                      |                      |                |
| Total funds brought forward                           |      | <u>19,606</u>        | <u>126,210</u>       | <u>145,816</u>       | <u>140,634</u> |
| <b>Total funds carried forward</b>                    | 11   | <u><b>31,818</b></u> | <u><b>20,633</b></u> | <u><b>52,451</b></u> | <u>145,816</u> |

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### The Worldwide Hospice Palliative Care Alliance Balance sheet

**As at the 31 March 2025**

|                                      | Note | 2025<br>£      | 2024<br>£      |
|--------------------------------------|------|----------------|----------------|
| <b>Current assets</b>                |      |                |                |
| Cash at bank and in hand             |      | 55,075         | 57,926         |
| Debtors                              | 8    | 126            | 126,731        |
|                                      |      | <u>55,201</u>  | 184,657        |
| <b>Liabilities</b>                   |      |                |                |
| Creditors: amounts due within 1 year | 9    | <u>(2,750)</u> | (38,841)       |
| <b>Net current assets</b>            |      | 52,451         | 145,816        |
| <b>Net assets</b>                    |      | <u>52,451</u>  | <u>145,816</u> |
| <b>Funds</b>                         |      |                |                |
| Restricted funds                     |      | 20,633         | 126,210        |
| Unrestricted funds                   |      | 31,818         | 19,606         |
| <b>Total charity funds</b>           | 10   | <u>52,451</u>  | <u>145,816</u> |

The notes on pages 19 to 28 form part of these financial statements.

For the year ending 31 March 2025, the company was entitled to exemption from audit under section 477 of the Companies Act 2006

Directors' responsibilities:

- the members have not required the company to obtain an audit of its account for the year in question in accordance with section 476;
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the

Approved by the trustees on 11 December 2025 and signed on their behalf



Dr James Cleary  
Chair

**Company number: 6735120**

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### Notes to the financial statements

#### For the year ended 31 March 2025

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#### 1. Accounting policies

##### a) Basis of preparation

The financial statements 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), and the Companies Act 2006. The functional currency is pounds sterling.

The charity 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 notes.

##### b) Company status

The charity is a company limited by guarantee. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member (18) of the charity.

##### c) 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 other purposes.

Restricted funds are to be used for specific purposes as laid down by the donor.

##### d) Income

Voluntary income including donations, gifts and grants that provide core funding or are of general nature are recognised where there is entitlement, probability of receipt and the amount can be measured with sufficient reliability.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### 1. Accounting policies (continued)

#### e) Expenditure

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

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly allocated to either charitable or governance costs, they have been apportioned based on an estimate of the time devoted to the respective areas.

#### f) Going Concern

The financial statements have been prepared on a going concern basis as the trustees believe that no material uncertainties exist. The trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements. The budgeted income and expenditure is sufficient with the level of reserves for the charity to be able to continue as a going concern, and income received up to the date of signing these accounts suggests the budget will be met.

#### g) Debtors

Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid net of any trade discounts due. Accrued income and tax recoverable is included at the best estimate of the amounts receivable at the balance sheet date.

#### h) Creditors

Creditors are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors are normally recognised at their settlement amount.

#### i) Cash at bank and in hand

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### **1. Accounting policies (continued)**

#### **j) Pension**

The company operate a defined contribution plan for the benefit of its employees. Contributions are expensed as they become payable.

#### **k) Financial instruments**

The charity only has financial assets and liabilities that qualify as basic financial instruments, which are all measured at cost.

#### **l) Significant estimates and judgements**

No significant judgements, accounting policies or assumptions have been made by management in applying the charity's accounting policies.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### Notes to the financial statements

For the year ended 31 March 2025

### 2. Income

#### a) Donations and Legacies

|                                                |              |                      | 2025                 |                      |                       | 2024                  |
|------------------------------------------------|--------------|----------------------|----------------------|----------------------|-----------------------|-----------------------|
|                                                | Unrestricted | Restricted           | Total                | Unrestricted         | Restricted            | Total                 |
|                                                | £            | £                    | £                    | £                    | £                     | £                     |
| <b>Grants from foundations and trusts</b>      |              |                      |                      |                      |                       |                       |
| Grant from Anonymous Foundation                | -            | -                    | -                    | -                    | 118,947               | <b>118,947</b>        |
| Grant from Global Giving Foundation            | 1,543        | 225                  | <b>1,767</b>         | 335                  | 1,512                 | <b>1,847</b>          |
| Grant from Tropical Health and Education Trust | -            | 7,568                | <b>7,568</b>         | -                    | 42,432                | <b>42,432</b>         |
| Global Health Partnerships (formerly THET)     | -            | 19,000               | <b>19,000</b>        | -                    | -                     | -                     |
|                                                | <u>1,543</u> | <u>26,793</u>        | <u><b>28,335</b></u> | <u>335</u>           | <u>162,891</u>        | <u><b>163,226</b></u> |
| Income from related parties                    | 12           | 42,064               | -                    | 42,571               | -                     | <b>42,571</b>         |
| Interest income                                |              | 761                  | -                    | -                    | -                     | -                     |
| Exchange gains/(losses)                        |              | (880)                | -                    | (2,083)              | -                     | <b>(2,083)</b>        |
| Individual donations                           |              | 311                  | -                    | 2,730                | -                     | <b>2,730</b>          |
| Unrestricted trusts - Global Atlas             |              | <u>10,721</u>        | -                    | <u>-</u>             | <u>-</u>              | <u>-</u>              |
| <b>Total</b>                                   |              | <u><b>54,520</b></u> | <u><b>26,793</b></u> | <u><b>43,553</b></u> | <u><b>162,891</b></u> | <u><b>206,444</b></u> |

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

Notes to the financial statements

For the year ended 31 March 2025

### 3. a) Expenditure

|                                 | 2025           |               | 2024           |               |                |
|---------------------------------|----------------|---------------|----------------|---------------|----------------|
|                                 | Direct Costs   | Support Costs | Direct Costs   | Support Costs | Total          |
|                                 | £              | £             | £              | £             | £              |
| <b>Charitable Activities</b>    |                |               |                |               |                |
| General Capacity Building       | 42,308         | -             | 48,428         | -             | <b>48,428</b>  |
| Bangladesh Project (GDS Giving) | 86,545         | 12,683        | 116,549        | 16,184        | <b>132,733</b> |
| Ukraine                         | -              | 16            | 2,758          | 264           | <b>3,022</b>   |
| Kenya                           | 28,868         | 4,053         | 16,413         | 666           | <b>17,079</b>  |
| Kenya Extension                 | -              | 206           | -              | -             | -              |
| <b>Total Expenditure</b>        | <b>157,720</b> | <b>16,958</b> | <b>184,148</b> | <b>17,114</b> | <b>201,262</b> |

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### Notes to the financial statements

**For the year ended 31 March 2025**

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### 3. Expenditure (continued)

#### b) Analysis of Support Costs

|                                 | 2025          | 2024          |
|---------------------------------|---------------|---------------|
|                                 | £             | £             |
| <b>Governance</b>               |               |               |
| Tax and Independent Examination | 2,040         | 2,160         |
|                                 | <b>2,040</b>  | <b>2,160</b>  |
| <b>Other Support Costs</b>      |               |               |
| Accountancy and HR              | 4,835         | 3,450         |
| Miscellaneous                   | 8,721         | 8,501         |
| Communications Costs            | 997           | 1,322         |
| Website                         | 365           | 1,681         |
| <b>Total Support Costs</b>      | <b>16,958</b> | <b>17,114</b> |

Support costs have been allocated based on an estimate of time spent.

### 4. Net income/(expenditure) for the year

|                                            |       |       |
|--------------------------------------------|-------|-------|
| This is stated after charging / crediting: | 2025  | 2024  |
|                                            | £     | £     |
| Net losses on foreign exchange             | 880   | 2,083 |
| Independent Examiners fees                 | 2,040 | 2,160 |

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

### Notes to the financial statements

31 March 2025

#### For the year ended 31 March 2025

| 5. Wages and Salaries | 2025          | 2024          |
|-----------------------|---------------|---------------|
|                       | £             | £             |
| Salaries              | 45,808        | 57,034        |
| National Insurance    | -             | -             |
| Pension               | 1,214         | 1,440         |
|                       | <u>47,021</u> | <u>58,474</u> |

No employee earned more than £60,000 in the current or prior year.

The key management personnel for the year comprise the trustees. The charity's trustees were not paid and did not receive any benefits from employment with WHPCA in the year (2024: £nil). They were reimbursed expenses during the year as stated in note 12.

#### b) Staff numbers

The average monthly head count was 3 (2024: 3)

|                                            | 2025     | 2024     |
|--------------------------------------------|----------|----------|
|                                            | No       | No       |
| At 31 March, the head-count was as follows |          |          |
| Charitable activities                      | 3        | 3        |
| Total                                      | <u>3</u> | <u>3</u> |

#### 6. Pension

WHPCA contributes towards defined contribution pension plans for employees. Pension costs are recognised when they fall due.

The costs of the defined contribution scheme are included with the associated staff costs and allocated therefore to raising funds and charitable activities. £nil (2024 - £181) was owing to the pension scheme at the year end.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### Notes to the financial statements For the year ended 31 March 2025

#### 7. Taxation

WHPCA is exempt from corporation tax as all its income is applied for charitable purposes.

| 8. Debtors                  | 2025              | 2024                  |
|-----------------------------|-------------------|-----------------------|
|                             | £                 | £                     |
| Other debtors               | -                 | 807                   |
| Amounts due from Hospice UK | <u>126</u>        | <u>125,924</u>        |
|                             | <u><b>126</b></u> | <u><b>126,731</b></u> |

| 9. Creditors: Amounts falling due in less than one year | 2025                | 2024                 |
|---------------------------------------------------------|---------------------|----------------------|
|                                                         | £                   | £                    |
| Trade creditors and other creditors                     | -                   | 37,841               |
| Accruals & Deferred Income                              | <u>2,750</u>        | <u>1,000</u>         |
|                                                         | <u><b>2,750</b></u> | <u><b>38,841</b></u> |

| 10. Analysis of net assets between funds | 2025                 |                      |                      |
|------------------------------------------|----------------------|----------------------|----------------------|
|                                          | Unrestricted         | Restricted           | Total                |
|                                          | £                    | £                    | £                    |
| Net current assets                       | <u>31,818</u>        | <u>20,633</u>        | <u><b>52,451</b></u> |
|                                          | <u><b>31,818</b></u> | <u><b>20,633</b></u> | <u><b>52,451</b></u> |

|                    | 2024                 |                       |                       |
|--------------------|----------------------|-----------------------|-----------------------|
|                    | Unrestricted         | Restricted            | Total                 |
|                    | £                    | £                     | £                     |
| Net current assets | <u>19,606</u>        | <u>126,210</u>        | <u><b>145,816</b></u> |
|                    | <u><b>19,606</b></u> | <u><b>126,210</b></u> | <u><b>145,816</b></u> |

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### Notes to the financial statements

For the year ended 31 March 2025

#### 11. Analysis of funds

An analysis of restricted funds is shown below

|                               | 1 April<br>2024<br>£ | Income<br>£   | Expenditure<br>£ | Transfers<br>£ | 31 March<br>2025<br>£ |
|-------------------------------|----------------------|---------------|------------------|----------------|-----------------------|
| <b>Restricted funds</b>       |                      |               |                  |                |                       |
| Ethiopia                      | 500                  | -             | -                | -              | 500                   |
| Kenya                         | 25,352               | 7,568         | (32,920)         | -              | -                     |
| Ukraine                       | 1,130                | 225           | (16)             | -              | 1,339                 |
| Bangladesh Project            | 99,228               | -             | (99,228)         | -              | -                     |
| Kenya Extension               | -                    | 19,000        | (206)            | -              | 18,794                |
| <b>Total restricted funds</b> | <b>126,210</b>       | <b>26,793</b> | <b>(132,370)</b> | <b>-</b>       | <b>20,633</b>         |
|                               | -                    |               |                  |                |                       |
| <b>Unrestricted funds</b>     | <b>19,606</b>        | <b>54,520</b> | <b>(42,308)</b>  | <b>-</b>       | <b>31,818</b>         |
| <b>Total funds</b>            | <b>145,816</b>       | <b>81,313</b> | <b>(174,678)</b> | <b>-</b>       | <b>52,451</b>         |

|                               | 1 April<br>2023<br>£ | Income<br>£    | Expenditure<br>£ | Transfers<br>£ | 31 March<br>2024<br>£ |
|-------------------------------|----------------------|----------------|------------------|----------------|-----------------------|
| <b>Restricted funds</b>       |                      |                |                  |                |                       |
| Ethiopia                      | 500                  | -              | -                | -              | 500                   |
| Kenya                         | -                    | 42,432         | (17,080)         | -              | 25,352                |
| Ukraine                       | 2,640                | 1,512          | (3,022)          | -              | 1,130                 |
| Bangladesh Project            | 113,013              | 118,947        | (132,732)        | -              | 99,228                |
| <b>Total restricted funds</b> | <b>116,153</b>       | <b>162,891</b> | <b>(152,834)</b> | <b>-</b>       | <b>126,210</b>        |
|                               | -                    |                |                  |                |                       |
| <b>Unrestricted funds</b>     | <b>24,481</b>        | <b>43,553</b>  | <b>(48,428)</b>  | <b>-</b>       | <b>19,606</b>         |
| <b>Total funds</b>            | <b>140,634</b>       | <b>206,444</b> | <b>(201,262)</b> | <b>-</b>       | <b>145,816</b>        |

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2025

### Notes to the financial statements

#### For the year ended 31 March 2025

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#### 11. Analysis of funds (continued)

Global Health Partnerships (formerly THET) is funding palliative care development project in Kenya

A UK trust which wishes to remain anonymous is funding a palliative care development project in Bangladesh.

We worked with the Global Giving Foundation to support palliative care in the Ukraine

#### 12. Related party transactions

WHPCA paid the cost of travel and expenses incurred by Trustees whilst fulfilling their duties to WHPCA. This includes the reimbursement of expenses totalling £nil (2024: £nil).

Hospice UK, a UK registered charity, is a member of WHPCA and the Chief Executive Officer of Hospice UK - Toby Porter - is a trustee of WHPCA.

Hospice UK also provided various services to WHPCA, including financial management and payroll services valued at £4,800 (2024: £3,750).

At the year end Hospice UK owed £126 to WHPCA (2024: £125,924).

During the year, Stephen Connor, the executive director, donated £420 to WHPCA (2024: £630)

During the year, the charity paid £600 in subscriptions to ehospice, a communications charity. (2024:

£600). One trustees of WHPCA, Dr Julie Downing and its executive director, Dr Stephen R Connor are also trustees of ehospice

During the year, the charity received £31,960 (2024: £30,033) from EAPC for staff recharges. The chair, Julie Ling, is chief executive of EAPC.

During the year, the charity received £9,685 (2024: £9,685) from ICPCN for staff recharges and paid it £nil (2024: £nil) in consultancy fees. A trustee, Julie Downing, is chief executive of the ICPCN

#### 13. Ultimate controlling party

There is no overall controlling party.

**THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE**

England & Wales - Charity number 1127569

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# Accounts

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**THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE**  
**ANNUAL REPORT AND FINANCIAL STATEMENT**

**31 March 2024**



**ANNUAL REPORT AND FINANCIAL STATEMENT**

**31 March 2024**

The Worldwide Hospice Palliative Care Alliance Company Limited by Guarantee

Registered in England and Wales No 6735120

Registered Charity No 1127569

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### TRUSTEES ANNUAL REPORT

#### 1. ADMINISTRATIVE DETAILS

##### **Registered name**

The Worldwide Hospice Palliative Care Alliance  
Any other working name (or abbreviation): WHPCA

##### **Charity and Company Registration**

Registered charity: 1127569  
Company limited by guarantee in England and Wales: 6735120

##### **Principal and Registered Office**

Hospice House  
34-44 Britannia Street  
London  
WC1X 9JG

##### **Independent Examiner**

Shaun Jordan  
Price Bailey LLP  
3<sup>rd</sup> Floor  
24 Old Bond St  
Mayfair  
London  
W1S 4AP

##### **Banker**

Coutts and Co.  
440 Strand  
London  
WC2 0QS

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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### Trustees (During Fiscal Year)

|                      |                                                                                                                                             |
|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| Dr Julie Ling        | Chief Executive Officer, European Association for Palliative Care<br><u>Appointed:</u> December 2014 (Chair from June 2018)                 |
| Dr Julia Downing     | Chief Executive Officer, International Children's Palliative Care Network<br><u>Appointed:</u> October 2017 Unlimited Term                  |
| Dr Emmanuel Luyirika | Executive Director, African Palliative Care Association<br><u>Appointed:</u> November 2012 Unlimited Term                                   |
| Dr Ednin Hamzah      | Chair, Asia Pacific Hospice Palliative Care Network_<br><u>Appointed:</u> November 2013 <u>Re-appointed:</u> August 2017 Unlimited Term     |
| Mr. Toby Porter      | CEO, Hospice UK<br><u>Appointed:</u> June 2023                                                                                              |
| Dr Agnes Csikos      | Pecs-Baranya Hospice Foundation, Hungary<br><u>Appointed:</u> October 2017 <u>Re-appointed</u> Mar 2021                                     |
| Dr Richard Harding   | Kings College, Cicely Saunders Institute<br><u>Appointed:</u> October 2016 <u>Re-appointed</u> Mar 2020                                     |
| Dr Frank Brennen     | Physician<br><u>Appointed:</u> October 2017 <u>Re-appointed</u> Dec 2020                                                                    |
| Dr James Cleary      | Director and Walther Senior Chair of Supportive Oncology, Indiana University<br><u>Appointed:</u> October 2017 <u>Re-appointed</u> Dec 2020 |
| Ms. Maria Marroquin  | Administrator, Latin American Palliative Care Assoc.<br><u>Appointed:</u> August 2020 Unlimited Term                                        |

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|                       |                                                                                                                                             |
|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| Ms Laurel Gillespie   | Executive Director, Canadian Hospice Palliative Care Association <u>Appointed</u> : May 2022                                                |
| Dr Stephen Watiti     | Trustee with Lived Experience Palliative Care <u>Appointed</u> : December 2018 Reappointed November 2022                                    |
| Dr Savita Butola      | Secretary, Indian Association of Palliative Care <u>Appointed</u> : June 2020 Unlimited Term                                                |
| Prof Yoshiyuki Kizawa | President, Japanese Society for Palliative Medicine <u>Appointed</u> : September 2020                                                       |
| Prof Meera Agar       | Chair, Palliative Care Australia <u>Appointed</u> : September 2020                                                                          |
| Dr Babe Gaolebale     | Botswana Ministry of Health <u>Appointed</u> : May 2020                                                                                     |
| Dr Sami Alsafari      | Professor, Kasr Al-Ainy School of Medicine, Cairo University. <u>Appointed</u> : May 2022                                                   |
| Dr Douglas Crispim    | Brazilian National Academy of Palliative Care <u>Appointed</u> : December 2022                                                              |
| Dr Helena Davies      | Trustee with Lived Experience Palliative Care Appointed November 2018 (on-leave December 2022)                                              |
| Mr. Craig Duncan, FCA | COO, Hospice UK<br>Appointed: October 2016 Re-appointed Aug 2020, Resigned September 2023                                                   |
| Mr. Edo Banach, JD    | CEO and President, National Hospice and Palliative Care Organisation Appointed: October 2017 Re-appointed Aug 2021, Resigned September 2023 |
| Dr Nisla Camano Reyes | President, Panamanian Association of Palliative Care <u>Appointed</u> : November 2018, Resigned September 2023                              |

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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### 2. STRUCTURE, GOVERNANCE AND MANAGEMENT

#### **Nature of Governing Document**

The Worldwide Hospice Palliative Care Alliance is a charitable company limited by guarantee constituted on 28 October 2008 and governed by articles and memorandum of association which were last amended on 25 July 2017. The trustees are also directors of the charity for the purposes of the Companies Act.

#### **How the Charity is Constituted**

The charity is an international non-governmental organization with trustees from each region of the world. There are currently 400 organizational members of the WHPCA from 103 countries. WHPCA members are not currently required to pay dues. The only voting members are the trustees.

#### **The Board of Trustees**

Trustees are elected and appointed according to the byelaws, which identify the number of trustees from each world region. Qualified candidates for election to the Board are identified with our regional members and are elected by current trustees.

Most trustees retire from office after four years. Retiring trustees can be reappointed but a trustee who has served for two consecutive terms must take a break from office and may not be reappointed for one year. Trustees that represent named organizations in the byelaws can serve unlimited terms.

The trustees delegate day-to-day management of the charity to the Executive Director, Dr Stephen Connor.

The trustees set the remuneration of key management personnel based on market rates within the sector.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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### 3. PUBLIC BENEFIT

We have referred to Charity Commission's general guidance on public benefit when reviewing our aims and objectives and in planning our future activities. In particular, the trustees consider how planned activities will contribute to the aims and objectives they have set. Our achievements and performance in section 5 show how we have met the public benefit requirements.

The Worldwide Hospice Palliative Care Alliance (WHPCA) is an international nongovernmental organisation (INGO) focusing exclusively on hospice and palliative care development worldwide. Its members are national and regional hospice and palliative care organisations and affiliate organisations supporting hospice and palliative care and supporters of hospice and palliative care worldwide.

Our vision is a world with universal access to hospice and palliative care. Our mission is "to bring together the global palliative care community to improve well-being and reduce unnecessary suffering for those in need of palliative care in collaboration with the regional and national hospice and palliative care organisations and other partners."

Hospice and palliative care services relieves the pain and suffering of patients with life-limiting illness, supporting them and those around them physically, emotionally, and spiritually. Care for patients can be in a variety of settings including their own home, at the hospice, in a hospital or in the community and can be for days, months or years.

We are here to support national hospice and palliative care organisations in promoting and developing hospice and palliative care in their countries. In the following sections, we aim to give you a snapshot of the key activities we have undertaken this year to meet our charitable objectives. This review demonstrates how our work is carried out for public benefit and how we have supported our members and others to provide and develop palliative care.

### 4. OBJECTIVES AND ACTIVITIES

The objectives of the charity are:

- to facilitate and promote the relief, care and treatment of the sick, especially the chronically and incurably ill and the dying, and the support and care of their families and carers and of the bereaved, in particular by:

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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- improving access to, and the quality of, palliative care, worldwide and improving the efficiency and efficacy of institutions concerned with the charitable provision of palliative care; and
- providing or facilitating education and training in palliative care and increasing awareness and understanding among the general public of the values, principles and practice of hospice and palliative care.

The main activities undertaken in relation to those purposes (from 1 April 2023 to 31 March 2024) are set out in section 5 below.

### 5. ACHIEVEMENTS AND PERFORMANCE

- **Secretariat and Governance**

This year, there were no face-to-face board meetings. However, the board did meet by teleconference four times during the year.

The executive committee held teleconference meetings between board calls.

Our first executive director, Dr Stephen Connor, was originally appointed in January 2016, and continues to lead the organization to present.

- **Risk Management**

The trustees, together with the executive director and staff, identify risks to which the Worldwide Hospice Palliative Care Alliance is exposed and ensure that appropriate controls and systems are in place to monitor and manage those risks. A risk register is maintained and is reviewed by staff monthly, by the executive committee quarterly, and by the full board annually. Current risks include securing income, dealing with potential economic downturn, ensuring compliance with UK General Data Protections Rules, ensuring our partner organizations are compliant with all safeguarding and grant funding rules and procedures, and ensuring on-line donations and grants are accurately accounted for.

- **Communications**

WHPCA publishes on the international edition of ehospice (a separate charity) which supported WHPCA programmes and advocacy activity by reporting on WHPCA programmes and efforts to achieve Universal Health Coverage and palliative care services for those who need it as part of the WHO General Programme of Work, access to medications, rights of older persons, and advocacy at the World Health Organization Executive Board Meeting and World Health Assembly. ehospice international published 69 (April 23' – March 24') articles with stories from around the world during this fiscal year. The categories were represented as follows:

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|                      |    |
|----------------------|----|
| International*       |    |
| Research             | 4  |
| Policy               | 14 |
| In The Media         | 2  |
| Fundraising          | 3  |
| Education            | 8  |
| Community Engagement | 16 |
| Uncategorized        |    |
| Highlight            | 32 |
| Care                 | 13 |
| Leadership           | 8  |
| Opinion              | 11 |
|                      |    |
| Total Articles       | 69 |

\* Note: Some articles fit more than one category

The International edition of ehospice reported 40,485 sessions, 37,065 new users and 45,249 page views over the reporting period. The WHPCA has

continued to build up its communications tools including:

- Our monthly e-newsletter which is circulated to over 453 (2023: 395) member recipients and 3,202 (2023: 3,177) newsletter subscriber recipients equals a total of 3,599 (2023: 3,572) in over 120 countries with an increase from the previous year.
- We have been managing and updating our WHPCA website with regular news updates relating to hospice and palliative care worldwide. There were 36,311 (2023: 59,000) sessions and 84,751 (2023: 129,301) page views, 24,677 (2023: 45,000) users on the WHPCA website during the reporting period.
- We have increased our engagement on social media mechanisms, including Facebook, and Twitter. We currently, as of 9<sup>th</sup> July 2024 have 6,205 (2023: 6,004) followers on Facebook. WHPCA also has 8,001 (2023: 7,866) followers on Twitter/X. Our LinkedIn page has 975 (2023: 675) followers and our Instagram account where we have 783 (2023: 625) followers.
- World Hospice and Palliative Care Day theme for 2023 was Compassionate Communities: Together for Palliative Care, and World Hospice and Palliative Care Day 2023 was on 14 October. Everyone deserves the best care possible regardless of who they are or where they live in the world. Palliative care is yet to be fully integrated into the healthcare system of most countries especially the low and middle-income countries. Materials were produced and

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utilised around the world and 233 events were registered on the website from 76 different countries. This was the most successful year based on number of countries and events.

- WHPCA Communications continued to provide support to the Executive Director, Advocacy and, Compassionate Korail project in Bangladesh by working with the WHPCA Programmes Manager to advise on communications aspects of the project.

### **We influence policy at the highest levels Advocacy**

This year we continued to focus our advocacy around integrating palliative care as part of health system strengthening and Universal Health Coverage reforms. We continued to work together with palliative care advocates and palliative care allies worldwide to achieve our aims for palliative care for all as part of UHC, with a particular focus on enabling the voice of people with lived experience of palliative care to be heard. We continue to work with WHO, as a non-state actor in official relations, the United Nations as an NGO with Consultative Status, and to develop strong, collaborative links with other non-state actor partnerships to deliver our objectives.

### **Our key activities through the year include:**

- We contributed to high level events ensuring the voice of palliative care, and more specifically, people with palliative care needs was heard. This included the May 2023 World Health Assembly including the civil society pre-consultation, the UN General Assembly Special Sessions on UHC, TB, and the COVID Pandemic, and the January 2024 WHO Executive Board meeting. Our executive director also spoke at the Presidential Plenary of the International Gynecological Cancer Society conference in Seoul Korea in November 2023 as well as the regional meeting of IGCS in Kazakhstan in April of 2023, the International Work Group on Death, Dying, and Bereavement in October 2023, the University of Hong Kong in and the University of Porto Portugal in July of 2023.
- We have worked to support the implementation of the WHO Palliative Care Action Plan through active engagement on the WHO palliative care working group and with partners, including:
  - Bi-annual meetings with the WHO Internal Palliative Care Working Group
  - (PCWG) Executive Director heads one of the subgroups of the PCWGMembership in and support of:
  - The WHO HIV Quality of Care Working Group
  - The WHO Noncommunicable Disease and Mental Health Dept
  - The WHO Global TB Programme
  - The WHO Global Network for Long Term Care
  - The WHO Cervical Cancer Elimination program
  - The WHO Childhood Cancer Initiative
  - The WHO Civil Society Working Group on NCD's and Pandemic Preparedness
- Our project in Kenya to support the integration of palliative care into the national health systems' Universal Health Coverage program, with funding from True Colours Trust, was

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resumed after COVID. We are implementing the project now and our partner the Kenyan Hospice Palliative Care Association has made great strides. They have approval to add palliative care to the National Social Health Insurance Fund and the Ministry of Health has reorganized their divisions to include one for palliative and geriatric care. The project is continuing with a no cost extension into the next fiscal year.

- We continued to disseminate our report titled: *Advocacy Guide: Palliative Care and Universal Health Coverage* to help our members to better advocate for UHC in their countries
- We also were involved in published the following articles during the fiscal year:
  1. Keiichi Fujiwara, Stephen R. **Connor**, Noriko Fujiwara, Raimundo Correa, Anisa Mburu, Debbie Leopold, Mary Eiken, Michael L. Pearl. The International Gynecologic Oncology consensus statement on palliative care. (2024) *J Gynecol Cancer* 2024;0:1–5. doi:10.1136/ijgc-2024-005729
  2. Reid E, Abathun E, Zerihun M, Lorenz K, **Connor** S, Hauser J, Ayres N, Harding R, Gebre N. (2024) It takes a village: bringing palliative care to Ethiopia. *J Pall Care*.
  3. Knaul F, Bhadelia A, Kwete XJ, Rosa W, Méndez-Carniado O, Enciso VV, Calderon-Anyosa R, **Connor** S, ..... Radbruch L. The evolution of serious health-related suffering from 1990 to 2019: an update to the Lancet Commission on Global Access to Palliative Care and Pain Relief. *The Lancet* (Pre-print).
  4. Xiaoxiao J Kwete, Afsan Bhadelia, Hector Arreola-Ornelas, Oscar Mendez, William E. Rosa, Stephen **Connor**, Julia Downing, Dean Jamison, David Watkins, Renzo Calderon, Jim Cleary, Joe Friedman, Liliana De Lima, Christian Ntizimira, Tania Pastrana, Pedro E. P´erez-Cruz, Dingle Spence, M.R. Rajagopal, Valentina Vargas Enciso , Eric L. Krakauer, Lukas Radbruch , Felicia Marie Knaul , Global Assessment of Palliative Care Need: Serious Health-Related Suffering Measurement Methodology, *Journal of Pain and Symptom Management* (2024), doi: <https://doi.org/10.1016/j.jpainsymman.2024.03.027>
  5. Lichtenthal W, Breen LJ, Roberts KE, **Connor** S, Aoun SA, Rosa B. Investing in Bereavement Care as a Public Health Priority A Transitional Care Model. *Lancet Public Health*. Published **Online** March 13, 2024 [https://doi.org/10.1016/S2468-2667\(24\)00030-6](https://doi.org/10.1016/S2468-2667(24)00030-6)
  6. Rosa W, **Connor** S, Downing J, Marston J, Radbruch L. Palliative Medicine Access in Armed Conflict: A Basic Right and Urgent Need. *The Lancet*. 2023 Dec 16;402(10419):2291-2292. doi: 10.1016/S0140-6736(23)02638-7. Epub 2023 Nov 29.
  7. Mueller H, Inge B. Corless I,...**Connor** S. Supporting the Bereaved in the COVID-19 Era: A Scoping Review of Interventions. *OMEGA—Journal of Death and Dying* 2023, Vol. 0(0) 1–2. DOI: 10.1177/00302228231215478.
  8. Rosa, W.E., **Connor**, S., Ferrell, B.R., Fulmer, T., Travers, J.T., & Radbruch, L. (2023). Palliation for the frail older adult and what meaningful longevity could be. *The Lancet Healthy Longevity*, 4(10), E528-E530
  9. [Islam Salikhanov](#), [Stephen R. Connor](#), Gulnara Kunirova, Fatima Khashagulova, Nazarova Gulzhaina, Byron L. Crape and Maria C. Katapodi. (2023). Challenges for developing palliative care services in resource limited settings of Kazakhstan. *Public*

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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Health Rev doi: 10.3389/phrs.2023.1605672.

10. Mostofa Kamal Chowdhury, Shafiquejjaman Saikot, Nadia Farheen, Nezamuddin Ahmad, Sarwar Alam, **Stephen R Connor** (2023) Impact of Community Palliative Care on Quality of Life among Cancer Patients in Bangladesh. *Int. J. Environ. Res. Public Health* 2023, 20(15):6443
11. Pettus K, **Connor S**, Downing J, Marston J. 2023. Editorial: Pandemic treaty should include provision for palliative care. *Bull World Health Organ* 2023;101:363–363A doi: <http://dx.doi.org/10.2471/BLT.23.289957>
12. **Connor, S.** (2023). Global Aspects of Palliative Care. In R. Macleod & L. Van den Block (Eds). *Textbook of Palliative Care*, 2<sup>nd</sup> Ed. Springer Nature.

### **We are building a diverse and strong movement demanding care for all**

Our membership of the UK working group (UKWG) on NCDs enables us to contribute to work being undertaken by the NCDA where appropriate and importantly keeps us up to date with projects being undertaken by the other members of the UKWG and to learn from these. Membership allows WHPCA to keep up to date with advocacy initiatives from other organisations and provides information about activities at meetings such as WHA EB and UN HLM

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To ensure involvement of our members we conducted a members' survey to establish how we can best serve our members. This survey included questions on which areas should be prioritized by the WHPCA in its work going forward. Advocacy was identified as a high priority both advocacy by the WHPCA at high level meetings and nationally. Helping countries ensure that palliative care was included in UHC was identified as the highest priority and is in keeping with the guide on advocacy for palliative care and UHC that we produced.

We also conducted a survey of members to identify work being done on identification and partnership with people with lived experience of palliative care. This is building on work we have done to identify PWLE who are willing to contribute to research projects providing a lived experience perspective from the beginning of a research project through all stages including dissemination of results and paper writing. The purpose of the survey is to identify a cohort of PWLE who can participate in a consultation to determine priorities for PWLE for work by the WHPCA and to identify additional PWLE who are willing to participate in research.

We have continued to focus our work on targeted equity issues in palliative care integrating it across our advocacy, communications and programming including relating to gender and people with disabilities.

We have established communication with HI (Federation Handicap International - Humanity & Inclusion) to discuss the links between palliative care and rehabilitation and how we might potentially work together. Rehabilitation and PC are both essential health services for UHC with considerable overlap and the profile of rehabilitation has recently increased. Moving forward we anticipate working closely with organisations that promote rehabilitation and there is potential for cost and workforce efficiencies as a result of such collaboration in practice.

We have had productive conversations with HelpAge and established a 3 monthly meeting schedule to discuss areas of common concern given the importance of palliative care in the ageing population. In addition, our goals for advocacy are very well aligned with theirs.

We have continued our support of palliative care in humanitarian crisis by continuing a fundraising platform for those affected by the crisis in Ukraine and working collaboratively with others to improve access to palliative care.

- Our WHO/WHPCA *Global Atlas of Palliative Care at the End of Life* (2014) has now been downloaded over 160,000 times. A new 2<sup>nd</sup> edition of the *Global Atlas* with WHO was launched in October 2020 and has so far been downloaded over 90,000 times. <http://www.thewhpc.org/resources/global-atlas-on-end-of-life-care>

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### Organisational Development and Programme Support

Building an integrated age-attuned model of supportive palliative care in Bangladesh is our project being delivered by partners AYAT, BSMMU, St. Christophers and WHPCA. Now in its third year, the project is opening up access to supportive palliative care by integrating government and community health services in the Bandar Upazila Health Complex in Narayanganj, Bangladesh. The project has already provided palliative care to over 200 patients through a combination of home-based care and outpatient services. The target is 950 by end of year 3. The project has also trained just under 100 health care workers (doctors, nurses and community health workers) and over 30 community volunteers in supportive palliative care and reached over 1,200 community members with palliative care sensitisation sessions. At the national level, the project continues to advocate for and provides technical support to the development of a national policy framework and budget allocation for palliative care, as well as the inclusion of palliative care in Universal Health Coverage.

With funding from True Colours Trust our project in **Kenya** to support the integration of palliative care into the national health systems' Universal Health Coverage program was disrupted due to COVID but has now restarted. We are implementing the project now and our partner the Kenyan Hospice Palliative Care Association has made great strides. A new project began in February of 2024 to train 70 health care workers in five Lake Region hospitals to teach palliative care to five of their co-workers and to see that each trainee sees and reports on five palliative care patients. This Hi-Five model project is funded by the Tropical Health and Education Fund (THET).

WHPCA has been providing technical support to the government of **Greece** in developing a national strategy for development and implementation of palliative care. This year the project has restarted, and both the Executive Director and Board chair were appointed to be experts for the ministry of health's new palliative care committee that will oversee submission of a national strategy for palliative care for the country.

WHPCA and other partner organizations have been providing in-kind technical support to the Hospice and Palliative Professionals Association in the Russian Federation including on-line teaching, case conferences, and professional development throughout the year in **Eurasia**. The war in Ukraine has limited what can be done going forward but we continue to support palliative care professionals throughout the Eurasia region with our partner organization, the American Eurasia Cancer Alliance. Another quarterly case conference is being planned

WHPCA has been working with the Palliative Care Association in Kazakhstan to expand palliative care in the country by helping with policy and program development.

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WHPCA has been advising the country of Indonesia on integration of palliative care into their primary care system.

WHPCA is assisting the Qatar Foundation to help prepare a special report on palliative care to be presented at the World Innovation Summit on Health (WISH) later in 2024.

The WHPCA Palliative Care Toolkit and training manual continues to be a useful resource for those developing palliative care in limited resource settings at <http://www.thewpca.org/resources/memberresources/national-palliative-care-strategies/>. An updated version of the toolkit is now available. The toolkit & training manuals have been downloaded over 70,600 times since initial publication in 2014.

The WHPCA continues to be focused on support of hospice and palliative care development in low and middle-income countries. We received funding for the above programme to support palliative care delivery in Bangladesh, have developed strong indigenous palliative care models with local members and are working on funding for further programmes. Our co-edited book *Building Integrated Palliative Care Programs and Services* (2017) that is free to download at: <http://www.thewhpca.org/resources/building-integrated-palliative-care-programs-and-services> with over 12,500 downloads since publication.

### 6. FINANCIAL REVIEW

Income for the financial year was £206,444 (22/23: £193,932), including grants from an Anonymous donor, and Global Giving Foundation. We are extremely grateful to them for their support. Expenditure for the year totaled £201,262 (2022/23 £257,374).

During the year WHPCA recorded a surplus of £5,182 (2022/23 deficit £63,442).

The unrestricted general funds expenditure was £ 48,428 (2022/23: £47,725) that brings total unrestricted funds to £19,606 (2022/23: £24,481).

Total funds carried forward at the end of the fiscal year were £145,816 (2022/23: £140,634).

### 7. RESERVES

The charity holds limited free reserves at the end of the year. The trustees aim to hold reserves of at least £50,000, based on an analysis of our expenditure commitments, charitable need and the security of our income streams. As the current free reserves are £19,606 (2023: £24,481) the trustees believe this level of reserves is inadequate, but we remain a going concern for the next twelve months.

### 8. PLANS FOR FUTURE PERIODS

The WHPCA will continue to work toward achieving its mission through the implementation of our new three-year strategic plan (2022-25). Currently the five strategic areas of focus are:

1. **INFLUENCING CHANGE:** We will reduce suffering by including palliative care in universal health coverage basic packages of care in low-and-middle income countries

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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2. **TRACKING PROGRESS:** We will ensure that palliative care progress is tracked and monitored by policy makers using standardized, tested, and reliable national and international indicators.
3. **BUILDING A MOVEMENT:** We will work to build a movement of people with palliative care needs (PWPCN), carers, civil society, government, and academia to improve understanding and demand for palliative as part of Universal Health Coverage
4. **BUILDING MODELS OF Palliative Care (PC):** We will work with our members and partners to continue to build models of indigenous PC in low and middle-income countries to serve as 'beacons' of PC provision with funding and technical assistance to increase access to essential palliative care as part of Universal Health Coverage
5. **GROWING A GLOBAL ALLIANCE:** We will grow a strong regional and national and international member driven global alliance working collaboratively in meaningful partnership with others.

## STATEMENT OF TRUSTEES' RESPONSIBILITIES

The trustees (who are also directors of Worldwide Hospice Palliative Care Alliance for the purposes of company law) are responsible for preparing the Report of the Trustees 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 which give a true and fair view of the state of affairs of the charitable company and its subsidiaries and of the incoming resources and application of resources, including the income and expenditure, of the charitable company and its subsidiaries for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently
- observe the methods and principles in the Charities Statement of Recommended

Practice 2019 (FRS102)

- make judgements and estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards have been followed, subject to

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

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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 business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and its subsidiaries 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.

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

The Report of the Trustees has been prepared in accordance with the special provisions applicable to companies' subject to small companies' regime.

### **Independent examiner**

Price Bailey LLP was re-appointed as the charity's independent examiner for this fiscal year.

Approved by the trustees on 12 September 2024 and signed on their behalf by



Dr James Cleary

Chair, WHPCA

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

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### The Worldwide Hospice Palliative Care Alliance

#### Statement of Financial Activities (Incorporating an income and expenditure account)

For the year ended 31 March 2024

|                                                       |           |                      |                       | 2024                  | 2023            |
|-------------------------------------------------------|-----------|----------------------|-----------------------|-----------------------|-----------------|
|                                                       | Note      | Unrestricted<br>£    | Restricted<br>£       | Total<br>£            | Total<br>£      |
| <b>Income</b>                                         |           |                      |                       |                       |                 |
| Donations and legacies                                | <b>2a</b> | 43,553               | 162,891               | <b>206,444</b>        | 193,932         |
| <b>Total income</b>                                   |           | <u>43,553</u>        | <u>162,891</u>        | <b>206,444</b>        | <u>193,932</u>  |
| <b>Expenditure</b>                                    |           |                      |                       |                       |                 |
| Charitable activities                                 | <b>3</b>  | 48,428               | 152,834               | <b>201,262</b>        | 257,374         |
| <b>Total Expenditure</b>                              |           | <u>48,428</u>        | <u>152,834</u>        | <u>201,262</u>        | <u>257,374</u>  |
| <b>Net(expenditure) / income<br/>before transfers</b> |           | <b>(4,875)</b>       | <b>10,057</b>         | <b>5,182</b>          | <b>(63,442)</b> |
| Transfers between funds                               |           | -                    | -                     | -                     | -               |
| <b>Net (expenditure) / income<br/>after transfers</b> |           | <b>(4,875)</b>       | <b>10,057</b>         | <b>5,182</b>          | <b>(63,442)</b> |
| <b>Reconciliation of funds</b>                        |           |                      |                       |                       |                 |
| Total funds brought forward                           |           | <u>24,481</u>        | <u>116,153</u>        | <b>140,634</b>        | <u>204,077</u>  |
| <b>Total funds carried forward</b>                    | <b>12</b> | <u><b>19,606</b></u> | <u><b>126,210</b></u> | <u><b>145,816</b></u> | <u>140,635</u>  |

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### The Worldwide Hospice Palliative Care Alliance

#### Balance sheet

**As at the 31 March 2024**

|                                      | Note | 2024<br>£             | 2023<br>£             |
|--------------------------------------|------|-----------------------|-----------------------|
| <b>Current assets</b>                |      |                       |                       |
| Cash at bank and in hand             |      | 57,926                | 19,132                |
| Debtors                              | 8    | <u>126,731</u>        | <u>126,694</u>        |
|                                      |      | <b>184,657</b>        | 145,826               |
| <b>Liabilities</b>                   |      |                       |                       |
| Creditors: amounts due within 1 year | 9    | <u>(38,841)</u>       | <u>(5,192)</u>        |
| <b>Net current assets</b>            |      | <b>145,816</b>        | 140,634               |
| <b>Net assets</b>                    |      | <u><b>145,816</b></u> | <u>140,634</u>        |
| <b>Funds</b>                         |      |                       |                       |
| Restricted funds                     |      | 126,210               | 116,153               |
| Unrestricted funds                   |      | 19,606                | 24,481                |
| <b>Total charity funds</b>           | 10   | <u><b>145,816</b></u> | <u><b>140,634</b></u> |

The notes on pages 19 to 28 form part of these financial statements.

For the year ending 31 March 2024, the company was entitled to exemption from audit under section 477 of the Companies Act 2006

Directors' responsibilities:

- the members have not required the company to obtain an audit of its account for the year in question in accordance with section 476;
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the

Approved by the trustees on 12 September 2024 and signed on their behalf by



Dr James Cleary  
Chair

**Company number: 6735120**

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### Notes to the financial statements

**For the year ended 31 March 2024**

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#### **1. Accounting policies**

##### **a) Basis of preparation**

The financial statements 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), and the Companies Act 2006. The functional currency is pounds sterling.

The charity 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 notes.

##### **b) Company status**

The charity is a company limited by guarantee. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member (18) of the charity.

##### **c) 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 other purposes.

Restricted funds are to be used for specific purposes as laid down by the donor.

##### **d) Income**

Voluntary income including donations, gifts and grants that provide core funding or are of general nature are recognised where there is entitlement, probability of receipt and the amount can be measured with sufficient reliability.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### 1. Accounting policies (continued)

#### e) Expenditure

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

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly allocated to either charitable or governance costs, they have been apportioned based on an estimate of the time devoted to the respective areas.

#### f) Going Concern

The financial statements have been prepared on a going concern basis as the trustees believe that no material uncertainties exist. The trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements. The budgeted income and expenditure is sufficient with the level of reserves for the charity to be able to continue as a going concern, and income received up to the date of signing these accounts suggests the budget will be met.

#### g) Debtors

Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid net of any trade discounts due. Accrued income and tax recoverable is included at the best estimate of the amounts receivable at the balance sheet date.

#### h) Creditors

Creditors are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors are normally recognised at their settlement amount.

#### i) Cash at bank and in hand

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### **1. Accounting policies (continued)**

#### **j) Pension**

The company operate a defined contribution plan for the benefit of its employees. Contributions are expensed as they become payable.

#### **k) Financial instruments**

The charity only has financial assets and liabilities that qualify as basic financial instruments, which are all measured at cost.

#### **l) Significant estimates and judgements**

No significant judgements, accounting policies or assumptions have been made by management in applying the charity's accounting policies.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### Notes to the financial statements

For the year ended 31 March 2024

## 2. Income

### a) Donations and Legacies

|                                                |                      |                       | 2024                  |                      |                       | 2023                  |
|------------------------------------------------|----------------------|-----------------------|-----------------------|----------------------|-----------------------|-----------------------|
|                                                | Unrestricted         | Restricted            | Total                 | Unrestricted         | Restricted            | Total                 |
|                                                | £                    | £                     | £                     | £                    | £                     | £                     |
| <b>Grants from foundations and trusts</b>      |                      |                       |                       |                      |                       |                       |
| Grant from Anonymous Foundation                |                      | 118,947               | <b>118,947</b>        | <b>6,500</b>         | 118,551               | <b>125,051</b>        |
| Grant from Global Giving Foundation            | 335                  | 1,512                 | <b>1,847</b>          | 4,590                | 42,892                | <b>47,481</b>         |
| Grant from Tropical Health and Education Trust | -                    | 42,432                | <b>42,432</b>         | -                    | -                     | -                     |
| Grant from OAK Trust                           | -                    | -                     | -                     | -                    | 500                   | 500                   |
|                                                | <u>335</u>           | <u>162,891</u>        | <u><b>163,226</b></u> | <u>11,090</u>        | <u>161,943</u>        | <u><b>173,032</b></u> |
|                                                |                      |                       | -                     |                      |                       | -                     |
| Income from related parties                    | 13                   | 42,571                | -                     | 42,571               | 38,059                | <b>38,059</b>         |
| Exchange gains/(losses)                        |                      | (2,083)               | -                     | (2,083)              | (18,996)              | <b>(18,996)</b>       |
| Individual donations                           |                      | 2,730                 | -                     | 2,730                | 1,836                 | <b>1,836</b>          |
| <b>Total</b>                                   | <u><b>43,553</b></u> | <u><b>162,891</b></u> | <u><b>206,444</b></u> | <u><b>31,989</b></u> | <u><b>161,943</b></u> | <u><b>193,932</b></u> |

## 3. Expenditure

|                                 |                       |                      | 2024                  |                       |                      | 2023                  |
|---------------------------------|-----------------------|----------------------|-----------------------|-----------------------|----------------------|-----------------------|
|                                 | Direct Costs          | Support Costs        | Total                 | Direct Costs          | Support Costs        | Total                 |
|                                 | £                     | £                    | £                     | £                     | £                    | £                     |
| <b>Charitable Activities</b>    |                       |                      |                       |                       |                      |                       |
| General Capacity Building       | 48,428                | -                    | <b>48,428</b>         | 74,152                | 5,362                | <b>79,514</b>         |
| Bangladesh Project (GDS Giving) | 116,549               | 16,184               | <b>132,733</b>        | 108,922               | 11,327               | <b>120,249</b>        |
| Ukraine                         | 2,758                 | 264                  | <b>3,022</b>          | 35,962                | 4,289                | <b>40,251</b>         |
| Kenya                           | 16,413                | 666                  | <b>17,079</b>         | -                     | -                    | -                     |
| True Colours Trust              | -                     | -                    | -                     | 15,500                | 1,860                | <b>17,360</b>         |
| <b>Total Expenditure</b>        | <u><b>184,148</b></u> | <u><b>17,114</b></u> | <u><b>201,262</b></u> | <u><b>234,536</b></u> | <u><b>22,838</b></u> | <u><b>257,374</b></u> |

### 3. Expenditure (continued)

#### b) Analysis of Support Costs

|                                     | 2024                 | 2023                 |
|-------------------------------------|----------------------|----------------------|
|                                     | £                    | £                    |
| <b>Governance</b>                   |                      |                      |
| Tax and Independent Examination     | <u>2,160</u>         | <u>1,440</u>         |
|                                     | <b>2,160</b>         | <b>1,440</b>         |
| <b>Other Support Costs</b>          |                      |                      |
| Travel, accommodation & subsistence | -                    | <b>277</b>           |
| Accountancy and HR                  | <b>3,450</b>         | <b>9,662</b>         |
| Miscellaneous                       | <b>8,501</b>         | <b>4,715</b>         |
| Communications Costs                | <b>1,322</b>         | <b>3,821</b>         |
| Depreciation                        | -                    | <b>225</b>           |
| Website                             | <b>1,681</b>         | <b>2,698</b>         |
| <b>Total Support Costs</b>          | <u><b>17,114</b></u> | <u><b>22,838</b></u> |

Support costs have been allocated based on an estimate of time spent.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### Notes to the financial statements

#### For the year ended 31 March 2024

#### 4. Net income/(expenditure) for the year

|                                            |              |               |
|--------------------------------------------|--------------|---------------|
| This is stated after charging / crediting: | <b>2024</b>  | 2023          |
|                                            | £            | £             |
| Net losses on foreign exchange             | <b>2,083</b> | <b>18,996</b> |
| Independent Examiners fees                 | <b>2,160</b> | <b>1,140</b>  |

#### 5. Wages and Salaries

|                    |               |        |
|--------------------|---------------|--------|
|                    | <b>2024</b>   | 2023   |
|                    | £             | £      |
| Salaries           | <b>57,034</b> | 71,419 |
| National Insurance | -             | 80     |
| Pension            | <b>1,440</b>  | 1,551  |
|                    | <b>58,474</b> | 73,050 |

No employee earned more than £60,000 in the current or prior year.

The key management personnel for the year comprise the trustees. The charity's trustees were not paid and did not receive any benefits from employment with WHPCA in the year (2023: £nil). They were reimbursed expenses during the year as stated in note 13.

#### b) Staff numbers

The average monthly head count was 3 (2023: 4)

|                                            |             |          |
|--------------------------------------------|-------------|----------|
|                                            | <b>2024</b> | 2023     |
| At 31 March, the head-count was as follows | <b>No</b>   | No       |
| Raising funds                              | -           | -        |
| Charitable activities                      | <b>3</b>    | <b>4</b> |
| Total                                      | <b>3</b>    | 4        |

#### 6. Pension

WHPCA contributes towards defined contribution pension plans for employees. Pension costs are recognised when they fall due.

The costs of the defined contribution scheme are included with the associated staff costs and allocated therefore to raising funds and charitable activities. £181 (2023 - £217) was owing to the pension scheme at the year end.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### Notes to the financial statements For the year ended 31 March 2024

#### 7. Taxation

WHPCA is exempt from corporation tax as all its income is applied for charitable purposes.

| 8. Debtors                  | 2024           | 2023           |
|-----------------------------|----------------|----------------|
|                             | £              | £              |
| Other debtors               | 807            | 119,060        |
| Amounts due from Hospice UK | 125,924        | 7,634          |
|                             | <u>126,731</u> | <u>126,694</u> |

| 9. Creditors: Amounts falling due in less than one year | 2024          | 2023         |
|---------------------------------------------------------|---------------|--------------|
|                                                         | £             | £            |
| Trade creditors and other creditors                     | 37,841        | 1,531        |
| Accruals & Deferred Income                              | 1,000         | 3,660        |
|                                                         | <u>38,841</u> | <u>6,601</u> |

#### 10. Analysis of net assets between funds

|                    | Unrestricted  | Restricted     | 2024<br>Total  |
|--------------------|---------------|----------------|----------------|
|                    | £             | £              | £              |
| Net current assets | 19,606        | 126,210        | 19,606         |
|                    | <u>19,606</u> | <u>126,210</u> | <u>145,816</u> |

|                    | Unrestricted  | Restricted     | 2023<br>Total  |
|--------------------|---------------|----------------|----------------|
|                    | £             | £              | £              |
| Net current assets | 24,481        | 116,153        | 140,634        |
|                    | <u>24,481</u> | <u>116,153</u> | <u>140,634</u> |

#### 11. Tangible Fixed Assets

|                                              | IT equipment |
|----------------------------------------------|--------------|
|                                              | £            |
| Cost at the start of the year                | 2,658        |
| Disposals                                    | (2,658)      |
| <b>At the end of the year</b>                | <u>-</u>     |
| Depreciation at the start of the year        | 2,658        |
| Charge for the year                          | -            |
| Disposals in year                            | (2,658)      |
| <b>At the end of the year</b>                | <u>-</u>     |
| <b>Net book value at the end of the year</b> | <u>-</u>     |
| Net book value at the start of the year      | <u>-</u>     |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### Notes to the financial statements

**For the year ended 31 March 2024**

#### 12. Analysis of funds

An analysis of restricted funds is shown below

|                               | 1 April<br>2023 | Income         | Expenditure      | Transfers | 31 March<br>2024 |
|-------------------------------|-----------------|----------------|------------------|-----------|------------------|
|                               | £               | £              | £                | £         | £                |
| <b>Restricted funds</b>       |                 |                |                  |           |                  |
| Ethiopia                      | 500             | -              | -                | -         | 500              |
| Kenya                         | -               | 42,432         | (17,080)         | -         | 25,352           |
| Ukraine                       | 2,640           | 1,512          | (3,022)          | -         | 1,130            |
| Bangladesh Project            | 113,013         | 118,947        | (132,732)        | -         | 99,228           |
| <b>Total restricted funds</b> | <b>116,153</b>  | <b>162,891</b> | <b>(152,834)</b> | <b>-</b>  | <b>126,210</b>   |
|                               | -               |                |                  |           |                  |
| <b>Unrestricted funds</b>     | <b>24,481</b>   | <b>43,553</b>  | <b>(48,428)</b>  | <b>-</b>  | <b>19,606</b>    |
| <b>Total funds</b>            | <b>140,634</b>  | <b>206,444</b> | <b>(201,262)</b> | <b>-</b>  | <b>145,816</b>   |

|                               | 1 April<br>2022 | Income         | Expenditure      | Transfers  | 31 March<br>2023 |
|-------------------------------|-----------------|----------------|------------------|------------|------------------|
|                               | £               | £              | £                | £          | £                |
| <b>Restricted funds</b>       |                 |                |                  |            |                  |
| USCP Project                  | (13)            | -              | -                | 13         | -                |
| Joffe Charitable Trust        | (119)           | -              | -                | 119        | -                |
| DFID Bangladesh Project       | (68)            | -              | -                | 68         | -                |
| Ethiopia                      | -               | 500            | -                | -          | 500              |
| True Colours Trust            | 17,360          | -              | (17,360)         | -          | -                |
| Ukraine                       | -               | 42,891         | (40,251)         | -          | 2,640            |
| Bangladesh Project            | 114,711         | 118,551        | (120,249)        | -          | 113,013          |
| <b>Total restricted funds</b> | <b>131,871</b>  | <b>161,942</b> | <b>(177,860)</b> | <b>200</b> | <b>116,153</b>   |
|                               | -               |                |                  |            |                  |
| <b>Unrestricted funds</b>     | <b>72,206</b>   | <b>31,989</b>  | <b>(79,714)</b>  | <b>-</b>   | <b>24,481</b>    |
| <b>Total funds</b>            | <b>204,077</b>  | <b>193,931</b> | <b>(257,574)</b> | <b>200</b> | <b>140,634</b>   |

Transfers between funds represent amounts that the donor has agreed can now be used for unrestricted purposes.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2024

### Notes to the financial statements

#### For the year ended 31 March 2024

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#### 12. Analysis of funds (continued)

Tropical Health and Education Trust is funding palliative care development project in Kenya

A UK trust which wishes to remain anonymous is funding a palliative care development project in Bangladesh.

We worked with the Global Giving Foundation to support palliative care in the Ukraine

#### 13. Related party transactions

WHPCA paid the cost of travel and expenses incurred by Trustees whilst fulfilling their duties to WHPCA. This includes the reimbursement of expenses totalling £nil (2023: £nil).

Hospice UK, a UK registered charity, is a member of WHPCA and the Chief Executive Officer of Hospice UK - Toby Porter - is a trustee of WHPCA.

Hospice UK also provided various services to WHPCA, including financial management and payroll services valued at £3,750 (2023: £9,600).

At the year end Hospice UK owed £125,924 to WHPCA (2023: £7,634).

During the year, Stephen Connor, the executive director, donated £630 to WHPCA (2023: £450)

During the year, the charity paid £600 in subscriptions to ehospice, a communications charity. (2023: £1,200). One trustees of WHPCA, Dr Julie Downing and it's executive director, Dr Stephen R Connor are also trustees of ehospice

During the year, the charity received £30,033 (2023: £26,496) from EAPC for staff recharges. The chair, Julie Ling, is chief exeucitve of EAPC.

During the year, the charity received £9,685 (2023: £12,474) from ICPCN for staff recharges and paid it £nil (2023: £nil) in consultancy fees. A trustee, Julie Downing, is chief exeucitve of the ICPCN

#### 14. Ultimate controlling party

There is no overall controlling party.

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

## INDEPENDENT EXAMINERS REPORT

31 March 2024

### Independent Examiner's Report to the Trustees of Worldwide Hospice Palliative Care Alliance

I report to the charity trustees on my examination of the accounts of the company for the year ended 31 March 2024 which are set out on pages 1 to 26.

### Responsibilities and basis of report

As the charity trustees of the company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

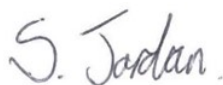
Having satisfied myself that the accounts of the company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your company's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

### Independent examiner's statement

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

1. accounting records were not kept in respect of the company as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination; or
4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102).

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



Shaun Jordan ACA

For and on behalf of Price Bailey LLP  
3rd Floor  
24 Old Bond St  
Mayfair  
London  
W1S 4AP

Date: 5 November 2024

**THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE**

England & Wales - Charity number 1127569

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# Accounts

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# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023



## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

The Worldwide Hospice Palliative Care Alliance Company Limited by Guarantee

Registered in England and Wales No 6735120

Registered Charity No 1127569

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

## TRUSTEES ANNUAL REPORT

### 1. ADMINISTRATIVE DETAILS

#### Registered name

The Worldwide Hospice Palliative Care Alliance  
Any other working name (or abbreviation): WHPCA

#### Charity and Company Registration

Registered charity: 1127569  
Company limited by guarantee in England and Wales: 6735120

#### Principal and Registered Office

Hospice House  
34-44 Britannia  
Street London  
WC1X 9JG

#### Independent Examiner

Helena Wilkinson  
Price Bailey  
LLP 3<sup>rd</sup> Floor  
24 Old Bond St  
Mayfair  
London  
W1S 4AP

#### Banker

Coutts and Co.  
440 Strand  
London  
WC2 0QS

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

## Trustees (During Fiscal Year)

|                            |                                                                                                                                                                     |
|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Dr Julie Ling              | Chief Executive Officer, European Association for Palliative Care<br><u>Appointed</u> : December 2014 (Chair from June 2018)                                        |
| Dr Julia Downing           | Chief Executive Officer, Children's International Palliative Care Network<br><u>Appointed</u> : October 2017 Unlimited Term                                         |
| Dr Nisla Camano Reyes      | President, Panamanian Association of Palliative Care<br><u>Appointed</u> : November 2018, Term ended April 2022                                                     |
| Dr Emmanuel Luyirika       | Executive Director, African Palliative Care Association<br><u>Appointed</u> : November 2012 Unlimited Term                                                          |
| Dr Ednin Hamzah            | Chair, Asia Pacific Hospice Palliative Care Network<br><u>Appointed</u> : November 2013<br><u>Re-appointed</u> : August 2017 Unlimited Term                         |
| Mr. Craig Duncan, FCA      | COO, Hospice UK<br><u>Appointed</u> : October 2016 <u>Re-appointed</u> Aug 2020                                                                                     |
| Dr Agnes Csikos            | Pecs-Baranya Hospice Foundation, Hungary<br><u>Appointed</u> : October 2017<br><u>Re-appointed</u> Mar 2021                                                         |
| Dr Richard Harding         | Kings College, Cicely Saunders Institute<br><u>Appointed</u> : October 2016 <u>Re-appointed</u> Mar 2020                                                            |
| Dr Frank Brennen           | Physician<br><u>Appointed</u> : October 2017 <u>Re-appointed</u> Dec 2020                                                                                           |
| Dr James Cleary            | Director and Walther Senior Chair of Supportive Oncology, Indiana University<br><u>Appointed</u> : October 2017 <u>Re-appointed</u> Dec 2020                        |
| Ms. Maria Marroquin Assoc. | Administrator, Latin American Palliative Care<br><u>Appointed</u> : August 2020 Unlimited Term                                                                      |
| Mr. Edo Banach, JD         | CEO and President National Hospice and Palliative Care Organisation<br><u>Appointed</u> : October 2017 <u>Re-appointed</u> Aug 2021.<br><u>Resigned</u> August 2022 |

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|                       |                                                                                                          |
|-----------------------|----------------------------------------------------------------------------------------------------------|
| Dr Helena Davies      | Trustee with Lived Experience Palliative Care <u>Appointed</u><br>November 2018 (on-leave December 2022) |
| Ms Laurel Gillespie   | Executive Director, Canadian Hospice Palliative Care<br>Association <u>Appointed</u> : May 2022          |
| Dr Stephen Watiti     | Trustee with Lived Experience Palliative Care <u>Appointed</u> :<br>December 2018                        |
| Dr Savita Butola      | Secretary, Indian Association of Palliative<br>Care <u>Appointed</u> : June 2020 Unlimited<br>Term       |
| Prof Yoshiyuki Kizawa | President, Japanese Society for Palliative Medicine<br><u>Appointed</u> : September 2020                 |
| Prof Meera Agar       | Chair, Palliative Care Australia<br><u>Appointed</u> : September 2020                                    |
| Dr Babe Gaolebale     | Botswana Ministry of<br>Health <u>Appointed</u> : May<br>2020                                            |
| Dr Sami Alsafari      | Professor, Kasr Al-Ainy School of Medicine,<br>Cairo University. <u>Appointed</u> : May 2022             |
| Dr Douglas Crispim    | Brazilian National Academy of Palliative<br>Care <u>Appointed</u> : December 2022                        |

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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## 2. STRUCTURE, GOVERNANCE AND MANAGEMENT

### **Nature of Governing Document**

The Worldwide Hospice Palliative Care Alliance is a charitable company limited by guarantee constituted on 28 October 2008 and governed by articles and memorandum of association which were last amended on 25 July 2017. The trustees are also directors of the charity for the purposes of the Companies Act.

### **How the Charity is Constituted**

The charity is an international non-governmental organization with trustees from each region of the world. There are currently 400 organizational members of the WHPCA from 103 countries. WHPCA members are not currently required to pay dues. The only voting members are the trustees.

### **The Board of Trustees**

Trustees are elected and appointed according to the byelaws, which identify the number of trustees from each world region. Qualified candidates for election to the Board are identified with our regional members and are elected by current trustees.

Most trustees retire from office after four years. Retiring trustees can be reappointed but a trustee who has served for two consecutive terms must take a break from office and may not be reappointed for one year. Trustees that represent named organizations in the byelaws can serve unlimited terms.

The trustees delegate day-to-day management of the charity to the Executive Director, Dr Stephen Connor.

The trustees set the remuneration of key management personnel based on market rates within the sector.

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## 3. PUBLIC BENEFIT

We have referred to Charity Commission's general guidance on public benefit when reviewing our aims and objectives and in planning our future activities. In particular, the trustees consider how planned activities will contribute to the aims and objectives they have set. Our achievements and performance in section 5 show how we have met the public benefit requirements.

The Worldwide Hospice Palliative Care Alliance (WHPCA) is an international nongovernmental organisation (INGO) focusing exclusively on hospice and palliative care development worldwide. Its members are national and regional hospice and palliative care organisations and affiliate organisations supporting hospice and palliative care and supporters of hospice and palliative care worldwide.

Our vision is a world with universal access to hospice and palliative care. Our mission is “to bring together the global palliative care community to improve well-being and reduce unnecessary suffering for those in need of palliative care in collaboration with the regional and national hospice and palliative care organisations and other partners.”

Hospice and palliative care services relieves the pain and suffering of patients with life-limiting illness, supporting them and those around them physically, emotionally, and spiritually. Care for patients can be in a variety of settings including their own home, at the hospice, in a hospital or in the community and can be for days, months or years.

We are here to support national hospice and palliative care organisations in promoting and developing hospice and palliative care in their countries. In the following sections, we aim to give you a snapshot of the key activities we have undertaken this year to meet our charitable objectives. This review demonstrates how our work is carried out for public benefit and how we have supported our members and others to provide and develop palliative care.

## 4. OBJECTIVES AND ACTIVITIES

The objectives of the charity are:

- to facilitate and promote the relief, care and treatment of the sick, especially the chronically and incurably ill and the dying, and the support and care of their families and carers and of the bereaved, in particular by:

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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- improving access to, and the quality of, palliative care, worldwide and improving the efficiency and efficacy of institutions concerned with the charitable provision of palliative care; and
- providing or facilitating education and training in palliative care and increasing awareness and understanding among the general public of the values, principles and practice of hospice and palliative care.

The main activities undertaken in relation to those purposes (from 1 April 2022 to 31 March 2023) are set out in section 5 below.

## 5. ACHIEVEMENTS AND PERFORMANCE

- **Secretariat and Governance**

This year, due to the COVID-19 pandemic there was only one face-to-face board meeting. However, the board did meet by teleconference three times during the year.

The executive committee held teleconference meetings between board calls.

Our first executive director, Dr Stephen Connor, was originally appointed in January 2016, and continues to lead the organization to present.

- **Risk Management**

The trustees, together with the executive director and staff, identify risks to which the Worldwide Hospice Palliative Care Alliance is exposed and ensure that appropriate controls and systems are in place to monitor and manage those risks. A risk register is maintained and is reviewed by staff bi-weekly, by the executive committee quarterly, and by the full board annually. Current risks include securing income, dealing with potential economic downturn, ensuring compliance with UK General Data Protections Rules, ensuring our partner organizations are compliant with all safeguarding and grant funding rules and procedures, and ensuring on-line donations and grants are accurately accounted for.

- **Communications**

WHPCA owns and publishes on the international edition of ehospice (a separate charity) which supported WHPCA programmes and advocacy activity by reporting on WHPCA programmes and efforts to achieve Universal Health Coverage and palliative care services for those who need it as part of the WHO General Programme of Work, access to medications, rights of older persons, and advocacy at the World Health Organization Executive Board Meeting. ehospice international published 80 (April 22' – March 23') articles with stories from around the world during this fiscal year. The categories were represented as follows:

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|                      |    |
|----------------------|----|
| International        |    |
| Research             | 13 |
| Policy               | 11 |
| People & Places      | 3  |
| In The Media         | 7  |
| Fundraising          | 1  |
| Education            | 17 |
| Community Engagement | 23 |
| Uncategorized        |    |
| Highlight            | 59 |
| Fundraising          | 1  |
| Care                 | 28 |
| Leadership           | 5  |
| Opinion              | 10 |
|                      |    |
| Total Articles       | 79 |

The International edition of ehospice reported 80,529 (2022: 95,503) sessions, 66,913 (2022: 81,736) new users and 100,504 (2022: 118,693) page views over the reporting period.

The WHPCA has continued to build up its communications tools including:

- Our monthly e-newsletter which is circulated to over 395 (2022: 210) member recipients and 3,177 (2022: 2928) newsletter subscriber recipients equals to a total of 3,572 (2022: 3186) in over 120 countries with an increase from the previous year.
- We have been managing and updating our WHPCA website with regular news updates relating to hospice and palliative care worldwide. There were 59,000 (2022: 52,000) sessions and 129,301 (2022: 121,649) page views, 45,000 (2022: 40,000) users on the WHPCA website during the reporting period. 86.5% new visitors and 13.5 returning visitors.
- We have increased our engagement on social media mechanisms, including Facebook, and Twitter. We currently, as of 21<sup>st</sup> July 2023 have 6,004 (2022: 5,747) followers on Facebook. WHPCA also has 7,866 (2022: 7,524) followers on Twitter. Our LinkedIn page has 675 (2022: 261) followers and our Instagram account where we have 625 (2022: 273) followers.
- World Hospice and Palliative Care Day took place and there this was the first time since the COVID-19 pandemic where people held several in-person events. The theme was Healing Hearts and communities, and World Hospice and Palliative Care Day 2022 was on 8 October. Everyone deserves the best care possible regardless of who they are or where they live in the world. Palliative care is yet to be fully integrated into the healthcare system of most countries especially the low and middle-income countries. In recent years, the COVID-19 pandemic only exacerbated the challenges faced in the healthcare system. Materials were produced and

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utilised around the world and 141 events were registered on the website from 44 different countries.

- WHPCA Communications continued to provide support to the Compassionate Korail project in Bangladesh by working with the WHPCA Programmes Manager to advise on communications aspects of the project.

## **We influence policy at the highest levels**

### **Advocacy**

This year we continued to focus our advocacy around integrating palliative care as part of health system strengthening and Universal Health Coverage reforms. We continued to work together with palliative care advocates and palliative care allies worldwide to achieve our aims for palliative care for all as part of UHC, with a particular focus on enabling the voice of people with lived experience of palliative care to be heard. We continue to work with WHO, as a non-state actor in official relations, the United Nations as an NGO with Consultative Status, and to develop strong, collaborative links with other non-state actor partnerships to deliver our objectives.

### **Our key activities through the year include:**

- We contributed to high level events ensuring the voice of palliative care, and more specifically, people with palliative care needs was heard. This included the June 2022 World Health Assembly including the civil society pre-consultation, the World Cancer Congress October 2022, and the January 2023 Executive Board. Our executive director co-chaired one of the major thematic areas of the World Cancer Congress, including a track of sessions on palliative care and organized and moderated the Congresses' Great Debate on Medical Aid in Dying.
- We have worked to support the implementation of the WHO Palliative Care Action Plan through active engagement on the WHO palliative care working group and with partners, including:
  - Quarterly meetings with the WHO Internal Palliative Care Working
  - Group Membership in and support of:
    - The WHO HIV Quality of Care Working Group
    - The WHO Noncommunicable Disease and Mental Health Dept
    - The WHO Global TB Programme
    - The WHO Global Network for Long Term Care
    - The WHO Cervical Cancer Elimination program
    - The WHO Childhood Cancer Initiative
    - The WHO Civil Society Working Group on NCD's and Pandemic Preparedness

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. Our project in Kenya to support the integration of palliative care into the national health systems' Universal Health Coverage program, with funding from True Colours Trust, was

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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disrupted due to COVID. We are implementing the project now and our partner the Kenyan Hospice Palliative Care Association has made great strides. They have approval to add palliative care to the National Health Insurance Fund and the Ministry of Health has reorganized their divisions to include one for palliative and geriatric care. The project is continuing with a no cost extension into the next fiscal year.

- o We published a report titled: *Advocacy Guide: Palliative Care and Universal Health Coverage* in January of 2023 to help our members to better advocate for UHC in their countries and put on a webinar to help them understand how to use the guide. The webinar is available on the WHPCA website for members to refer to if they wish to.
  
- o We also published the following articles during the fiscal year:
  - o O'Neill J, & **Connor S.** (2022). Palliative and Supportive Care: The Global Context. In A. Burger and J. O'Neill (Eds). *Principles and practices of palliative and supportive oncology – 5<sup>th</sup> Edition*. Philadelphia: Wolters Kluwer
  - o Rangaraj A, **Connor S**, Harding R, Pinto C, Chitembo L, & Ford N. (2022). Advanced HIV disease and health related suffering- exploring the unmet need of palliative care. *Lancet HIV*
  - o Nevzorova DV, Siderov AV, Osetrova OV, Krakauer EL, Chwistek M, **Connor S**, Konson C, Michaelson S, Ustinova AI. A patient with pain associated with metastatic colon cancer: considerations for analgesic therapy selection. *Pallium* 2022
  - o Downing J, Namisango E, **Connor S**, Batanda P, Irumba LC, Basemera B, et al. The Declaration on Palliative Care in a Pandemic: report of the African Ministers of Health Meeting and the 7<sup>th</sup> International African Palliative Care Conference, held from the 24<sup>th</sup> to 26<sup>th</sup> August 2022 in Kampala Uganda & virtually. *Ecancermedicalscience*, 2022, 16:1474. DOI: <https://doi.org/10.3332/ecancer.2022.1474>
  - o Rosa W, Pandey S, Epstein A, **Connor S**, Anderson SJ, Blackler L, Desai AJ, Koranteng LA, Brietbart WS, Nelson JE. (2023). The Third Annual US Celebration of World Hospice and Palliative Care Day: A virtual coming together to unify the global palliative care community. *Palliative and Supportive Care*. <https://doi.org/10.1017/S1478951523000391>

## **We are building a diverse and strong movement demanding care for all**

Our membership of the UK working group (UKWG) on NCDs enables us to contribute to work being undertaken by the NCDA where appropriate and importantly keeps us up to date with projects being undertaken by the other members of the UKWG and to learn from these. In particular, membership allows WHPCA to keep up to date with advocacy initiatives from other organisations and provides information about activities at meetings such as WHA EB and UN HLM

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To ensure involvement of our members we conducted a members' survey to establish how we can best serve our members. This survey included questions on which areas should be prioritized by the WHPCA in its work going forward. Advocacy was identified as a high priority both advocacy by the WHPCA at high level meetings and nationally. Helping countries ensure that palliative care was included in UHC was identified as the highest priority and is in keeping with the guide on advocacy for palliative care and UHC that we produced.

We also conducted a survey of members to identify work being done on identification and partnership with people with lived experience of palliative care. This is building on work we have done to identify PWLE who are willing to contribute to research projects providing a lived experience perspective from the beginning of a research project through all stages including dissemination of results and paper writing. The purpose of the survey is to identify a cohort of PWLE who can participate in a consultation to determine priorities for PWLE for work by the WHPCA and to identify additional PWLE who are willing to participate in research. .

We have continued to focus our work on targeted equity issues in palliative care integrating it across our advocacy, communications and programming including relating to gender and people with disabilities.

We have established communication with HI (Federation Handicap International - Humanity & Inclusion) to discuss the links between palliative care and rehabilitation and how we might potentially work together. Rehabilitation and PC are both essential health services for UHC with considerable overlap and the profile of rehabilitation has recently increased. Moving forward we anticipate working closely with organisations that promote rehabilitation and there is potential for cost and workforce efficiencies as a result of such collaboration in practice.

We have had productive conversations with HelpAge and established a 3 monthly meeting schedule to discuss areas of common concern given the importance of palliative care in the ageing population. In addition, our goals for advocacy are very well aligned with theirs.

We have continued our support of palliative care in humanitarian crisis by continuing a fundraising platform for those affected by the crisis in Ukraine and working collaboratively with others to improve access to palliative care.

- o Our WHO/WHPCA *Global Atlas of Palliative Care at the End of Life* (2014) has now been downloaded over 160,000 times. A new 2<sup>nd</sup> edition of the *Global Atlas* with WHO was launched in October 2020 and has so far been downloaded over 90,000 times. <http://www.thewhpc.org/resources/global-atlas-on-end-of-life-care>

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## Organisational Development and Programme Support

Building an integrated age-attuned model of supportive palliative care in Bangladesh is our project being delivered by partners AYAT, BSMMU, St. Christophers and WHPCA. Now in its second year, the project is opening up access to supportive palliative care by integrating government and community health services in the Bandar Upazila Health Complex in Narayanganj, Bangladesh. The project has already provided palliative care to over 200 patients through a combination of home-based care and outpatient services. The target is 950 by end of year 3. The project has also trained just under 100 health care workers (doctors, nurses and community health workers) and over 30 community volunteers in supportive palliative care and reached over 1,200 community members with palliative care sensitisation sessions. At the national level, the project continues to advocate for and provides technical support to the development of a national policy framework and budget allocation for palliative care, as well as the inclusion of palliative care in Universal Health Coverage.

With funding from True Colours Trust our project in **Kenya** to support the integration of palliative care into the national health systems' Universal Health Coverage program was disrupted due to COVID. We are implementing the project now and our partner the Kenyan Hospice Palliative Care Association has made great strides. They have approval to add palliative care to the National Health Insurance Fund and the Ministry of Health has reorganized their divisions to include one for palliative and geriatric care. The project is continuing with a no cost extension into the next fiscal year.

WHPCA in partnership with Alzheimer's Disease International, the World Innovation Summit on Health (WISH), and SANAD a Lebanese home care program completed an assessment of need for palliative care for older persons in **Qatar** for the Hamad Medical Corporation. We also helped SANAD in doing an initial palliative care training program.

WHPCA has been providing technical support to the government of **Greece** in developing a national strategy for development and implementation of palliative care. This year the project continued to remain in hiatus due to the COVID-19 pandemic but should restart.

WHPCA and other partner organizations have been providing in-kind technical support to the Hospice and Palliative Professionals Association in the Russian Federation including on-line teaching, case conferences, and professional development throughout the year in **Eurasia**. The war in Ukraine has limited what can be done going forward but we continue to support palliative care professionals throughout the Eurasia region with our partner organization, the American Eurasia Cancer Alliance.

WHPCA has been working with the Palliative Care Association in Kazakhstan to expand palliative care in the country by helping with policy and program development.

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WHPCA has been advising the country of Indonesia on integration of palliative care into their primary care system.

The WHPCA Palliative Care Toolkit and training manual continues to be a useful resource for those developing palliative care in limited resource settings at <http://www.thewhpc.org/resources/memberresources/national-palliative-care-strategies/>. An updated version of the toolkit is now available. The toolkit & training manuals have been downloaded over 70,600 times since initial publication in 2014.

The WHPCA continues to be focused on support of hospice and palliative care development in low and middle-income countries. We received funding for the above programme to support palliative care delivery in Bangladesh, have developed strong indigenous palliative care models with local members and are working on funding for further programmes. Our co-edited book *Building Integrated Palliative Care Programs and Services* (2017) that is free to download at: <http://www.thewhpc.org/resources/building-integrated-palliative-care-programs-and-services> with over 12,500 downloads since publication.

## 6. FINANCIAL REVIEW

Income for the financial year was £193,932 (21/22: £180,971), including grants from the Oak Trust, an Anonymous donor, and Global Giving Foundation. We are extremely grateful to them for their support. Expenditure for the year totaled £257,374 (2021/22 £156,142), as a result of increased programme delivery costs.

During the year WHPCA recorded a deficit of £63,442 (2021/22 surplus £24,829) due to commitments to spend funds from the previous fiscal year. There was a large unrestricted general funds expenditure of £ 47 , 725 (2021/22: £75,292) that brings total unrestricted funds to £24,481 (2021/22: £72,206). Total funds carried forward at the end of the fiscal year were £140,635 (2021/22: £204,077).

## 7. RESERVES

The charity holds limited free reserves at the end of the year. The trustees aim to hold reserves of at least £50,000, based on an analysis of our expenditure commitments, charitable need and the security of our income streams. As the current free reserves are £24,481, the trustees believe this level of reserves is inadequate, but we remain a going concern for the next twelve months. COVID-19 has not had a negative impact on our operations and reserves this year.

Our budget and cash forecasts we anticipate ending next fiscal year with approximately £16000-20,000 in free reserves.

## 8. PLANS FOR FUTURE PERIODS

The WHPCA will continue to work toward achieving its mission through the implementation of our new three-year strategic plan (2022-25). Currently the five strategic areas of focus are:

1. **INFLUENCING CHANGE:** We will reduce suffering by including palliative care in universal health coverage basic packages of care in low-and-middle income countries

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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2. **TRACKING PROGRESS:** We will ensure that palliative care progress is tracked and monitored by policy makers using standardized, tested, and reliable national and international indicators.
3. **BUILDING A MOVEMENT:** We will work to build a movement of people with palliative care needs (PWPCN), carers, civil society, government, and academia to improve understanding and demand for palliative as part of Universal Health Coverage
4. **BUILDING MODELS OF Palliative Care (PC):** We will work with our members and partners to continue to build models of indigenous PC in low and middle-income countries to serve as 'beacons' of PC provision with funding and technical assistance to increase access to essential palliative care as part of Universal Health Coverage
5. **GROWING A GLOBAL ALLIANCE:** We will grow a strong regional and national and international member driven global alliance working collaboratively in meaningful partnership with others.

## STATEMENT OF TRUSTEES' RESPONSIBILITIES

The trustees (who are also directors of Worldwide Hospice Palliative Care Alliance for the purposes of company law) are responsible for preparing the Report of the Trustees 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 which give a true and fair view of the state of affairs of the charitable company and its subsidiaries and of the incoming resources and application of resources, including the income and expenditure, of the charitable company and its subsidiaries for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently
- observe the methods and principles in the Charities Statement of Recommended

Practice 2019 (FRS102)

- make judgements and estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards have been followed, subject to

# THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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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 business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and its subsidiaries 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.

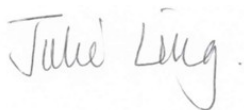
The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislations in other jurisdictions.

The Report of the Trustees has been prepared in accordance with the special provisions applicable to companies' subject to small companies' regime.

## **Independent examiner**

Price Bailey LLP was re-appointed as the charity's independent examiner for this fiscal year.

Approved by the trustees on 07 September 2023 and signed on their behalf by



Dr Julie Ling

Chair, WHPCA

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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The Worldwide Hospice Palliative Care Alliance

Statement of Financial Activities  
(Incorporating an income and expenditure account)

For the year ended 31 March 2023

|                                                    |      | Unrestricted<br>£    | Restricted<br>£       | 2023<br>Total<br>£    | 2022<br>Total<br>£ |
|----------------------------------------------------|------|----------------------|-----------------------|-----------------------|--------------------|
|                                                    | Note |                      |                       |                       |                    |
| <b>Income</b>                                      |      |                      |                       |                       |                    |
| Donations and legacies                             | 2a   | 31,989               | 161,943               | 193,932               | 180,971            |
| Income from charitable activities                  | 2b   | -                    | -                     | -                     | -                  |
| <b>Total income</b>                                |      | <u>31,989</u>        | <u>161,943</u>        | <u>193,932</u>        | <u>180,971</u>     |
| <b>Expenditure</b>                                 |      |                      |                       |                       |                    |
| Charitable activities                              | 3    | <u>79,714</u>        | <u>177,660</u>        | <u>257,374</u>        | <u>156,142</u>     |
| <b>Total Expenditure</b>                           |      | <u>79,714</u>        | <u>177,660</u>        | <u>257,374</u>        | <u>156,142</u>     |
| <b>Net income / (expenditure) before transfers</b> |      | <b>(47,725)</b>      | <b>(15,717)</b>       | <b>(63,442)</b>       | <b>24,829</b>      |
| Transfers between funds                            |      | -                    | -                     | -                     | -                  |
| <b>Net income / (expenditure) after transfers</b>  |      | <b>(47,725)</b>      | <b>(15,717)</b>       | <b>(63,442)</b>       | <b>24,829</b>      |
| <b>Reconciliation of funds</b>                     |      |                      |                       |                       |                    |
| Total funds brought forward                        |      | <u>72,206</u>        | <u>131,871</u>        | <u>204,077</u>        | <u>179,248</u>     |
| <b>Total funds carried forward</b>                 | 11   | <u><b>24,481</b></u> | <u><b>116,154</b></u> | <u><b>140,635</b></u> | <u>204,077</u>     |

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### The Worldwide Hospice Palliative Care Alliance

#### Balance sheet

**As at the 31 March 2023**

|                                      |           | 2023           | 2022           |
|--------------------------------------|-----------|----------------|----------------|
|                                      | Note      | £              | £              |
| <b>Tangible Fixed Assets</b>         | <b>8</b>  | -              | 22<br>5        |
| <b>Current assets</b>                |           |                |                |
| Cash at bank and in hand             |           | 19,132         | 197,849        |
| Debtors                              | 9         | <u>126,694</u> | <u>12,603</u>  |
|                                      |           | 145,826        | 210,452        |
| <b>Liabilities</b>                   |           |                |                |
| Creditors: amounts due within 1 year | 10        | <u>(5,192)</u> | <u>(6,601)</u> |
| <b>Net current assets</b>            |           | 140,634        | 203,852        |
| <b>Net assets</b>                    |           | <u>140,634</u> | <u>204,077</u> |
| <b>Funds</b>                         |           |                |                |
| Restricted funds                     |           | 116,153        | 131,871        |
| Unrestricted funds                   |           | 24,481         | 72,206         |
| <b>Total charity funds</b>           | <b>11</b> | <u>140,634</u> | <u>204,077</u> |

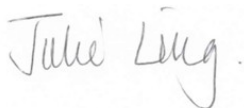
The notes on pages 18 to 28 form part of these financial statements.

For the year ending 31 March 2023, the company was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small

Directors' responsibilities:

- the members have not required the company to obtain an audit of its account for the year in question in accordance with section 476;
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the

Approved by the trustees on 07 September 2023 and signed on their behalf by



Dr Julie Ling  
Chair

Company number: 6735120

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### Notes to the financial statements

**For the year ended 31 March 2023**

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#### **1. Accounting policies**

##### **a) Basis of preparation**

The financial statements 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), and the Companies Act 2006. The functional currency is pounds sterling.

The charity 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 notes.

##### **b) Company status**

The charity is a company limited by guarantee. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member (18) of the

##### **c) 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 other purposes.

Restricted funds are to be used for specific purposes as laid down by the donor.

##### **d) Income**

Voluntary income including donations, gifts and grants that provide core funding or are of general nature are recognised where there is entitlement, probability of receipt and the amount can be measured with sufficient reliability.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### 1. Accounting policies (continued)

#### **e) Expenditure**

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

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly allocated to either charitable or governance costs, they have been apportioned based on an estimate of the time devoted to the respective areas.

#### **f) Going Concern**

The financial statements have been prepared on a going concern basis as the trustees believe that no material uncertainties exist. The trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements. The budgeted income and expenditure is sufficient with the level of reserves for the charity to be able to continue as a going concern, and income received up to the date of signing these accounts suggests the budget will be met.

#### **g) Debtors**

Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid net of any trade discounts due. Accrued income and tax recoverable is included at the best estimate of the amounts receivable at the balance sheet date.

#### **h) Creditors**

Creditors are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors are normally recognised at their settlement amount.

#### **i) Cash at bank and in hand**

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### 1. Accounting policies (continued)

#### **j) Pension**

The company operate a defined contribution plan for the benefit of its employees. Contributions are expensed as they become payable.

#### **k) Financial instruments**

The charity only has financial assets and liabilities that qualify as basic financial instruments, which are all measured at cost.

#### **l) Significant estimates and judgements**

No significant judgements, accounting policies or assumptions have been made by management in applying the charity's accounting policies.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### Notes to the financial statements

For the year ended 31 March 2023

## 2. Income

### a) Donations and Legacies

|                                           |               |                | 2023            |               |                | 2022           |
|-------------------------------------------|---------------|----------------|-----------------|---------------|----------------|----------------|
|                                           | Unrestricted  | Restricted     | Total           | Unrestricted  | Restricted     | Total          |
|                                           | £             | £              | £               | £             | £              | £              |
| <b>Grants from foundations and trusts</b> |               |                |                 |               |                |                |
| Grant from USCP                           | -             | -              | -               | -             | 4,343          | <b>4,343</b>   |
| Grant from UK DFID                        | -             | -              | -               | -             | 23,054         | <b>23,054</b>  |
| Grant from Anonymous Foundation           | 6,500         | 118,551        | <b>125,051</b>  | -             | 115,758        | <b>115,758</b> |
| Grant from Global Giving Foundation       | 4,590         | 42,892         | <b>47,481</b>   | 4,741         | -              | <b>4,741</b>   |
| Grant from NCDA                           | -             | -              | -               | -             | 10,246         | <b>10,246</b>  |
| Grant from OAK Trust                      | -             | 500            | <b>500</b>      | -             | -              | -              |
|                                           | -             | -              | -               | -             | -              | -              |
|                                           | 11,090        | 161,943        | <b>173,032</b>  | 4,741         | 153,401        | <b>158,142</b> |
| <b>Income from related parties</b>        |               |                |                 |               |                |                |
| 13                                        | 38,059        | -              | <b>38,059</b>   | 19,756        | -              | <b>19,756</b>  |
| Exchange gains/(losses)                   | (18,996)      | -              | <b>(18,996)</b> | 2,502         | -              | <b>2,502</b>   |
| Individual donations                      | 1,836         | -              | <b>1,836</b>    | 571           | -              | <b>571</b>     |
| <b>Total</b>                              | <b>31,989</b> | <b>161,943</b> | <b>193,932</b>  | <b>27,570</b> | <b>153,401</b> | <b>180,971</b> |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

Notes to the financial statements

For the year ended 31 March 2023

### 3. Expenditure

|                                       | Direct Costs   | Support Costs | 2023<br>Total  | Direct Costs   | Support Costs | 2022<br>Total  |
|---------------------------------------|----------------|---------------|----------------|----------------|---------------|----------------|
|                                       | £              | £             | £              | £              | £             | £              |
| <b>Charitable Activities</b>          |                |               |                |                |               |                |
| General Capacity Building             | 74,152         | 5,362         | <b>79,514</b>  | 94,540         | 22,121        | <b>116,661</b> |
| NCDA Project                          | -              | -             | -              | 10,365         | -             | <b>10,365</b>  |
| Bangladesh Project (Anonymous funder) | 108,922        | 11,327        | <b>120,249</b> | 1,525          | 500           | <b>2,025</b>   |
| Bagladesh Project (DFID funding)      | -              | -             | -              | 9,967          | (160)         | <b>9,807</b>   |
| Greece Project                        | -              | -             | -              | -              | (1,806)       | <b>(1,806)</b> |
| Ukraine                               | 35,962         | 4,289         | <b>40,251</b>  | -              | -             | -              |
| USCP Project                          | -              | -             | -              | 18,706         | 384           | <b>19,090</b>  |
| True Colours Trust                    | 15,500         | 1,860         | <b>17,360</b>  | -              | -             | -              |
| <b>Total Expenditure</b>              | <b>234,536</b> | <b>22,838</b> | <b>257,374</b> | <b>135,103</b> | <b>21,039</b> | <b>156,142</b> |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### Notes to the financial statements

For the year ended 31 March 2022

### 3. Expenditure (continued)

#### b) Analysis of Support

| Costs                               | 2023<br>£            | 2022<br>£            |
|-------------------------------------|----------------------|----------------------|
| <b>Governance</b>                   |                      |                      |
| Tax and Independent Examination     | <u>1,440</u>         | <u>1,140</u>         |
|                                     | <b>1,440</b>         | <b>1,140</b>         |
| <b>Other Support Costs</b>          |                      |                      |
| Travel, accommodation & subsistence | 277                  | 179                  |
| Accountancy and HR                  | 9,662                | 10,600               |
| Miscellaneous                       | 4,715                | 3,250                |
| Communications Costs                | 3,821                | 1,574                |
| Depreciation                        | 225                  | 450                  |
| Website                             | 2,698                | 3,846                |
| <b>Total Support Costs</b>          | <u><b>22,838</b></u> | <u><b>21,039</b></u> |

Support costs have been allocated based on an estimate of time spent.

### 4. Net income/(expenditure) for the year

|                                            |           |           |
|--------------------------------------------|-----------|-----------|
| This is stated after charging / crediting: | 2023<br>£ | 2022<br>£ |
| Net losses/(gains) on foreign exchange     | 18,996    | (2,502)   |
| Independent Examiners fees                 | 1,140     | 1,140     |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### Notes to the financial statements

#### For the year ended 31 March 2022

#### 5. Wages and Salaries

|                    | 2023          | 2022          |
|--------------------|---------------|---------------|
|                    | £             | £             |
| Salaries           | 71,419        | 85,027        |
| National Insurance | 80            | -             |
| Pension            | 1,551         | 2,035         |
|                    | <u>73,050</u> | <u>87,062</u> |

No employee earned more than £60,000 in the current or prior year.

The key management personnel for the year comprise the trustees. The charity's trustees were not paid and did not receive any benefits from employment with WHPCA in the year (2022: £nil). They were reimbursed expenses during the year as stated in note 11.

#### b) Staff numbers

The average monthly head count was 4 (2021: 4)

|                                            | 2023     | 2022     |
|--------------------------------------------|----------|----------|
|                                            | No       | No       |
| At 31 March, the head-count was as follows |          |          |
| Raising funds                              | -        | -        |
| Charitable activities                      | 4        | 4        |
| Total                                      | <u>4</u> | <u>4</u> |

#### 6. Pension

WHPCA contributes towards defined contribution pension plans for employees. Pension costs are recognised when they fall due.

The costs of the defined contribution scheme are included with the associated staff costs and allocated therefore to raising funds and charitable activities. £217 (2022 - £213) was owing to the pension scheme at the year end.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### Notes to the financial statements

For the year ended 31 March 2023

#### 7. Taxation

WHPCA is exempt from corporation tax as all its income is applied for charitable purposes.

#### 8. Tangible Fixed Assets

|                                              |              |
|----------------------------------------------|--------------|
|                                              | IT equipment |
|                                              | £            |
| Cost at the start of the year                | 2,658        |
| Additions                                    | -            |
| <b>At the end of the year</b>                | <b>2,658</b> |
| Depreciation at the start of the year        | 2,433        |
| Charge for the year                          | 225          |
| <b>At the end of the year</b>                | <b>2,658</b> |
| <b>Net book value at the end of the year</b> | <b>-</b>     |
| Net book value at the start of the year      | 225          |

#### 9. Debtors

|                             |                |               |
|-----------------------------|----------------|---------------|
|                             | <b>2023</b>    | <b>2022</b>   |
|                             | £              | £             |
| Other debtors               | 119,060        | 4,989         |
| Amounts due from Hospice UK | 7,634          | 7,614         |
|                             | <b>126,694</b> | <b>12,603</b> |

#### 10.

due in less than one year

|                            | Creditors: Amounts falling |              |
|----------------------------|----------------------------|--------------|
|                            | <b>2023</b>                | <b>2022</b>  |
|                            | £                          | £            |
| Trade creditors            | 1,531                      | 5,388        |
| Accruals & Deferred Income | 3,660                      | 1,213        |
|                            | <b>5,192</b>               | <b>6,601</b> |

#### 11.

#### Analysis of net assets between funds 2023

|                       | Unrestricted  | Restricted     | Total          |
|-----------------------|---------------|----------------|----------------|
|                       | £             | £              | £              |
| Tangible fixed assets | -             | -              | -              |
| Net current assets    | 24,481        | 116,153        | 140,634        |
|                       | <b>24,481</b> | <b>116,153</b> | <b>140,634</b> |
|                       |               |                | 2022           |
|                       | Unrestricted  | Restricted     | Total          |
|                       | £             | £              | £              |
| Tangible fixed assets | 225           | -              | 225            |
| Net current assets    | 71,981        | 131,871        | 203,852        |
|                       | <b>72,206</b> | <b>131,871</b> | <b>204,077</b> |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### Notes to the financial statements

**For the year ended 31 March 2023**

#### 12. Analysis of funds

An analysis of restricted funds is shown below

|                               | 1 April<br>2022 | Income         | Expenditure      | Transfers  | 31 March<br>2023 |
|-------------------------------|-----------------|----------------|------------------|------------|------------------|
|                               | £               | £              | £                | £          | £                |
| <b>Restricted funds</b>       |                 |                |                  |            |                  |
| USCP Project                  | (13)            | -              | -                | 13         | -                |
| Joffe Charitable Trust        | (119)           | -              | -                | 119        | -                |
| DFID Bangladesh Project       | (68)            | -              | -                | 68         | -                |
| Ethiopia                      | -               | 500            | -                | -          | 500              |
| True Colours Trust            | 17,360          | -              | (17,360)         | -          | -                |
| Ukraine                       | -               | 42,891         | (40,251)         | -          | 2,640            |
| Bangladesh Project            | 114,711         | 118,551        | (120,249)        | -          | 113,013          |
| <b>Total restricted funds</b> | <b>131,871</b>  | <b>161,942</b> | <b>(177,860)</b> | <b>200</b> | <b>116,153</b>   |
|                               | -               |                |                  |            |                  |
| <b>Unrestricted funds</b>     | <b>72,206</b>   | <b>31,989</b>  | <b>(79,714)</b>  | <b>-</b>   | <b>24,481</b>    |
| <b>Total funds</b>            | <b>204,077</b>  | <b>193,931</b> | <b>(257,574)</b> | <b>200</b> | <b>140,634</b>   |

|                               | 1 April<br>2021 | Income         | Expenditure      | Transfers | 31 March<br>2022 |
|-------------------------------|-----------------|----------------|------------------|-----------|------------------|
|                               | £               | £              | £                | £         | £                |
| <b>Restricted funds</b>       |                 |                |                  |           |                  |
| OSF Capacity Building         | 13,798          | -              | (13,798)         | -         | -                |
| USCP Project                  | 14,734          | 4,343          | (19,090)         | -         | (13)             |
| DFID Bangladesh Project       | (13,314)        | 23,054         | (9,808)          | -         | (68)             |
| DFID Covid Project            | -               | 10,246         | (10,365)         | -         | (119)            |
| True Colours Trust            | 17,360          | -              | -                | -         | 17,360           |
| Greece Project                | (1,806)         | -              | 1,806            | -         | -                |
| Bangladesh Project            | 978             | 115,758        | (2,025)          | -         | 114,711          |
| <b>Total restricted funds</b> | <b>31,750</b>   | <b>153,401</b> | <b>(53,280)</b>  | <b>-</b>  | <b>131,871</b>   |
|                               | -               |                |                  |           |                  |
| <b>Unrestricted funds</b>     | <b>147,498</b>  | <b>27,570</b>  | <b>(102,862)</b> | <b>-</b>  | <b>72,206</b>    |
| <b>Total funds</b>            | <b>179,248</b>  | <b>180,971</b> | <b>(156,142)</b> | <b>-</b>  | <b>204,077</b>   |

Transfers between funds represent amounts that the donor has agreed can now be used for unrestricted purposes.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### Notes to the financial statements

**For the year ended 31 March 2022**

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#### **12. Analysis of funds (continued)**

The grant from True Colours Costs is to support the work of the fundraising and international programmes manager.

A UK trust which wishes to remain anonymous is funding a palliative care development project in Bangladesh.

We worked with the Global Giving Foundation to support palliative care in the Ukraine

#### **13. Related party transactions**

WHPCA paid the cost of travel and expenses incurred by Trustees whilst fulfilling their duties to WHPCA. This includes the reimbursement of expenses totalling £0 (2022: £0).

Hospice UK, a UK registered charity, is a member of WHPCA and the Chief Operating Officer of Hospice UK - Craig Duncan - is a trustee of WHPCA.

Hospice UK also provided various services to WHPCA, including financial management and payroll services valued at £9,600 (2022: £8,333).

At the year end Hospice UK owed £7,634 to WHPCA (2022: £7,614).

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2023

### Notes to the financial statements

#### For the year ended 31 March 2022

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#### **13. Related party transactions (continued)**

During the year, Stephen Connor, the executive director, donated £450 to WHPCA (2021: £1,471)

During the year, the charity paid £1,200 in subscriptions to ehospice, a communications charity. (2022: £1,200). One trustees of WHPCA, Dr Julie Downing and it's executive director, Dr Stephen R Connor are also trustees of ehospice

During the year, the charity received £26,496 (2022: £2,550) from EAPC for staff recharges. The chair, Julie Ling, is chief exeucitve of EAPC.

During the year, the charity received £12,474 (2022: £6,976) from ICPCN for staff recharges and paid it £0 (£2,399) in consultancy fees. A trustee, Julie Downing, is chief exeucitve of the ICPCN

#### **14. Ultimate controlling party**

There is no overall controlling party.

**THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE**

England & Wales - Charity number 1127569

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# Accounts

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# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022



## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

The Worldwide Hospice Palliative Care Alliance Company Limited by Guarantee

Registered in England and Wales No 6735120

Registered Charity No 1127569

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

## TRUSTEES ANNUAL REPORT

### 1. ADMINISTRATIVE DETAILS

#### **Registered name**

The Worldwide Hospice Palliative Care Alliance  
Any other working name (or abbreviation): WHPCA

#### **Charity and Company Registration**

Registered charity: 1127569  
Company limited by guarantee in England and Wales: 6735120

#### **Principal and Registered Office**

Hospice House  
34-44 Britannia Street  
London  
WC1X 9JG

#### **Independent Examiner**

Helena Wilkinson  
Price Bailey LLP  
3<sup>rd</sup> Floor  
24 Old Bond St  
Mayfair  
London  
W1S 4AP

#### **Banker**

Coutts and Co.  
440 Strand  
London  
WC2 0QS

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

## Trustees (During Fiscal Year)

|                       |                                                                                                                                               |
|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Dr Julie Ling         | Chief Executive, European Association of Palliative Care<br><u>Appointed</u> : January 2015 (Chair from June 2018)                            |
| Dr Julia Downing      | Chief Executive, International Children's Palliative Care Network<br><u>Appointed</u> : March 2017 Unlimited Term                             |
| Dr Nisla Camano Reyes | President, Panamanian Association of Palliative Care<br><u>Appointed</u> : November 2018                                                      |
| Dr Emmanuel Luyirika  | Executive Director, African Palliative Care Association <u>Unlimited Term</u>                                                                 |
| Dr Ednin Hamzah       | Vice-Chair Asia Pacific Hospice Palliative Care Network <u>Re-appointed</u> : August 2017 Unlimited Term                                      |
| Mr. Craig Duncan, FCA | COO, Hospice UK<br><u>Appointed</u> : August 2016 <u>Re-appointed</u> Aug 2020                                                                |
| Dr Agnes Csikos       | Pecs-Baranya Hospice Foundation, Hungary<br><u>Appointed</u> : March 2017 <u>Re-appointed</u> Mar 2021                                        |
| Dr Richard Harding    | Kings College, Cicely Saunders Institute<br><u>Appointed</u> : August 2016 <u>Re-appointed</u> Mar 2020                                       |
| Dr Frank Brennen      | Physician<br><u>Appointed</u> : December 2016 <u>Re-appointed</u> Dec 2020                                                                    |
| Dr James Cleary       | Director and Walther Senior Chair of Supportive Oncology, Indiana University<br><u>Appointed</u> : December 2016 <u>Re-appointed</u> Dec 2020 |
| Ms. Maria Marroquin   | Administrator, Latin American Palliative Care Assoc.<br><u>Appointed</u> : August 2020 Unlimited Term                                         |
| Mr. Edo Banach, JD    | CEO and President<br>National Hospice and Palliative Care Organisation<br><u>Appointed</u> : October 2017 <u>Re-appointed</u> Aug 2021        |
| Dr Helena Davies      | Trustee with Palliative Care Needs<br><u>Appointed</u> : October 2017                                                                         |
| Ms Laurel Gillespie   | Executive Director, Canadian Hospice Palliative Care                                                                                          |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

|                       |                                                                                                 |
|-----------------------|-------------------------------------------------------------------------------------------------|
|                       | Association<br><u>Appointed:</u> December 2020                                                  |
| Dr Stephen Watiti     | Trustee with Palliative Care Needs<br><u>Appointed:</u> December 2018                           |
| Dr Savita Butola      | Secretary, Indian Association of Palliative Care<br><u>Appointed:</u> March 2020 Unlimited Term |
| Prof Yoshiyuki Kizawa | President, Japanese Society for Palliative Medicine<br><u>Appointed:</u> September 2020         |
| Prof Meera Agar       | Chair, Palliative Care Australia<br><u>Appointed:</u> September 2020                            |
| Dr Babe Gaosebale     | Botswana Ministry of Health<br><u>Appointed:</u> December 2020                                  |

## 2. STRUCTURE, GOVERNANCE AND MANAGEMENT

### Nature of Governing Document

The Worldwide Hospice Palliative Care Alliance is a charitable company limited by guarantee constituted on 28 October 2008 and governed by articles and memorandum of association which were last amended on 25 July 2017. The trustees are also directors of the charity for the purposes of the Companies Act.

### How the Charity is Constituted

The charity is an international non-governmental organization with trustees from each region of the world. There are currently 400 organizational members of the WHPCA from 103 countries. WHPCA members are not currently required to pay dues. The only voting members are the trustees.

### The Board of Trustees

Trustees are elected and appointed according to the byelaws, which identify the number of trustees from each world region. Qualified candidates for election to the Board are identified with our regional members and are elected by current trustees.

Most trustees retire from office after four years. Retiring trustees can be reappointed but a trustee who has served for two consecutive terms must take a break from office and may not be reappointed for one year. Trustees that represent named organizations in the byelaws can serve unlimited terms.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

The trustees delegate day-to-day management of the charity to the executive director, Dr Stephen Connor.

The trustees set the remuneration of key management personnel based on market rates within the sector.

## 3. PUBLIC BENEFIT

We have referred to Charity Commission's general guidance on public benefit when reviewing our aims and objectives and in planning our future activities. In particular, the trustees consider how planned activities will contribute to the aims and objectives they have set. Our achievements and performance in section 5 show how we have met the public benefit requirements.

The Worldwide Hospice Palliative Care Alliance (WHPCA) is an international nongovernmental organisation (INGO) focusing exclusively on hospice and palliative care development worldwide. Its members are national and regional hospice and palliative care organisations and affiliate organisations supporting hospice and palliative care and supporters of hospice and palliative care worldwide.

Our vision is a world with universal access to hospice and palliative care. Our mission is "to bring together the global palliative care community to improve well-being and reduce unnecessary suffering for those in need of palliative care in collaboration with the regional and national hospice and palliative care organisations and other partners."

Hospice and palliative care services relieves the pain and suffering of patients with life-limiting illness, supporting them and those around them physically, emotionally, and spiritually. Care for patients can be in a variety of settings including their own home, at the hospice, in a hospital or in the community and can be for days, months or years.

We are here to support national hospice and palliative care organisations in promoting and developing hospice and palliative care in their countries. In the following sections, we aim to give you a snapshot of the key activities we have undertaken this year to meet our charitable objectives. This review demonstrates how our work is carried out for public benefit and how we have supported our members and others to provide and develop palliative care.

## 4. OBJECTIVES AND ACTIVITIES

The objectives of the charity are:

- to facilitate and promote the relief, care and treatment of the sick, especially the chronically and incurably ill and the dying, and the support and care of their families and carers and of the bereaved, in particular by:

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

- improving access to, and the quality of, palliative care, worldwide and improving the efficiency and efficacy of institutions concerned with the charitable provision of palliative care; and
- providing or facilitating education and training in palliative care and increasing awareness and understanding among the general public of the values, principles and practice of hospice and palliative care.

The main activities undertaken in relation to those purposes (from 1 April 2021 to 31 March 2022) are set out in section 5 below.

## 5. ACHIEVEMENTS AND PERFORMANCE

### Secretariat and Governance

This year, due to the COVID-19 pandemic there were no face-to-face board meetings. However, the board did meet by teleconference 4 times during the year in March, June, September, and December. The executive committee held teleconference meetings between board calls..

Our first executive director, Dr Stephen Connor, was originally appointed in January 2016, and continues to lead the organization to present.

### Risk Management

The trustees, together with the executive director and staff, identify risks to which the Worldwide Hospice Palliative Care Alliance is exposed and ensure that appropriate controls and systems are in place to monitor and manage those risks. A risk register is maintained and is reviewed by staff bi-weekly, by the executive committee quarterly, and by the full board annually. Current risks include securing income, dealing with potential economic downturn, ensuring compliance with UK General Data Protections Rules, ensuring our partner organizations are compliant with all safeguarding and grant funding rules and procedures, and ensuring on-line donations and grants are accurately accounted for.

### Communications

WHPCA publishes the international edition of ehospice (a separate charity) which supported WHPCA programmes and advocacy activity by reporting on WHPCA programmes and efforts to achieve Universal Health Coverage and palliative care services for those who need it as part of the WHO General Programme of Work, access to medications, rights of older persons, and advocacy at the World Health Organization Executive Board Meeting and the World Health Assembly.

ehospice international published 93 (2020/21 43) articles with stories from around the world during this fiscal year. The categories were represented as follows:

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Care — 28

Community Engagement — 11

Education— 16

Leadership — 5

Opinion — 7

Policy — 5

People and places – 9

In the media – 6

Research – 5

Must read - 1

The International edition of ehospice reported 95,503 sessions an improvement from the previous year's 44,675 sessions, 81,736 new users and 118,693 page views by 84,197 users over the reporting period. The increased number of articles posted had an impact on this figure.

The WHPCA has continued to build up its communications tools including:

- Our monthly e-newsletter which is circulated to over 210 member recipients and 2,928 newsletter subscriber recipients = a total of 3,186 in over 120 countries with a slight decrease from the previous year.
- We have been managing and updating our WHPCA website with regular news updates relating to hospice and palliative care worldwide. There were 52,000 sessions and 121,649 page views and 95,591 unique page views by 40,000 users on the WHPCA website during the reporting period.
- We have increased our engagement on social media mechanisms, including Facebook, and Twitter. We currently, as of 1<sup>st</sup> July 2021 have total page likes on Facebook, and 5,747 followers on Facebook. WHPCA also has 7,524 followers on Twitter. We also have re-launched our LinkedIn page and have 261 followers and our Instagram account where we have 273 followers.
- World Hospice and Palliative Care Day took place despite being in the midst of a global pandemic on 9 October 2021. The theme was: **“Leave No One Behind - Equal access to palliative care.”** This highlighted need for equity in access to palliative care and everyone deserves the best care possible regardless of who they are or where they live in the world. Palliative care is yet to be fully integrated into the healthcare system of most countries especially the low and middle-income countries. The COVID-19 pandemic only exacerbated the challenges faced in the healthcare system. Materials were produced and utilised around the world and 67 events were registered on the website from 39 different countries down from 42 countries last year which was inevitable due to the pandemic but showed the

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resilience of palliative care providers and agility to find new ways to hold events, many of them being virtual.

- WHPCA Communications continued to provide support to the OSF-funded direct stakeholder project and the Joffe Charitable Trust project using digital media and lived experience spokespersons to increase demand and access to palliative care in Ethiopia and South Africa, the Compassionate Korail project in Bangladesh, and the implementation of the UK Aid Direct Project in Bangladesh.

## **We influence policy at the highest levels**

### **Advocacy**

This year we continued to focus our advocacy around integrating palliative care as part of health system strengthening and Universal Health Coverage reforms. We continued to work together with palliative care advocates and palliative care allies worldwide to achieve our aims for palliative care for all as part of UHC, with a particular focus on enabling the voice of people with lived experience of palliative care to be heard. We continue to work with WHO, as a non-state actor in official relations, and develop strong, collaborative non-state actor partnerships to deliver our objectives.

### **Our key activities through the year include:**

- We contributed to high level events ensuring the voice of palliative care, and more specifically, people with palliative care needs was heard. This included the June 2021 World Health Assembly including the civil society pre-consultation and the January 2022 Executive Board.
- We have worked to support the implementation of the WHO Palliative Care Action Plan through active engagement on the WHO palliative care working group and with partners, including:
  - Quarterly meetings with the WHO Internal Palliative Care Working Group
  - Membership in and support of:
    - The WHO HIV Quality of Care Working Group
    - The WHO Global Network for Long Term Care
    - The WHO Cervical Cancer Elimination program
    - The WHO Childhood Cancer Initiative
    - The WHO Civil Society Working Group on NCD's and Pandemic Readiness
- Our project in Kenya to support the integration of UHC was disrupted due to COVID. We found a resolution for this disruption and will begin implementation in 2022-2023.
- As part of World Hospice and Palliative Care Day we published a new report on Equity in Palliative Care and ensured key messaging reflected the voices of people with lived experience globally on palliative care equity issues.

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- We delved deeper into the economics of palliative care – requesting support for palliative care in the WHO Council on the Economics for all Commission and co-publishing work on palliative care and economics.
- We worked with the Open Society Foundations to co-publish articles on global work supported by OSF to advance palliative care, including lessons learned.

## **We are building a diverse and strong movement demanding care for all**

- Our membership of the UK working group on NCDs including working collaboratively on a project to research and share the impact of NCDs financing on people with lived experience globally, including those with palliative care needs. This led to a meeting with the UK government civil servants on the findings, policy recommendations and the way forward.
  - We worked collaboratively with UK based NGO colleagues on a survey on the life course approach and will publish results in 2022-2023.
- We have delved deeper into work on inequalities in palliative care including delivering sessions on inequality at the global Fellowship led by the Institute of Palliative Medicine (Kerala), St Christopher's Hospice and BSMMU.
  - We have continued to focus our work on targeted equity issues in palliative care integrating it across our advocacy, communications and programming including relating to gender and people with disabilities.
  - We have continued our support of palliative care in humanitarian crisis by launching a fundraising platform for those affected by the crisis in Ukraine, and working collaborative with others to improve access to palliative care.
- Our WHO/WHPCA *Global Atlas of Palliative Care at the End of Life* (2014) has now been downloaded over 160,000 times. A new 2<sup>nd</sup> edition of the *Global Atlas* with WHO launched in October 2020 and has so far been downloaded over 68,000 times.  
<http://www.thewhpc.org/resources/global-atlas-on-end-of-life-care>

## **Organisational Development and Programme Support**

In Bangladesh, the next phase of our funded work, ***Building an integrated age-attuned model of supportive palliative care in Bangladesh*** project started in March. The project is implemented by a consortium of local partners (AYAT and BSMMU) and international partners (St. Christophers and the WHPCA). It aims to make available supportive palliative care integrating government and community health services in one Upazila Health Complex in Narayanganj, reaching at least 950

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people with palliative care needs in their homes or at the outpatient department. To achieve this reach, training and mentoring will significantly increase the pool of skilled and supported health workers available and providing patient-centred care, and the project will mobilise and support community-based organisations, family members and community volunteers to engage in palliative care. At the national level, the project advocates for and provides technical support to the development of a national policy framework and budget allocation for palliative care, as well as the inclusion of palliative care in Universal Health Coverage.

WHPCA, in partnership with Alzheimer's Disease International and the World Innovation Summit on Health (WISH), has been assisting the government of Qatar to expand its capacity to deliver palliative care to older non-cancer patients. A needs assessment and initial palliative care education program was done and a report will be released at the WISH summit this fall. An expanded training program and policy roadmap is planned for the coming year.

WHPCA has been providing technical support to the government of Greece in developing a national strategy for development and implementation of palliative care. This year the project remained in hiatus due to the COVID-19 pandemic but should restart.

WHPCA and other partner organizations have been providing in-kind technical support to the Hospice and Palliative Professionals Association in the Russian Federation including on-line teaching, case conferences, and professional development throughout the year. The war in Ukraine has limited what can be done going forward but we continue to support palliative care professionals throughout the Eurasia region with our partner organization, the American Eurasia Cancer Alliance.

WHPCA together with our partner INGO's the International Children's Palliative Care Network, the IAHP, and a network for palliative care in Humanitarian Emergencies developed and carried out 14 global webinars addressing the COVID-19 Pandemic's impact on palliative care worldwide. This webinar series reached over 6,716 attendees on-line live and asynchronously from over 50 countries.

The WHPCA Palliative Care Toolkit and training manual continues to be a useful resource for those developing palliative care in limited resource settings at <http://www.thewhpc.org/resources/memberresources/national-palliative-care-strategies/>. An updated version of the toolkit is now available. The toolkit & training manuals have been downloaded over 70,600 times.

The WHPCA continues to be focused on support of hospice and palliative care development in low and middle-income countries. We received funding for the above programme to support palliative care delivery in Bangladesh, have developed strong indigenous palliative care models with local members and are working on funding for further programmes.

Our co-edited book *Building Integrated Palliative Care Programs and Services* (2017) that is free to download <http://www.thewhpc.org/resources/building-integrated-palliative-care-programs-and-services> and has been downloaded over 12,500 times.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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## 6. FINANCIAL REVIEW

Income for the finance year was £180,971 (2020/21: £326,925), including significant grants from the Open Society Foundation, the US Cancer Pain Relief Committee, the UK Department for International Development's UK Aid Direct program, Anonymous, Noncommunicable Disease Alliance, and Global Giving Foundation. We are extremely grateful to them for their support. Expenditure for the year totalled £156,142 (2020/21: £309,153), as a result of increased programme delivery costs.

During the year WHPCA recorded net income of £24,829 (2020/21: (£17,772) due to commitments to spend funds from the previous fiscal year. There was a large increase in unrestricted general funds expenditure of -£75,292 (2020/21: £17,772) that brings total unrestricted funds to £72,206 (2020/21: £147,498). Total funds carried forward at the end of the fiscal year were £204,077 (2020/21: £179,248).

## 7. RESERVES

The charity holds limited free reserves at the end of the year. The trustees aim to hold reserves of at least £50,000, based on an analysis of our expenditure commitments, charitable need and the security of our income streams. As the current free reserves are £72,206, the trustees believe this level of reserves is appropriate to remain a going concern for the next twelve months. COVID-19 has not had a negative impact on our operations and reserves this year, though only through March. Our budget and cash forecasts we anticipate ending next fiscal year with slightly less than £50,000 in free reserves.

## 8. PLANS FOR FUTURE PERIODS

The WHPCA will continue to work toward achieving its mission through the implementation of our new three-year strategic plan (2022-25). Currently the five strategic areas of focus are:

1. **INFLUENCING CHANGE:** We will reduce suffering by including palliative care in universal health coverage basic packages of care in low-and-middle income countries
2. **TRACKING PROGRESS:** We will ensure that palliative care progress is tracked and monitored by policy makers using standardized, tested, and reliable national and international indicators
3. **BUILDING A MOVEMENT:** We will work to build a movement of people with palliative care needs (PWPCN), carers, civil society, government, and academia to improve understanding and demand for palliative as part of Universal Health Coverage
4. **BUILDING MODELS OF Palliative Care (PC):** We will work with our members and partners to continue to build models of indigenous PC in low and middle-income

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**countries to serve as 'beacons' of PC provision with funding and technical assistance to increase access to essential palliative care as part of Universal Health Coverage**

- 5. GROWING A GLOBAL ALLIANCE: We will grow a strong regional and national and international member driven global alliance working collaboratively in meaningful partnership with others.**

## STATEMENT OF TRUSTEES' RESPONSIBILITIES

The trustees (who are also directors of Worldwide Hospice Palliative Care Alliance for the purposes of company law) are responsible for preparing the Report of the Trustees 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 which give a true and fair view of the state of affairs of the charitable company and its subsidiaries and of the incoming resources and application of resources, including the income and expenditure, of the charitable company and its subsidiaries for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently
- observe the methods and principles in the Charities Statement of Recommended

Practice 2019 (FRS102)

- make judgements and 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 business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and its subsidiaries 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.

The trustees are responsible for the maintenance and integrity of the corporate and financial

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislations in other jurisdictions.

The Report of the Trustees has been prepared in accordance with the special provisions applicable to companies' subject to the small companies' regime.

## **Independent examiner**

Price Bailey LLP was re-appointed as the charity's independent examiner for this fiscal year.

Approved by the trustees on 03 November 2022 and signed on their behalf by



Dr Julie Ling

Chair, WHPCA

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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## INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

I report to the charity trustees on my examination of the accounts of the company for the year ended 31 March 2022 which are set out on pages 14 to 26.

### Responsibilities and basis of report

As the charity trustees of the company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your company's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

### Independent examiner's statement

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

1. accounting records were not kept in respect of the company as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination; or
4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities [applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)].

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



Helena Wilkinson FCA

Date: 08 November 2022

For and on behalf of Price Bailey LLP  
3rd Floor, 24 Old Bond St, Mayfair, London W1S 4AP

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE ANNUAL REPORT AND FINANCIAL STATEMENT

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The Worldwide Hospice Palliative Care Alliance

**Statement of Financial Activities**  
**(Incorporating an income and expenditure account)**

**For the year ended 31 March 2022**

|                                          |      | Unrestricted         | Restricted            | 2022                  | 2021           |
|------------------------------------------|------|----------------------|-----------------------|-----------------------|----------------|
|                                          | Note | £                    | £                     | Total                 | Total          |
|                                          |      |                      |                       | £                     | £              |
| <b>Income</b>                            |      |                      |                       |                       |                |
| Donations and legacies                   | 2a   | 27,570               | 153,401               | 180,971               | 326,925        |
| Income from charitable activities        | 2b   | -                    | -                     | -                     | -              |
| <b>Total income</b>                      |      | <u>27,570</u>        | <u>153,401</u>        | <u>180,971</u>        | <u>326,925</u> |
| <b>Expenditure</b>                       |      |                      |                       |                       |                |
| Raising funds                            | 3    | -                    | -                     | -                     | 1,929          |
| Charitable activities                    | 3    | 102,862              | 53,280                | 156,142               | 307,224        |
| <b>Total Expenditure</b>                 |      | <u>102,862</u>       | <u>53,280</u>         | <u>156,142</u>        | <u>309,153</u> |
| <b>Net income / (expenditure) before</b> |      | <b>(75,292)</b>      | <b>100,121</b>        | <b>24,829</b>         | <b>17,772</b>  |
| Transfers between funds                  |      | -                    | -                     | -                     | -              |
| <b>Net income / (expenditure) after</b>  |      | <b>(75,292)</b>      | <b>100,121</b>        | <b>24,829</b>         | <b>17,772</b>  |
| <b>Reconciliation of funds</b>           |      |                      |                       |                       |                |
| Total funds brought forward              |      | <u>147,498</u>       | <u>31,750</u>         | <u>179,248</u>        | <u>161,476</u> |
| <b>Total funds carried forward</b>       | 11   | <u><b>72,206</b></u> | <u><b>131,871</b></u> | <u><b>204,077</b></u> | <u>179,248</u> |

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### The Worldwide Hospice Palliative Care Alliance

#### Balance sheet

**As at the 31 March 2022**

|                                      |           | 2022           | 2021    |
|--------------------------------------|-----------|----------------|---------|
|                                      | Note      | £              | £       |
| <b>Tangible Fixed Assets</b>         | <b>8</b>  | <b>225</b>     | 675     |
| <b>Current assets</b>                |           |                |         |
| Cash at bank and in hand             |           | <b>197,849</b> | 160,215 |
| Debtors                              | <b>9</b>  | <b>12,603</b>  | 19,718  |
|                                      |           | <b>210,452</b> | 179,933 |
| <b>Liabilities</b>                   |           |                |         |
| Creditors: amounts due within 1 year | <b>10</b> | <b>(6,601)</b> | (1,360) |
| <b>Net current assets</b>            |           | <b>203,852</b> | 178,573 |
| <b>Net assets</b>                    |           | <b>204,077</b> | 179,248 |
| <b>Funds</b>                         |           |                |         |
| Restricted funds                     |           | <b>131,871</b> | 31,750  |
| Unrestricted funds                   |           | <b>72,206</b>  | 147,498 |
| <b>Total charity funds</b>           | <b>11</b> | <b>204,077</b> | 179,248 |

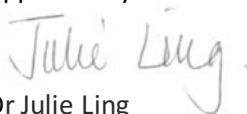
The notes on pages 16 to 26 form part of these financial statements.

For the year ending 31 March 2022, the company was entitled to exemption from audit under section 477 of the Companies Act 2006

Directors' responsibilities:

- the members have not required the company to obtain an audit of its account for the year in question in accordance with section 476;
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the

Approved by the trustees on 03 November 2022 and signed on their behalf by

  
Dr Julie Ling  
Chair

**Company number: 6735120**

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### Notes to the financial statements

#### For the year ended 31 March 2022

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#### 1. Accounting policies

##### a) Basis of preparation

The financial statements 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), and the Companies Act 2006. The functional currency is pounds sterling.

The charity 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 notes.

##### b) Company status

The charity is a company limited by guarantee. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

##### c) 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 other purposes.

Restricted funds are to be used for specific purposes as laid down by the donor.

##### d) Income

Voluntary income including donations, gifts and grants that provide core funding or are of general nature are recognised where there is entitlement, probability of receipt and the amount can be measured with sufficient reliability.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### 1. Accounting policies (continued)

#### **e) Expenditure**

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

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly allocated to either charitable or governance costs, they have been apportioned based on an estimate of the time devoted to the respective areas.

#### **f) Going Concern**

The financial statements have been prepared on a going concern basis as the trustees believe that no material uncertainties exist. The trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements. The budgeted income and expenditure is sufficient with the level of reserves for the charity to be able to continue as a going concern, and income received up to the date of signing these accounts suggests the budget will be met.

#### **g) Debtors**

Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid net of any trade discounts due. Accrued income and tax recoverable is included at the best estimate of the amounts receivable at the balance sheet date.

#### **h) Creditors**

Creditors are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors are normally recognised at their settlement amount.

#### **i) Cash at bank and in hand**

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

# **THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE**

## **ANNUAL REPORT AND FINANCIAL STATEMENT**

**31 March 2022**

### **1. Accounting policies (continued)**

#### **j) Pension**

The company operate a defined contribution plan for the benefit of its employees. Contributions are expensed as they become payable.

#### **k) Financial instruments**

The charity only has financial assets and liabilities that qualify as basic financial instruments, which are all measured at cost.

#### **l) Significant estimates and judgements**

No significant judgements, accounting policies or assumptions have been made by management in applying the charity's accounting policies.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

### Notes to the financial statements

For the year ended 31 March 2022

## 2. Income

### a) Donations and Legacies

|                                           |               |                | <b>2022</b>    |              |                | 2021           |
|-------------------------------------------|---------------|----------------|----------------|--------------|----------------|----------------|
|                                           | Unrestricted  | Restricted     | Total          | Unrestricted | Restricted     | Total          |
|                                           | £             | £              | £              | £            | £              | £              |
| <b>Grants from foundations and trusts</b> |               |                |                |              |                |                |
| Grant from USCP                           |               | 4,343          | <b>4,343</b>   | -            | 42,506         | <b>42,506</b>  |
| Grant from UK DFID                        |               | 23,054         | <b>23,054</b>  | -            | 108,205        | <b>108,205</b> |
| Grant from Open Society Foundations       |               |                | -              | -            | 118,459        | <b>118,459</b> |
| Grant from Anonymous Foundation           |               | 115,758        | <b>115,758</b> | -            | 35,407         | <b>35,407</b>  |
| Grant from Global Giving Foundation       | 4,741         |                | <b>4,741</b>   | -            |                | -              |
| Grant from Stavros Niachos Foundation     |               |                | -              | -            | 17,635         | <b>17,635</b>  |
| Grant from NCDA                           |               | 10,246         | <b>10,246</b>  | -            | -              | -              |
|                                           | 4,741         | 153,401        | <b>158,142</b> | -            | 322,212        | <b>322,212</b> |
|                                           |               |                | -              |              |                | -              |
| Income from related parties 13            | 19,756        |                | <b>19,756</b>  | 5,663        | -              | <b>5,663</b>   |
| Exchange gains/(losses)                   | 2,502         |                | <b>2,502</b>   | (1,385)      | -              | <b>(1,385)</b> |
| Individual donations                      | 571           |                | <b>571</b>     | 435          | -              | <b>435</b>     |
| <b>Total</b>                              | <b>27,570</b> | <b>153,401</b> | <b>180,971</b> | <b>4,713</b> | <b>322,212</b> | <b>326,925</b> |

### b) Income from charitable activities

|                                     |              |            | <b>2021</b> |              |            | 2020     |
|-------------------------------------|--------------|------------|-------------|--------------|------------|----------|
|                                     | Unrestricted | Restricted | Total       | Unrestricted | Restricted | Total    |
|                                     | £            | £          | £           | £            | £          | £        |
| Provision of communications service | -            | -          | -           | -            | -          | -        |
| Provision of consultancy services   | -            | -          | -           | -            | -          | -        |
| <b>Total</b>                        | <b>-</b>     | <b>-</b>   | <b>-</b>    | <b>-</b>     | <b>-</b>   | <b>-</b> |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### Notes to the financial statements

For the year ended 31 March 2022

### 3. Expenditure

|                                         | 2022           |               |                | 2021           |               |                |
|-----------------------------------------|----------------|---------------|----------------|----------------|---------------|----------------|
|                                         | Direct Costs   | Support Costs | Total          | Direct Costs   | Support Costs | Total          |
|                                         | £              | £             | £              | £              | £             | £              |
| <b>Raising funds</b>                    |                |               |                |                |               |                |
| Cost of generating donations and grants | -              | -             | -              | 1,929          | -             | 1,929          |
| <b>Charitable Activities</b>            |                |               |                |                |               |                |
| General Capacity Building               | 94,540         | 22,121        | 116,661        | 84,135         | 14,904        | 99,039         |
| NCDCA Project                           | 10,365         | -             | 10,365         | -              | -             | -              |
| Bangladesh Project (Anonymous funder)   | 1,525          | 500           | 2,025          | 32,389         | 5,129         | 37,518         |
| Bagladesh Project (DFID funding)        | 9,967          | (160)         | 9,807          | 60,321         | 1,002         | 61,323         |
| Greece Project                          | -              | (1,806)       | (1,806)        | 1,000          | 3,465         | 4,465          |
| Worldwide COVID response (DFID funding) | -              | -             | -              | 41,528         | 3,286         | 44,814         |
| Joffe Foundation project                | -              | -             | -              | 29,802         | 3,231         | 33,033         |
| USCP Project                            | 18,706         | 384           | 19,090         | 23,348         | 3,684         | 27,032         |
|                                         | <b>135,103</b> | <b>21,039</b> | <b>156,142</b> | <b>272,523</b> | <b>34,701</b> | <b>307,224</b> |
| <b>Total Expenditure</b>                | <b>135,103</b> | <b>21,039</b> | <b>156,142</b> | <b>274,452</b> | <b>34,701</b> | <b>309,153</b> |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

### Notes to the financial statements

**For the year ended 31 March 2022**

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### 3. Expenditure (continued)

#### b) Analysis of Support Costs

|                                      | 2022                 | 2021                 |
|--------------------------------------|----------------------|----------------------|
|                                      | £                    | £                    |
| <b>Governance</b>                    |                      |                      |
| Trustee Travel                       | -                    | 148                  |
| Tax and Independent Examination      | 1,140                | 1,020                |
|                                      | <u>1,140</u>         | <u>1,168</u>         |
| <b>Other Support Costs</b>           |                      |                      |
| Travel, accommodation & subsistence  | 179                  | -                    |
| Accountancy and HR                   | 10,600               | 9,970                |
| Miscellaneous                        | 3,250                | 5,312                |
| General advocacy                     | -                    | 11,520               |
| Communications Costs                 | 1,574                | 3,120                |
| Gifts in Kind - staff time for comms | 12                   |                      |
| Depreciation                         | 450                  | 225                  |
| Website                              | 3,846                | 3,386                |
| <b>Total Support Costs</b>           | <u><u>21,039</u></u> | <u><u>34,701</u></u> |

Support costs have been allocated based on an estimate of time spent.

### 4. Net income/(expenditure) for the year

|                                            |         |       |
|--------------------------------------------|---------|-------|
| This is stated after charging / crediting: | 2022    | 2021  |
|                                            | £       | £     |
| Net losses/(gains) on foreign exchange     | (2,502) | 1,385 |
| Independent Examiners fees                 | 1,140   | 900   |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### Notes to the financial statements

**For the year ended 31 March 2022**

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#### 5. Wages and Salaries

|                    | 2022          | 2021           |
|--------------------|---------------|----------------|
|                    | £             | £              |
| Salaries           | 85,027        | 112,474        |
| National Insurance | -             | 955            |
| Pension            | 2,035         | 2,429          |
|                    | <u>87,062</u> | <u>115,858</u> |

No employee earned more than £60,000 in the current or prior year.

The key management personnel for the year comprise the trustees. The charity's trustees were not paid and did not receive any benefits from employment with WHPCA in the year (2021: £nil). They were reimbursed expenses during the year as stated in note 11.

#### b) Staff numbers

The average monthly head count was 4 (2021: 4)

|                                            | 2022     | 2021     |
|--------------------------------------------|----------|----------|
|                                            | No       | No       |
| At 31 March, the head-count was as follows |          |          |
| Raising funds                              | -        | -        |
| Charitable activities                      | 4        | 4        |
| Total                                      | <u>4</u> | <u>4</u> |

#### 6. Pension

WHPCA contributes towards defined contribution pension plans for employees. Pension costs are recognised when they fall due.

The costs of the defined contribution scheme are included with the associated staff costs and allocated therefore to raising funds and charitable activities. £213 (2021 - £360) was owing to the pension scheme at the year end.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

### Notes to the financial statements For the year ended 31 March 2022

#### 7. Taxation

WHPCA is exempt from corporation tax as all its income is applied for charitable purposes.

#### 8. Tangible Fixed Assets

|                                              |              |
|----------------------------------------------|--------------|
|                                              | IT equipment |
|                                              | £            |
| Cost at the start of the year                | 2,658        |
| Additions                                    | -            |
| <b>At the end of the year</b>                | <b>2,658</b> |
| Depreciation at the start of the year        | 1,983        |
| Charge for the year                          | 450          |
| <b>At the end of the year</b>                | <b>2,433</b> |
| <b>Net book value at the end of the year</b> | <b>225</b>   |
| Net book value at the start of the year      | 675          |

#### 9. Debtors

|                             |               |               |
|-----------------------------|---------------|---------------|
|                             | 2022          | 2021          |
|                             | £             | £             |
| Other debtors               | 4,989         | -             |
| Amounts due from Hospice UK | 7,614         | 19,718        |
|                             | <b>12,603</b> | <b>19,718</b> |

#### 10. Creditors: Amounts falling due in less than one year

|                 |              |              |
|-----------------|--------------|--------------|
|                 | 2022         | 2021         |
|                 | £            | £            |
| Trade creditors | 5,388        | 360          |
| Accruals        | 1,213        | 1,000        |
|                 | <b>6,601</b> | <b>1,360</b> |

#### 11. Analysis of net assets between funds

|                       |                |                |                |
|-----------------------|----------------|----------------|----------------|
|                       |                |                | 2022           |
|                       | Unrestricted   | Restricted     | Total          |
|                       | £              | £              | £              |
| Tangible fixed assets | 225            | -              | 225            |
| Net current assets    | 71,981         | 131,871        | 203,852        |
|                       | <b>72,206</b>  | <b>131,871</b> | <b>204,077</b> |
|                       |                |                | 2021           |
|                       | Unrestricted   | Restricted     | Total          |
|                       | £              | £              | £              |
| Tangible fixed assets | 675            | -              | 675            |
| Net current assets    | 146,823        | 31,750         | 178,573        |
|                       | <b>147,498</b> | <b>31,750</b>  | <b>179,248</b> |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

### Notes to the financial statements

For the year ended 31 March 2022

#### 12. Analysis of funds

An analysis of restricted funds is shown below

|                               | 1 April<br>2021 | Income         | Expenditure      | Transfers | 31 March<br>2022 |
|-------------------------------|-----------------|----------------|------------------|-----------|------------------|
|                               | £               | £              | £                | £         | £                |
| <b>Restricted funds</b>       |                 |                |                  |           |                  |
| OSF Capacity Building         | 13,798          | -              | (13,798)         | -         | -                |
| USCP Project                  | 14,734          | 4,343          | (19,090)         | -         | (13)             |
| Joffe Charitable Trust        | -               | -              | -                | -         | -                |
| DFID Bangladesh Project       | (13,314)        | 23,054         | (9,808)          | -         | (68)             |
| Grant from NDA                | -               | 10,246         | (10,365)         | -         | (119)            |
| True Colours Trust            | 17,360          | -              | -                | -         | 17,360           |
| Greece Project                | (1,806)         | -              | 1,806            | -         | -                |
| Bangladesh Project            | 978             | 115,758        | (2,025)          | -         | 114,711          |
| <b>Total restricted funds</b> | <b>31,750</b>   | <b>153,401</b> | <b>(53,280)</b>  | <b>-</b>  | <b>131,871</b>   |
|                               | -               |                |                  |           |                  |
| <b>Unrestricted funds</b>     | <b>147,498</b>  | <b>27,570</b>  | <b>(102,862)</b> | <b>-</b>  | <b>72,206</b>    |
| <b>Total funds</b>            | <b>179,248</b>  | <b>180,971</b> | <b>(156,142)</b> | <b>-</b>  | <b>204,077</b>   |

|                               | 1 April<br>2020 | Income         | Expenditure      | Transfers        | 31 March<br>2021 |
|-------------------------------|-----------------|----------------|------------------|------------------|------------------|
|                               | £               | £              | £                | £                | £                |
| <b>Restricted funds</b>       |                 |                |                  |                  |                  |
| OSF Capacity Building         | 107,492         | 118,459        | (99,041)         | (113,112)        | 13,798           |
| USCP Project                  | (740)           | 42,506         | (27,032)         | -                | 14,734           |
| Joffe Charitable Trust        | 33,033          | -              | (33,033)         | -                | -                |
| DFID Bangladesh Project       | (15,382)        | 63,391         | (61,323)         | -                | (13,314)         |
| DFID Covid Project            | -               | 44,814         | (44,814)         | -                | -                |
| True Colours Trust            | 17,360          | -              | -                | -                | 17,360           |
| Greece Project                | (14,976)        | 17,635         | (4,465)          | -                | (1,806)          |
| Bangladesh Project            | 3,087           | 35,407         | (37,516)         | -                | 978              |
| <b>Total restricted funds</b> | <b>129,874</b>  | <b>322,212</b> | <b>(307,224)</b> | <b>(113,112)</b> | <b>31,750</b>    |
| <b>Unrestricted funds</b>     | <b>31,602</b>   | <b>4,713</b>   | <b>(1,929)</b>   | <b>113,112</b>   | <b>147,498</b>   |
| <b>Total funds</b>            | <b>161,476</b>  | <b>326,925</b> | <b>(309,153)</b> | <b>-</b>         | <b>179,248</b>   |

Transfers between funds represent amounts that the donor has agreed can now be used for unrestricted purposes.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

### 12. Analysis of funds (continued)

OSF have provided annual grants for capacity building of the organisation for several years.

The project funded by the US Cancer Pain Relief Committee is to support WHPCA's technical assistance of the WHPO in implementing the PC resolution.

The grant from the Joffe Charitable Trust is to support a project entitled "Using digital media and direct stakeholder voices to increase demand for and access to palliative care in two Anglophone

The grant from True Colours Costs is to support the work of the fundraising and international programmes manager.

We are undertaking two palliative care development projects in Bangladesh. One is funded by DFID and the other by an anonymous trust.

DFID are also funding our work in response to the COVID-19 crisis

The Stavros Niarchos Foundation is funding a project to develop palliative care provision in Greece

A UK trust which wishes to remain anonymous is funding a palliative care development project in Bangladesh. The second stage of this project began in April 2018 and is expected to last two years.

### 13. Related party transactions

WHPCA paid the cost of travel and expenses incurred by Trustees whilst fulfilling their duties to WHPCA. This includes the reimbursement of expenses totalling £0 (2021: £148).

Hospice UK, a UK registered charity, is a member of WHPCA and the Chief Operating Officer of Hospice UK - Craig Duncan - is a trustee of WHPCA.

Hospice UK also provided various services to WHPCA, including financial management and payroll services valued at £8,833 (2021: £9,300).

At the year end Hospice UK owed £7,614 to WHPCA (2021: £19,718).

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2022

### 13. Related party transactions (continued)

During the year, Stephen Connor, the executive director, donated £1,471 to WHPCA (2021: nil)

During the year, the charity paid £1,200 in subscriptions to ehospice, a communications charity. (2021: £1,200). Two trustees of WHPCA and its executive director are also trustees of ehospice

During the year, the charity received £2,550 (2021: £0) from EAPC for staff recharges. The chair, Julie Ling, is chief executive of EAPC.

During the year, the charity received 6,976 (2021: £0) from ICPCN for staff recharges and paid it £2,399 (2021: nil) in consultancy fees. A trustee, Julie Downing, is chief executive of the ICPCN

### 14. Ultimate controlling party

There is no overall controlling party.

**THE WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE**

England & Wales - Charity number 1127569

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# Accounts

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# **ANNUAL REPORT AND FINANCIAL STATEMENT**

**31 March 2021**

The Worldwide Hospice Palliative Care Alliance Company Limited by Guarantee

Registered in England and Wales No 6735120

Registered Charity No 1127569

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

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### TRUSTEES ANNUAL REPORT

#### 1. ADMINISTRATIVE DETAILS

##### **Registered name**

The Worldwide Hospice Palliative Care Alliance

Any other working name (or abbreviation): WHPCA

##### **Charity and Company Registration**

Registered charity: 1127569

Company limited by guarantee in England and Wales: 6735120

##### **Principal and Registered Office**

Hospice House

34-44 Britannia Street

London

WC1X 9JG

##### **Independent Examiner**

Helena Wilkinson

Price Bailey LLP

3<sup>rd</sup> Floor

24 Old Bond St

Mayfair

London

W1S 4AP

##### **Banker**

Coutts and Co.

440 Strand

London

WC2 0QS

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### Trustees (During Fiscal Year)

|                       |                                                                                                                   |
|-----------------------|-------------------------------------------------------------------------------------------------------------------|
| Dr Julie Ling         | Chief Executive, European Association of Palliative Care<br><u>Appointed:</u> January 2015 (Chair from June 2018) |
| Dr Julia Downing      | Chief Executive, International Children's Palliative Care Network<br><u>Appointed:</u> March 2017                 |
| Dr Nisla Camano Reyes | President, Panamanian Association of Palliative Care<br><u>Appointed:</u> November 2018                           |
| Dr Zipporah Ali       | Executive directive, Kenya Hospices and Palliative Care Association<br><u>Re-appointed:</u> Aug 2016              |
| Dr Emmanuel Luyirika  | Executive Director, African Palliative Care Association<br><u>Re-appointed:</u> Aug 2016                          |
| Dr Ednin Hamzah       | Vice-Chair Asia Pacific Hospice Palliative Care Network<br><u>Re-appointed:</u> August 2017                       |
| Mr. Craig Duncan, FCA | COO, Hospice UK<br><u>Appointed:</u> August 2016                                                                  |
| Dr Agnes Csikos       | Pecs-Baranya Hospice Foundation, Hungary<br><u>Appointed:</u> March 2017                                          |
| Dr Richard Harding    | Kings College, Cicely Saunders Institute<br><u>Appointed:</u> August 2016                                         |
| Dr Frank Brennen      | Physician<br><u>Appointed:</u> December 2016                                                                      |
| Dr James Cleary       | Director and Walther Senior Chair of Supportive Oncology, Indiana University<br><u>Appointed:</u> December 2016   |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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|                       |                                                                                                                                |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Dr Abhijit Dam        | Secretary, Indian Association of Palliative Care<br><u>Appointed:</u> October 2017; <u>Resigned:</u> June 2020                 |
| Ms. Maria Marroquin   | Administrator, Latin American Palliative Care Assoc.<br><u>Appointed:</u> August 2020                                          |
| Mr. Edo Banach, JD    | CEO and President<br>National Hospice and Palliative Care Organisation<br><u>Appointed:</u> October 2017                       |
| Dr Helena Davies      | Trustee with Palliative Care Needs<br><u>Appointed:</u> October 2017                                                           |
| Ms Sharon Baxter, MSW | Executive Director, Canadian Hospice Palliative Care Association<br><u>Appointed:</u> June 2018; <u>Retired:</u> December 2020 |
| Ms Laurel Gillespie   | Executive Director, Canadian Hospice Palliative Care Association<br><u>Appointed:</u> December 2020                            |
| Dr Stephen Watiti     | Trustee with Palliative Care Needs<br><u>Appointed:</u> December 2018                                                          |
| Dr Savita Butola      | Secretary, Indian Association of Palliative Care<br><u>Appointed:</u> March 2020                                               |
| Prof Yoshiyuki Kizawa | President, Japanese Society for Palliative Medicine<br><u>Appointed:</u> September 2020                                        |
| Prof Meera Agar       | Chair, Palliative Care Australia<br><u>Appointed:</u> September 2020                                                           |
| Dr Babe Gaolebale     | Botswana Ministry of Health<br><u>Appointed:</u> December 2020                                                                 |

## 2. STRUCTURE, GOVERNANCE AND MANAGEMENT

### Nature of Governing Document

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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The Worldwide Hospice Palliative Care Alliance is a charitable company limited by guarantee constituted on 28 October 2008 and governed by articles and memorandum of association which were last amended on 14 August 2016. The trustees are also directors of the charity for the purposes of the Companies Act.

### **How the Charity is Constituted**

The charity is an international non-governmental organization with trustees from each region of the world. There are currently 375 members of the WHPCA from 102 countries. WHPCA members are not currently required to pay dues. The only voting members are the trustees.

### **The Board of Trustees**

Trustees are elected and appointed according to the byelaws, which identify the number of trustees from each world region. Qualified candidates for election to the Board are identified with our regional members and are elected by current trustees.

Most trustees retire from office after four years. Retiring trustees can be reappointed but a trustee who has served for two consecutive terms must take a break from office and may not be reappointed for one year. Trustees that represent named organizations in the byelaws can serve unlimited terms.

The trustees delegate day-to-day management of the charity to the executive director, Dr Stephen Connor.

The trustees set the remuneration of key management personnel based on market rates within the sector.

## **3. PUBLIC BENEFIT**

We have referred to Charity Commission's general guidance on public benefit when reviewing our aims and objectives and in planning our future activities. In particular, the trustees consider how planned activities will contribute to the aims and objectives they have set. Our achievements and performance in section 5 show how we have met the public benefit requirements.

The Worldwide Hospice Palliative Care Alliance (WHPCA) is an international nongovernmental organisation (INGO) focusing exclusively on hospice and palliative care development worldwide. Its members are national and regional hospice and palliative care organisations and affiliate organisations supporting hospice and palliative care and supporters of hospice and palliative care worldwide.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

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Our vision is a world with universal access to hospice and palliative care. Our mission is “to bring together the global palliative care community to improve well-being and reduce unnecessary suffering for those in need of palliative care in collaboration with the regional and national hospice and palliative care organisations and other partners.”

Hospice and palliative care services relieves the pain and suffering of patients with life-limiting illness, supporting them and those around them physically, emotionally and spiritually. Care for patients can be in a variety of settings including their own home, at the hospice, in a hospital or in the community and can be for days, months or years.

We are here to support national hospice and palliative care organisations in promoting and developing hospice and palliative care in their countries. In the following sections, we aim to give you a snapshot of the key activities we have undertaken this year to meet our charitable objectives. This review demonstrates how our work is carried out for public benefit and how we have supported our members and others to provide and develop palliative care.

### 4. OBJECTIVES AND ACTIVITIES

The objectives of the charity are:

- to facilitate and promote the relief, care and treatment of the sick, especially the chronically and incurably ill and the dying, and the support and care of their families and carers and of the bereaved, in particular by:
- improving access to, and the quality of, palliative care, worldwide and improving the efficiency and efficacy of institutions concerned with the charitable provision of palliative care; and
- providing or facilitating education and training in palliative care and increasing awareness and understanding among the general public of the values, principles and practice of hospice and palliative care.

The main activities undertaken in relation to those purposes (from 1 April 2020 to 31 March 2021) are set out in section 5 below.

### 5. ACHIEVEMENTS AND PERFORMANCE

#### Secretariat and Governance

This year, due to the COVID-19 pandemic there were no face-to-face board meetings. However, the board did meet by teleconference 4 times during the year.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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The executive committee held monthly teleconference meetings most months.

Our first executive director, Stephen Connor, was originally appointed in January 2016, and continues to lead the organization to present.

### **Risk Management**

The trustees, together with the executive director and staff, identify risks to which the Worldwide Hospice Palliative Care Alliance is exposed and ensure that appropriate controls and systems are in place to monitor and manage those risks. A risk register is maintained and is reviewed by staff bi-weekly, by the executive committee quarterly, and by the full board annually. Current risks include potential operational impacts from COVID-19, ensuring compliance with UK General Data Protections Rules, ensuring our partner organizations are compliant with all safeguarding rules and procedures, and ensuring on-line donations and grants are accurately accounted for.

### **Communications**

The International edition of ehospice has supported WHPCA programmes and advocacy activity by reporting on: WHPCA programmes in Bangladesh, South Africa and Ethiopia, work on the Universal Health Coverage and the global NCD agenda, palliative care as part of the WHO General Programme of Work, access to medications, rights of older persons, and advocacy at the World Health Organization Executive Board Meeting and the World Health Assembly.

ehospice international published 43 articles with stories from around the world during this fiscal year. The categories were represented as follows:

Care — 23

Community Engagement — 13

Education— 7

Leadership — 4

Opinion — 1

Policy — 5

People and places – 6

The International edition of ehospice reported 44,675 sessions and 58,349 unique page views by 39,027 users over the reporting period. The decreased number of articles posted will have

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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had an impact on this figure. However, the relaunch of the weekly ehospice newsletter has seen an increased amount of traffic to the site since its launch in February and so we expect these numbers to increase for 2021/2022.

The WHPCA has continued to build up its communications tools including:

- Our monthly e-newsletter which is circulated to over 215 member recipients and 2,989 newsletter subscriber recipients = total 3,204 in over 120 countries up from 2755 recipients in the previous year.
- We have been managing and updating our WHPCA website with regular news updates relating to hospice and palliative care worldwide. There were 63,441 sessions and 127,891 unique page views by 45,793 users on the WHPCA website during the reporting period.
- We have increased our engagement on social media mechanisms, including Facebook and Twitter. We currently, as of 1<sup>st</sup> July 2021 have 5,176 total page likes on Facebook, and 5260 followers on Facebook. WHPCA also has 7,566 followers on Twitter. We also have re-launched our LinkedIn page and have 183 followers and also our Instagram account where we have 175 followers.
- World Hospice and Palliative Care Day took place despite being in the midst of a global pandemic on 10 October 2020. The theme was: "My Care My Comfort." This highlighted the importance of palliative care as part of Universal Health Coverage especially in the time of COVID-19 where palliative care became more relevant to all countries than ever before. Materials were produced and utilised around the world and 104 events were registered on the website from 42 different countries down from 65 countries last year which was inevitable due to the pandemic but showed the resilience of palliative care providers and agility to find new ways to hold events, many of them being virtual.
- WHPCA Communications continued to provide support to the OSF-funded direct stakeholder project and the Joffe Charitable Trust project using digital media and lived experience spokespersons to increase demand and access to palliative care in Ethiopia and South Africa, the Compassionate Korail project in Bangladesh, and the implementation of the UK Aid Direct Project in Bangladesh.
- Our project: Using digital media and the voices of people receiving palliative care to increase demand for and access to palliative care in two Anglophone African countries has continued to grow in line with our workplan.
- The aim of the project is to draw on the powerful stories of people needing or accessing palliative care (direct stakeholders) to tell their stories to 1) raise demand for palliative care among people who would benefit from it and 2) to encourage national decision makers to include palliative care in Universal Health Coverage plans.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

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### **We influence policy at the highest levels**

#### **Advocacy**

COVID-19 has impacted our advocacy focus this year as well as the way that we undertake advocacy. This year we reviewed our strategy and retained a strong focus on achieving access to palliative care as part of Universal Health Coverage (UHC) reforms. We have focussed on strengthening the support of palliative care advocates and palliative care allies worldwide to achieve our aims for palliative care for all as part of UHC. We continue to work closely with WHO, as a non-state actor in official relations. Our official relation status with WHO was extended another three years last January by the WHO Executive Board.

Our key activities through the year include:

- We ensured that the voice of people with lived experience was heard in key World Health Organisation (WHO) events including the World Health Assembly, World Health Assembly Executive Board and WHO Europe, with a focus on access to palliative care for all who need it, especially those in low and middle-income countries.
- We launched an updated version of the *Global Atlas of Palliative Care* co-branded with WHO.
- We participated in and supported a project led by the WHO to identify key national indicators to monitor palliative care access and availability.
- Our executive director has been assisting in a project to create a new Quality of Death & Dying Index to measure palliative care quality in 150 countries.
- We provided a robust response to COVID in partnership with our allies. This included building the evidence through a membership survey and launching a report on the COVID-19 and palliative care. We launched 'Time to Talk' to enable people working in palliative care and with palliative care needs to speak out and share their experiences of the pandemic and recommendations to improve care. We did a series of global webinars and briefing notes with our partners – IAHP, ICPCN and PALCHASE - to provide more support and information to people working in palliative care as they responded to COVID-19. We monitored and advocated for the inclusion of palliative care in WHO guidance on COVID-19.
- We co-organised two civil society roundtables with Dr Tedros and WHO in collaboration with our partners the International Association for Hospice & Palliative Care (IAHP) and International Federation on Ageing. These events have led to our organisations working with WHO to develop a palliative care action plan and the agreement of regular meetings to monitor global progress.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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- We continued our work to raise the voice of those living with palliative care needs including participation and facilitation of sessions by people with lived experience at the WHO Informal Consultation on involvement of people living with NCDs. Our project funded by OSF on raising the voice of people with lived experience was finalised this year and we will seek further funding to build on this initiative.
- We raised the issue of palliative care access in low and middle-income countries to reach new audiences through articles in the Global Citizen and the London Economic, with a focus on the importance of UK government support.
- We attended the Commission on the Status of Women and will publish a briefing paper on palliative care, women and girls.
- COVID-19 disrupted key planned projects on palliative care and UHC in Kenya and other in-country advocacy work, but we continued to work closely with partners in key countries.

We are building a diverse and strong movement demanding care for all

- We delivered joint webinars with our partners Help Age International and Alzheimer's Disease International on the issues around palliative care, care, older people and COVID-19 and collaborated with Chatham House on a webinar on palliative care and UHC.
- We joined new networks including the UK working group on NCDs, BOND as well as strengthening our involvement within our existing networks including Action for Global Health with a focus on the UK government. This work seeks to increase UK government support of international aid, including palliative care. We also submitted to UK parliamentary inquiries including the inquiry on Coronavirus and collaborated on letters to the UK government on issues around international aid.
- We were pleased to participate in the ground-breaking fellowship on palliative care by Institute of Palliative Medicine (Kerala), St Christopher's Hospice and BSMMU.

**We are building a diverse and strong movement demanding care for all**

- We secured funding to implement a project to raise the voice of direct stakeholders in palliative care across palliative care advocacy and all of our activities. The voices of those who are experts by experience are a crucial aspect of the movement to demand care for all.
- Our WHO/WHPCA *Global Atlas of Palliative Care at the End of Life* (2014) has now been downloaded over 140,000 times. A new 2<sup>nd</sup> edition of the *Global Atlas* with WHO launched in October 2020 and has so far been downloaded over 29,000 times.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

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<http://www.thewhpc.org/resources/global-atlas-on-end-of-life-care>

### Organisational Development and Programme Support

WHPCA has been providing technical support to the government of Greece in developing a national strategy for development and implementation of palliative care. This year the project was in hiatus due to the COVID-19 pandemic but should restart soon.

WHPCA and other partner organizations have been providing in-kind technical support to the Hospice and Palliative Professionals Association in the Russian Federation including on-line teaching, case conferences, and professional development throughout the year.

WHPCA together with our partner INGO's the International Children's Palliative Care Network, the IAHPC, and a network for palliative care in Humanitarian Emergencies developed and carried out 14 global webinars addressing the COVID-19 Pandemic's impact on palliative care worldwide. This webinar series reached over 6,716 attendees on-line live and asynchronously from over 50 countries.

The WHPCA Palliative Care Toolkit and training manual continues to be a useful resource for those developing palliative care in limited resource settings at <http://www.thewhpc.org/resources/memberresources/national-palliative-care-strategies/>. An updated version of the toolkit is now available. The toolkit & training manuals have been downloaded over 63,600 times. The WHPCA continues to be focused on support of hospice and palliative care development in low and middle-income countries. We have received funding for a programme to support palliative care delivery in communities in Bangladesh, have developed strong indigenous palliative care models with local members and are working on funding for further programmes. We also received two grants specifically to assist members in their response to COVID-19.

Our co-edited book *Building Integrated Palliative Care Programs and Services* (2017) that is free to download <http://www.thewhpc.org/resources/building-integrated-palliative-care-programs-and-services> and has been downloaded over 3,500 times.

## 6. FINANCIAL REVIEW

Income for the financial year was £326,925 (2019/20: £272,718), including significant grants from the Open Society Foundation, the US Cancer Pain Relief Committee, the Stavros Niarchos Foundation, the UK Department for International Development's UK Aid Direct program, True Colours Trust, and the Joffe Charitable Trust. We are extremely grateful to them for their

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support. Expenditure for the year totalled £309,153 (2019/20: £343,312), as a result of increased programme delivery costs.

During the year WHPCA recorded net income of £17,772 (2019/20: (£70,594)) due to commitments to spend funds from the previous fiscal year. This included a small increased surplus on unrestricted general funds of £2,784 (2019/20: £8,988) before transfers between funds. Total unrestricted funds at the end of the year were £147,498 (2019/20: £31,602). Total funds carried forward at the end of the fiscal year were £179,248 (2019/20: £161,476).

Where there are restricted funds in deficit, commitments have been given by the donors to provide further funding in the new financial year to cover those deficits.

### 7. RESERVES

The charity holds limited free reserves at the end of the year. The trustees aim to hold reserves of at least £50,000 and not more than £250,000, based on an analysis of our expenditure commitments, charitable need and the security of our income streams. As the current free reserves are within this range, the trustees are satisfied with the current level of funds. COVID-19 has not had a negative impact on our operations and reserves this year, though only through March. We have received two additional COVID-19 grants since the close of the fiscal year and based on our budget and cash forecasts we anticipate ending next fiscal year with close to £50,000 in free reserves.

The trustees are confident that this level of reserves is sufficient to enable the charity to continue as a going concern for at least one year from the date of signing this report.

### 8. PLANS FOR FUTURE PERIODS

The WHPCA will continue to work toward achieving its mission through the implementation of our three-year strategic plan (2019-21). Work on a new strategic plan for 2022-25 will be done before the end of this calendar year. Currently the five strategic areas of focus are:

1. **INFLUENCING CHANGE:** We will reduce suffering by including palliative care in universal health coverage basic packages of care in low-and-middle income countries
2. **TRACKING PROGRESS:** We will ensure that palliative care progress is tracked and monitored by policy makers using standardized, tested, and reliable national indicators

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

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3. **BUILDING A MOVEMENT:** We will work to build a movement of direct stakeholders, carers, civil society, government, and academia to improve understanding and demand for palliative as part of Universal Health Coverage
4. **GENERATING FUNDS:** We will work with our member organizations to increase funding and technical assistance to palliative care organisations worldwide to increase access to essential palliative care as part of Universal Health Coverage
5. **WORKING COLLABORATIVELY:** We will grow as a strong regional and national member driven global alliance working collaboratively in meaningful partnership with others.

## STATEMENT OF TRUSTEES' RESPONSIBILITIES

The Trustees (who are also directors of Worldwide Hospice Palliative Care Alliance 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 directors to prepare financial statements for each financial year. Under that law the directors have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the directors 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 directors are required to:

1. select suitable accounting policies and then apply them consistently;
2. observe the methods and principles in the Charities SORP FRS102 (2019);
3. make judgments and accounting estimates that are reasonable and prudent;
4. state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
5. 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

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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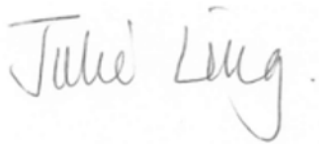
safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

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

### **Independent examiner**

Price Bailey LLP was re-appointed as the charity's independent examiner for this fiscal year.

Approved by the trustees on 9 September 2021 and signed on their behalf by

A handwritten signature in dark ink, appearing to read 'Julie Ling'.

Dr Julie Ling

Chair, WHPCA

# **THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE**

## **ANNUAL REPORT AND FINANCIAL STATEMENT**

**31 March 2021**

### **INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE**

I report to the charity trustees on my examination of the accounts of the company for the year ended 31 March 2021 which are set out on pages 17 to 30.

#### **Responsibilities and basis of report**

As the charity trustees of the company (and also its directors for the purposes of company law) you are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of the company are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your company's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

#### **Independent examiner's statement**

Since the company's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2011 Act. I confirm that I am qualified to undertake the examination because I am a member of The Institute of Chartered Accountants in England and Wales which is one of the listed bodies.

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

1. accounting records were not kept in respect of the company as required by section 386 of the 2006 Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the accounting requirements of section 396 of the 2006 Act other than any requirement that the accounts give a 'true and fair view' which is not a matter considered as part of an independent examination; or

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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4. the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities [applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)].

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



Helena Wilkinson FCA

For and on behalf of Price Bailey LLP  
3rd Floor, 24 Old Bond St, Mayfair, London W1S 4AP

Date: 20 October 2021

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### Statement of Financial Activities (Incorporating an income and expenditure account)

**For the year ended 31 March 2021**

|                                          |      | Unrestricted          | Restricted           | 2021<br>Total         | 2020<br>Total   |
|------------------------------------------|------|-----------------------|----------------------|-----------------------|-----------------|
|                                          | Note | £                     | £                    | £                     | £               |
| <b>Income</b>                            |      |                       |                      |                       |                 |
| Donations and legacies                   | 2a   | 4,713                 | 322,212              | 326,925               | 272,718         |
| Income from charitable activities        | 2b   | -                     | -                    | -                     | -               |
| <b>Total income</b>                      |      | <u>4,713</u>          | <u>322,212</u>       | <u>326,925</u>        | <u>272,718</u>  |
| <b>Expenditure</b>                       |      |                       |                      |                       |                 |
| Raising funds                            | 3    | 1,929                 | -                    | 1,929                 | 1,350           |
| Charitable activities                    | 3    | -                     | 307,224              | 307,224               | 341,962         |
| <b>Total Expenditure</b>                 |      | <u>1,929</u>          | <u>307,224</u>       | <u>309,153</u>        | <u>343,312</u>  |
| <b>Net income / (expenditure) before</b> |      | <b>2,784</b>          | <b>14,988</b>        | <b>17,772</b>         | <b>(70,594)</b> |
| Transfers between funds                  |      | <u>113,112</u>        | <u>(113,112)</u>     | <u>-</u>              | <u>-</u>        |
| <b>Net income / (expenditure) after</b>  |      | <b>115,896</b>        | <b>(98,124)</b>      | <b>17,772</b>         | <b>(70,594)</b> |
| <b>Reconciliation of funds</b>           |      |                       |                      |                       |                 |
| Total funds brought forward              |      | <u>31,602</u>         | <u>129,874</u>       | <u>161,476</u>        | <u>232,068</u>  |
| <b>Total funds carried forward</b>       | 11   | <u><b>147,498</b></u> | <u><b>31,750</b></u> | <u><b>179,248</b></u> | <u>161,474</u>  |

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### Balance sheet

**As at the 31 March 2021**

|                                      |           | 2021           | 2020           |
|--------------------------------------|-----------|----------------|----------------|
|                                      | Note      | £              | £              |
| <b>Tangible Fixed Assets</b>         | <b>8</b>  | <b>675</b>     | <b>0</b>       |
| <b>Current assets</b>                |           |                |                |
| Cash at bank and in hand             |           | 160,215        | 151,393        |
| Debtors                              | 9         | 19,718         | 6,164          |
|                                      |           | <b>179,933</b> | 157,557        |
| <b>Liabilities</b>                   |           |                |                |
| Creditors: amounts due within 1 year | 10        | (1,360)        | (2,847)        |
| <b>Net current assets</b>            |           | <b>178,573</b> | 154,710        |
| <b>Net assets</b>                    |           | <b>179,248</b> | 154,710        |
| <b>Funds</b>                         |           |                |                |
| Restricted funds                     |           | 31,750         | 129,874        |
| Unrestricted funds                   |           | 147,498        | 31,602         |
| <b>Total charity funds</b>           | <b>11</b> | <b>179,248</b> | <b>161,476</b> |

The notes on pages 18 to 28 form part of these financial statements.

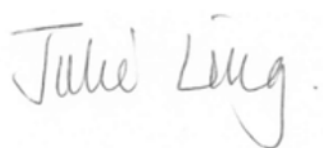
For the year ending 31 March 2021, the company was entitled to exemption from audit under section 477 of the Companies Act 2006

Directors' responsibilities:

- the members have not required the company to obtain an audit of its account for the year in question in accordance with section 476;
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the

Approved by the trustees on 9 September 2021 and signed on their behalf by

Dr Julie Ling  
Chair



**Company number: 6735120**

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### Notes to the financial statements

**For the year ended 31 March 2021**

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#### **1. Accounting policies**

##### **a) Basis of preparation**

The financial statements 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), and the Companies Act 2006. The functional currency is pounds sterling.

The charity 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 notes.

##### **b) Company status**

The charity is a company limited by guarantee. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

##### **c) 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 other purposes.

Restricted funds are to be used for specific purposes as laid down by the donor.

##### **d) Income**

Voluntary income including donations, gifts and grants that provide core funding or are of general nature are recognised where there is entitlement, probability of receipt and the amount can be measured with sufficient reliability.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

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### **1. Accounting policies (continued)**

#### **e) Expenditure**

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

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Where costs cannot be directly allocated to either charitable or governance costs, they have been apportioned based on an estimate of the time devoted to the respective areas.

#### **f) Going Concern**

The financial statements have been prepared on a going concern basis as the trustees believe that no material uncertainties exist. The trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements. The budgeted income and expenditure is sufficient with the level of reserves for the charity to be able to continue as a going concern, and income received up to the date of signing these accounts suggests the budget will be met.

#### **g) Debtors**

Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid net of any trade discounts due. Accrued income and tax recoverable is included at the best estimate of the amounts receivable at the balance sheet date.

#### **h) Creditors**

Creditors are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors are normally recognised at their settlement amount.

#### **i) Cash at bank and in hand**

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### 1. Accounting policies (continued)

#### j) Pension

The company operate a defined contribution plan for the benefit of its employees. Contributions are expensed as they become payable.

#### k) Financial instruments

The charity only has financial assets and liabilities that qualify as basic financial instruments, which are all measured at cost.

### l) Significant estimates and judgements

No significant judgements, accounting policies or assumptions have been made by management in applying the charity's accounting policies.

### 2. Income

#### a) Donations and Legacies

|                                           |              |                | 2021           |              |                | 2020           |
|-------------------------------------------|--------------|----------------|----------------|--------------|----------------|----------------|
|                                           | Unrestricted | Restricted     | Total          | Unrestricted | Restricted     | Total          |
|                                           | £            | £              | £              | £            | £              | £              |
| <b>Grants from foundations and trusts</b> |              |                |                |              |                |                |
| Grant from USCP                           | -            | 42,506         | <b>42,506</b>  | -            | -              | -              |
| Grant from UK DFID                        | -            | 108,205        | <b>108,205</b> | -            | 82,280         | 82,280         |
| Grant from Open Society Foundations       | -            | 118,459        | <b>118,459</b> | -            | 97,135         | 97,135         |
| Grant from Anonymous Foundation           | -            | 35,407         | <b>35,407</b>  | -            | -              | -              |
| Grant from True Colours Trust             | -            | -              | -              | -            | 17,360         | 17,360         |
| Grant from Stavros Niachos Foundation     | -            | 17,635         | <b>17,635</b>  | -            | 30,439         | 30,439         |
| Grant from Joffe Trust                    | -            | -              | -              | -            | 40,000         | 40,000         |
|                                           | -            | 322,212        | <b>322,212</b> | -            | 267,214        | 267,214        |
|                                           | 12           |                | -              |              |                | -              |
| Income from related parties               | 12           | 5,663          | <b>5,663</b>   | -            | -              | -              |
| Exchange gains/(losses)                   |              | (1,385)        | <b>(1,385)</b> | 4,704        | -              | 4,704          |
| Individual donations                      |              | 435            | <b>435</b>     | 800          | -              | 800            |
| <b>Total</b>                              | <b>4,713</b> | <b>322,212</b> | <b>326,925</b> | <b>5,504</b> | <b>267,214</b> | <b>272,718</b> |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### Notes to the financial statements

For the year ended 31 March 2021

### 3. Expenditure

|                                         | Direct Costs   | Support Costs | 2021<br>Total  | Direct Costs   | Support Costs | 2020<br>Total  |
|-----------------------------------------|----------------|---------------|----------------|----------------|---------------|----------------|
|                                         | £              | £             | £              | £              | £             | £              |
| <b>Raising funds</b>                    |                |               |                |                |               |                |
| Cost of generating donations and grants | 1,929          | 0             | <b>1,929</b>   | 1,350          | 0             | <b>1,350</b>   |
| <b>Charitable Activities</b>            |                |               |                |                |               |                |
| Capacity Building                       | 84,135         | 14,904        | <b>99,039</b>  | 80,995         | 13,199        | <b>94,194</b>  |
| Strengthening Palliative Care in:       | -              | -             |                | -              | -             |                |
| Bangladesh (Anonymous funder)           | 32,389         | 5,129         | <b>37,518</b>  | 30,324         | 7,752         | <b>38,076</b>  |
| Bangladesh (DFID funding)               | 60,321         | 1,002         | <b>61,323</b>  | 78,880         | 2,004         | <b>80,884</b>  |
| Greece                                  | 1,000          | 3,465         | <b>4,465</b>   | 29,649         | 4,548         | <b>34,197</b>  |
| Worldwide COVID response (DFID funding) | 41,528         | 3,286         | <b>44,814</b>  | -              | -             | -              |
| Joffe Foundation project                | 29,802         | 3,231         | <b>33,033</b>  | 32,663         | 6,451         | <b>39,114</b>  |
| USCP Project                            | 23,348         | 3,684         | <b>27,032</b>  | 50,707         | 4,788         | <b>55,495</b>  |
|                                         | <b>272,523</b> | <b>34,701</b> | <b>307,224</b> | <b>303,218</b> | <b>38,742</b> | <b>341,960</b> |
| <b>Total Expenditure</b>                | <b>274,452</b> | <b>34,701</b> | <b>309,153</b> | <b>304,568</b> | <b>38,742</b> | <b>343,310</b> |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### Notes to the financial statements

**For the year ended 31 March 2021**

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### 3. Expenditure (continued)

#### b) Analysis of Support Costs

|                                      | 2021          | 2020   |
|--------------------------------------|---------------|--------|
|                                      | £             | £      |
| <b>Governance</b>                    |               |        |
| Trustee Travel                       | 148           | 2,028  |
| Tax and Independent Examination      | 1,020         | 1,350  |
|                                      | <b>1,168</b>  | 3,378  |
| <b>Other Support Costs</b>           |               |        |
| Travel, accommodation & subsistence  |               | 1,583  |
| Accountancy and HR                   | 9,970         | 9,455  |
| Miscellaneous                        | 5,312         | 10,692 |
| General advocacy                     | 11,520        | 412    |
| Communications Costs                 | 3,120         | 7,456  |
| Gifts in Kind - staff time for comms | 12            | -      |
| Depreciation                         | 225           | 879    |
| Website                              | 3,386         | 4,887  |
| <b>Total Support Costs</b>           | <b>34,701</b> | 38,742 |

Support costs have been allocated based on an estimate of time spent.

### 4. Net income/(expenditure) for the year

|                                            |       |         |
|--------------------------------------------|-------|---------|
| This is stated after charging / crediting: | 2021  | 2020    |
|                                            | £     | £       |
| Net losses/(gains) on foreign exchange     | 1,385 | (4,704) |
| Independent Examiners fees                 | 900   | 900     |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### Notes to the financial statements

**For the year ended 31 March 2021**

#### 5. Wages and Salaries

|                    | 2021           | 2020           |
|--------------------|----------------|----------------|
|                    | £              | £              |
| Salaries           | 112,474        | 112,055        |
| National Insurance | 955            | 464            |
| Pension            | 2,429          | 3,644          |
|                    | <b>115,858</b> | <b>116,163</b> |

No employee earned more than £60,000 in the current or prior year.

The key management personnel for the year comprise the trustees. The charity's trustees were not paid and did not receive any benefits from employment with WHPCA in the year (2020: £nil). They were reimbursed expenses during the year as stated in note 11.

#### b) Staff numbers

The average monthly head count was 4 (2020: 4)

|                                            | 2021     | 2020     |
|--------------------------------------------|----------|----------|
|                                            | No       | No       |
| At 31 March, the head-count was as follows |          |          |
| Raising funds                              | -        | -        |
| Charitable activities                      | 4        | 4        |
| Total                                      | <b>4</b> | <b>4</b> |

#### 6. Pension

WHPCA contributes towards defined contribution pension plans for employees. Pension costs are recognised when they fall due.

The costs of the defined contribution scheme are included with the associated staff costs and allocated therefore to raising funds and charitable activities. £360 (2020 - £nil) was owing to the pension scheme at the year end.

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### Notes to the financial statements

**For the year ended 31 March 2021**

#### 7. Taxation

WHPCA is exempt from corporation tax as all its income is applied for charitable purposes.

#### 8. Tangible Fixed Assets

|                                              |              |
|----------------------------------------------|--------------|
|                                              | IT equipment |
|                                              | £            |
| Cost at the start of the year                | 1,758        |
| Additions                                    | 900          |
| <b>At the end of the year</b>                | <b>2,658</b> |
| Depreciation at the start of the year        | 1,758        |
| Charge for the year                          | 225          |
| <b>At the end of the year</b>                | <b>1,983</b> |
| <b>Net book value at the end of the year</b> | <b>675</b>   |
| Net book value at the start of the year      | -            |

#### 9. Debtors

|                             |               |              |
|-----------------------------|---------------|--------------|
|                             | 2021          | 2020         |
|                             | £             | £            |
| Other debtors               | -             | 1,652        |
| Amounts due from Hospice UK | 19,718        | 4,512        |
|                             | <b>19,718</b> | <b>6,164</b> |

#### 10. Creditors: Amounts falling due in less than one year

|                 |              |              |
|-----------------|--------------|--------------|
|                 | 2021         | 2020         |
|                 | £            | £            |
| Trade creditors | 360          | 1,847        |
| Accruals        | 1,000        | 1,000        |
|                 | <b>1,360</b> | <b>2,847</b> |

#### 11. Analysis of net assets between funds

|                       |                |               |                |
|-----------------------|----------------|---------------|----------------|
|                       |                |               | 2021           |
|                       | Unrestricted   | Restricted    | Total          |
|                       | £              | £             | £              |
| Tangible fixed assets | 675            | -             | 675            |
| Net current assets    | 146,823        | 31,750        | 178,573        |
|                       | <b>147,498</b> | <b>31,750</b> | <b>179,248</b> |
|                       |                |               | 2020           |
|                       | Unrestricted   | Restricted    | Total          |
|                       | £              | £             | £              |
| Net current assets    | 31,602         | 134,738       | 166,340        |
|                       | 31,602         | 134,738       | 166,340        |

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### Notes to the financial statements

**For the year ended 31 March 2021**

#### 12. Analysis of funds

An analysis of restricted funds is shown below

|                               | 1 April<br>2019 | Income         | Expenditure      | Transfers | 31 March<br>2020 |
|-------------------------------|-----------------|----------------|------------------|-----------|------------------|
|                               | £               | £              | £                | £         | £                |
| <b>Restricted funds</b>       |                 |                |                  |           |                  |
| OSF Capacity Building         | 109,385         | 97,135         | (99,028)         | -         | 107,492          |
| USCP Project                  | 54,755          | -              | (55,495)         | -         | (740)            |
| Joffe Charitable Trust        | 32,147          | 40,000         | (39,114)         | -         | 33,033           |
| DFID Bangladesh Project       | (16,778)        | 82,280         | (80,884)         | -         | (15,382)         |
| True Colours Trust            | -               | 17,360         | -                | -         | 17,360           |
| Greece Project                | (11,218)        | 30,439         | (34,197)         | -         | (14,976)         |
| Bangladesh Project            | 41,163          | -              | (38,076)         | -         | 3,087            |
| <b>Total restricted funds</b> | <b>209,454</b>  | <b>267,214</b> | <b>(346,794)</b> | <b>-</b>  | <b>129,874</b>   |
| <b>Unrestricted funds</b>     | <b>22,614</b>   | <b>5,504</b>   | <b>3,484</b>     | <b>-</b>  | <b>31,602</b>    |
| <b>Total funds</b>            | <b>232,068</b>  | <b>272,718</b> | <b>(343,310)</b> | <b>-</b>  | <b>161,476</b>   |

|                               | 1 April<br>2020 | Income         | Expenditure      | Transfers        | 31 March<br>2021 |
|-------------------------------|-----------------|----------------|------------------|------------------|------------------|
|                               | £               | £              | £                | £                | £                |
| <b>Restricted funds</b>       |                 |                |                  |                  |                  |
| OSF Capacity Building         | 107,492         | 118,459        | (99,041)         | (113,112)        | 13,798           |
| USCP Project                  | (740)           | 42,506         | (27,032)         | -                | 14,734           |
| Joffe Charitable Trust        | 33,033          |                | (33,033)         | -                | -                |
| DFID Bangladesh Project       | (15,382)        | 63,391         | (61,323)         | -                | (13,314)         |
| DFID Covid Project            | -               | 44,814         | (44,814)         | -                | -                |
| True Colours Trust            | 17,360          | -              | -                | -                | 17,360           |
| Greece Project                | (14,976)        | 17,635         | (4,465)          | -                | (1,806)          |
| Bangladesh Project            | 3,087           | 35,407         | (37,516)         | -                | 978              |
| <b>Total restricted funds</b> | <b>129,874</b>  | <b>322,212</b> | <b>(307,224)</b> | <b>(113,112)</b> | <b>31,750</b>    |
| <b>Unrestricted funds</b>     | <b>31,602</b>   | <b>4,713</b>   | <b>(1,929)</b>   | <b>113,112</b>   | <b>147,498</b>   |
| <b>Total funds</b>            | <b>161,476</b>  | <b>326,925</b> | <b>(309,153)</b> | <b>-</b>         | <b>179,248</b>   |

Transfers between funds represent amounts that the donor has agreed can now be used for unrestricted purposes

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### 12. Analysis of funds (continued)

OSF have provided annual grants for capacity building of the organisation for several years.

The project funded by the US Cancer Pain Relief Committee is to support WHPCA's technical assistance at the WHPO in implementing the PC resolution.

The grant from the Joffe Charitable Trust is to support a project entitled "Using digital media

The grant from True Colours Costs was to support the work of the fundraising and international programmes manager.

We are undertaking two palliative care development projects in Bangladesh. One is funded by DFID and the other by an anonymous trust.

DFID are also funding our work in response to the COVID-19 crisis

The Stavros Niarchos Foundation is funding a project to develop palliative care provision in Greece

A UK trust which wishes to remain anonymous is funding a palliative care development project in Bangladesh. The second stage of this project began in April 2018 and is expected to last two years.

### 13. Related party transactions

#### Trustees

WHPCA paid the cost of travel and expenses incurred by Trustees whilst fulfilling their duties to WHPCA. This includes the reimbursement of expenses totalling £148 (2020: £2,028).

#### Hospice UK

Hospice UK, a UK registered charity, is a member of WHPCA and the Chief Operating Officer of Hospice UK - Craig Duncan - is a trustee of WHPCA.

Hospice UK also provided various services to WHPCA, including financial management and payroll services valued at £9,300 (2020: £11,000).

At the year end Hospice UK owed £19,718 to WHPCA (2020: £4,512).

# **THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE**

## **ANNUAL REPORT AND FINANCIAL STATEMENT**

**31 March 2021**

### **Notes to the financial statements**

**For the year ended 31 March 2020**

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#### **13. Related party transactions (continued)**

**There are no other related party transactions.**

#### **14. Ultimate controlling party**

**There is no overall controlling party.**

# THE WORLD HOSPICE PALLIATIVE CARE ALLIANCE

## ANNUAL REPORT AND FINANCIAL STATEMENT

31 March 2021

### The Worldwide Hospice Palliative Care Alliance

#### Statement of Financial Activities (Incorporating an income and expenditure account)

**For the year ended 31 March 2020**

|                                          |                |                 | <b>2020</b>     | 2019           |
|------------------------------------------|----------------|-----------------|-----------------|----------------|
|                                          | Unrestricted   | Restricted      | <b>Total</b>    | Total          |
| <b>Note</b>                              | <b>£</b>       | <b>£</b>        | <b>£</b>        | <b>£</b>       |
| <b>Income</b>                            |                |                 |                 |                |
| Donations and legacies                   | 5,504          | 267,214         | <b>272,718</b>  | 367,656        |
| Income from charitable activities        | -              | -               | -               | 6,155          |
| <b>Total income</b>                      | <b>5,504</b>   | <b>267,214</b>  | <b>272,718</b>  | <b>373,811</b> |
| <b>Expenditure</b>                       |                |                 |                 |                |
| Raising funds                            | 1,350          | -               | <b>1,350</b>    | 18             |
| Charitable activities                    | (4,834)        | 346,796         | <b>341,962</b>  | 359,963        |
| <b>Total Expenditure</b>                 | <b>(3,484)</b> | <b>346,796</b>  | <b>343,312</b>  | <b>359,981</b> |
| <b>Net income / (expenditure) in the</b> | <b>8,988</b>   | <b>(79,582)</b> | <b>(70,594)</b> | <b>13,830</b>  |
| <b>Reconciliation of funds</b>           |                |                 |                 |                |
| Total funds brought forward              | 22,614         | 209,454         | <b>232,068</b>  | 218,238        |
| <b>Total funds carried forward</b>       | <b>31,602</b>  | <b>129,872</b>  | <b>161,474</b>  | <b>232,068</b> |

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.