

**REPORT OF THE TRUSTEES AND
FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2020
FOR
EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE**

Charity number: 1159050

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for the year ended 31 December 2020**

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EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

for the year ended 31 December 2020

Charity Information

TRUSTEES:	Marcy Rosenbaum Arwen Helena Pieterse Maria Elorza Maria Helena Brouwers Evelyn Van Weel-Baumgarten Nicola Diviani Marlene Sator Lode Verreyen Sandra Winterburn Emanuela Mazza	Eva Doherty Margarida Carvalho Figueiredo Ferreira Braga Maria Stubbe Hilde Eide Conor Gilligan Lorraine Noble Richard Brown Eva Bitzer Michael Kaffman Sarah Bigi
CHARITY OFFICES:	SAS Event Management The Old George Brewery Rollestone Street Salisbury SP1 1DX	
CHARITY NUMBER:	1159050	
INDEPENDENT EXAMINER:	Nicholas Jones FCCA Fawcetts LLP Chartered Accountants Windover House St Ann Street Salisbury SP1 2DR	

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

REPORT OF THE TRUSTEES for the year ended 31 December 2020

The Trustees of the charity present their report with the financial statements of the Charity for the year ended 31 December 2020.

LEGAL STATUS

EACH: International Association for Communication in Healthcare (EACH), originally called the European Association for Communication in Healthcare, was established in 2001 as an unincorporated entity and entered into the register of charities on 3rd November 2014 as a Charitable Incorporated Organisation (CIO). On the 14th November 2016 EACH held an AGM where the resolution to change the name of the charity was agreed and passed by the members. The resolution was accepted by the Charity Commission by email on the 9th December 2016.

TRUSTEES

Trustees are appointed and removed in accordance with the constitution.

STRUCTURE, GOVERNANCE AND MANAGEMENT

The stated aim of the CIO is the relief of sickness and the preservation of health of patients for the public benefit by the promotion of effective evidence-based and patient-centred healthcare communication between patients, relatives and healthcare practitioners throughout the world.

There were 427 members of EACH in 2020, from 40 countries worldwide. Membership fees were £130 including print version of the affiliated journal, *Patient Education & Counselling* (PEC) or £110 with online access only. Reduced members fees were offered to undergraduate and postgraduate students; over 65 year old members; members who renewed for 2 years and institutional membership.

EACH is governed by the executive committee and voting members of the advisory committee that have been constituted according to the policies and procedures of the association. All members of the executive and voting members of the advisory committee are trustees of the charity. The activities of the association are chaired by three major subcommittees:

- Research (through the rEACH subcommittee)
- Teaching (through the tEACH subcommittee)
- Policy and Practice (through the pEACH subcommittee)

The executive committee consists of the President, President-Elect, Past-President, chair of rEACH, chair of tEACH, chair of pEACH, chair of the Advisory Committee, chair of the Networking Group and the Treasurer.

The executive committee is the highest decision-making body of EACH and makes all decisions concerning finances, general strategy, future development etc. The three Presidents meet monthly with the full executive meeting every other month by videoconference.

A general meeting of the members is held annually in accordance with the association's constitution. The annual general meeting was due to be held in Vienna during the ICCH 2020 conference, however, due to the COVID-19 pandemic the AGM was held online on the 23rd September 2020 and attended by 39 members ensuring the quorum of 23 members was met. During the meeting Sara Rubinelli stepped down as President and Marcy Rosenbaum started her role as President, Lorraine Noble was elected as the new President-Elect and Maddalena Fiordelli was re-elected as the Treasurer of EACH. The membership also heard reports from tEACH, rEACH, pEACH, Advisory Committee, Executive Committee & yEACH as well as a report on membership, finances and future plans for the association.

The Advisory Committee (AC) of EACH consists of voting National Representatives (NR) of countries with at least five members, non-voting NRs of countries with less than five members and all members of the executive committee. The AC has a Chair and two Co-Chairs. NRs have a deputy (DNR) who takes the role of the national representative in his/her absence.

2020 was an election year for EACH. The EACH elections were conducted electronically for the positions of President-Elect and Treasurer. Ordinarily the elections would also appoint new NRs and DNRs for the Advisory Committee, however due to the increased pressure and stress from the global pandemic it was felt that it would not be appropriate to conduct elections in 2020. The NRs and DNRs were all asked if they would agree to remain in their positions for an extended period of 6 months so that the elections could be held in January 2021 for handover in April 2021. All NRs and DNRs agreed to this via an electronic survey.

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There are currently NRs from 27 countries, of which 12 are non-voting NRs. Only voting NRs and executive members are trustees of EACH.

The full AC meet once a year face to face at EACH hosted events. The NRs and DNRs of the Advisory Committee meet a further 2-3 times per year via videoconference to continue their work.

In all of its activities EACH respects and promotes the fundamental importance of transparency in its:

- mission and values
- governance practices
- internal and public policy practices
- financial information
- financial relationships with funding sources, both public and private
- internal and external financial control by independent audits
- financial relationships with commercial companies

In addition to the public website, there are restricted areas on the website for the membership, advisory committee and executive committee, where information and documents can be posted and essential documents preserved in archives. This enables committee members to work remotely and encourages trustee participation in the charity's decision-making processes.

The general sources of funding for the charity's core activities and specific projects come from a mixture of membership fees, a guaranteed royalty from our publication partner, Elsevier, from conferences and charitable donations. EACH has an agreed policy not to accept funding from the pharmaceutical industry for any of its activities, including meetings and conferences. This is to prevent any potential conflict of interest.

The Trustees give of their time freely and the executive committee members receive only reimbursement for actual costs incurred (such as travel and accommodation).

Management of the association is provided by:

SAS Event & Association Management
The Old George Brewery
Rollestone Street
Salisbury SP1 1DX UK
DDI: +44 (0)1722 415154
Fax: +44 (0)1722 331313
Email: info@each.international

STRATEGY

EACH is a worldwide organisation with the overall aim of improving effective evidence-based patient-centred healthcare communication through the engagement of all who are active in communication research, teaching and policy-making.

Our stated objectives for achieving our overall aim are as follows:

- promoting the development of healthcare research and health professional education to improve the quality of communication in healthcare globally and hence improve the health outcomes of the general public
- enabling the exchange of teaching and research methodologies and resources within the community of healthcare communication researchers and teachers, to enhance the quality of communication in healthcare and thereby improving patients' and relatives' experience
- Influencing policy through the dissemination of knowledge about effective communication between patients, relatives and health professionals, extolling best practices and improvements in education and healthcare organisations to comply with the changing needs of health delivery and increasing moves towards a person-centred approach incorporating shared responsibility and decision making
- developing an active network of researchers, teachers and practitioners in the world, committed to improving the patient experience in the field of communication in healthcare
- building national capacity in healthcare communication in individual nations

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The strategy of the association has been carefully constructed to further the public benefit. Almost all members of the public will be patients at some point in their lives or be carers of members of their family who are patients. The quality of the health care that they receive and the subsequent relief of sickness or prevention of illness will strongly depend upon the effectiveness of the communication with their health care providers. Effective healthcare communication between patients, relatives and healthcare practitioners has been demonstrated to affect the health of patients through improvements in patient satisfaction, recall, adherence, resolution of symptoms and disease outcome. Effective healthcare communication leads to more efficient, accurate and supportive medical care and improves the effectiveness of medical interactions and interventions. Effective health care communication not only leads to better care but to less expensive care with fewer unnecessary medical interventions and reduced inappropriate or futile treatments. Over 30 years of health care communication research has demonstrated that there are many problems in health care communication between professionals and patients and that there are increasingly evidence-based solutions to these problems. These solutions can be taught and the learning from these solutions can be retained and utilised by practitioners in their everyday practice.

In 2020, the Executive committee responded to the global pandemic and subsequent need of its members and the general public for guidance and support in best practice healthcare communication. The Executive did this by creating a dedicated webpage to share resources for healthcare communication during the COVID-19 pandemic. Some of these resources were created by EACH and some were resources shared by members.

In addition, EACH produced a free e-learning course entitled 'How to Deal with Misinformation and Disinformation during Public Health Emergencies' and also offered a live Q&A tutorial for participants to attend.

Alongside these additional efforts, the Executive committee continued to work on delivering the strategic plan for the association to expand the reach and influence of EACH. Work during 2020 focussed on a) appointing social media officers to run the existing EACH social media account on Twitter as well as create new accounts on Facebook, Instagram and LinkedIn with the aim of improving engagement with stakeholders and the public b) increasing the variety of courses and training workshops offered by EACH to the membership and wider public; and c) improving the EACH website to make it more aesthetically pleasing and user friendly to target audiences.

RISK MANAGEMENT

The trustees confirm that they have reviewed the major risks to which the Charity is exposed and, where practicable, they have established systems to mitigate those risks.

ACTIVITIES

In order to translate the above strategies into practice, EACH continues to undertake the following activities:

- organises major international conferences on health care communication research, teaching, policy & practice to bring together the community of healthcare researchers, educators and practitioners
- provides workshops, courses and meetings on specific research, teaching and policy and practice components of healthcare communication for teachers, researchers and policy makers
- develops and supports active networks of teachers, researchers and policy makers through communication at meetings, via the internet, using web-based conferences, web-based solutions and social media
- provides a dedicated website to raise awareness and share related resources on teaching, research and policy and practice with the wider community of healthcare practitioners, researchers, teachers, practitioners and policy makers
- collaborates with existing networks and associations which have similar purposes
- is affiliated with the scientific journal, Patient Education and Counselling, to disseminate results of research on health care communication
- provides grants to attend courses for researchers and teachers in countries throughout the world without established health care communication research or teaching programmes
- provides grants for young researchers to attend workshops and develop networks
- carries out site visits to establish networks, and train teachers and researchers, in countries around the world without established health care communication research and teaching programmes
- promotes best practice in health care communication to other local and national organisations
- responds to requests from government and their healthcare organisations to review key policy documents from a healthcare communication perspective

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Specific committees have been established to promote networks for teaching, research and policy respectively. These committees are composed of leaders in the field and actively promote the various activities provided by the organisation to as wide a group of healthcare researchers, teachers, policy makers and practitioners as possible. Networks are established in individual countries throughout the world.

When researchers, teachers, policy makers and practitioners contact the organisation, it attempts to provide bespoke advice and solutions to their teaching or research issues. It is this education, research, policy and practice activity that lead to improvements in health care communication and therefore to public benefit.

ACHIEVEMENTS AND PERFORMANCE

Conferences and courses

International conference: EACH and the Academy of Communication in Healthcare (ACH) collaborate in organising the annual International Conferences on Communication in Healthcare (ICCH). In the even years, EACH is the main organiser of ICCH and in the odd years, ACH is the main organiser. Over 500 participants attended the last highly successful ACH-organised conference in San Diego in 2019. The EACH hosted 2020 ICCH conference was due to take place in Vienna from the 9-12th September 2020. Due to the COVID-19 pandemic the face to face conference was replaced with a virtual conference. The planning committee decided to divide the event content in half and run the conference in two parts with half the content being offered online in September 2020 and the other half to be delivered face to face in Leuven, Belgium and postponed until April 2021. The September online conference was run using a professional virtual event platform and budgeted to run at a loss. The event was very successful with over 350 attendees and high engagement throughout. In December 2020 it became apparent that trying to hold the second half of the ICCH 2020 conference in person was not going to be possible due to the ongoing pandemic and so the decision was made to run ICCH 2020 Part 2 also online in April 2021.

EACH Forum on Healthcare Communication: Due to the decision taken to split the ICCH 2020 conference into two halves with the second half taking place in 2021 the EACH Forum on Healthcare Communication will not take place in 2021 as normal. It is anticipated that the next EACH Forum on Healthcare Communication will take place in 2023.

EACH Courses: A number of EACH courses had been developed to deliver in 2020 as part of the EACH strategic plan to increase the breadth of training offered by the association. Two new courses were scheduled to take place in May and April 2020: 'Workplace-Based Communication Skills Teaching and Learning' and 'Person-Centred Research in Communication in Healthcare (PREACH)'. These were both cancelled due to the pandemic restrictions as well as the regular tEACH courses on What to Teach and How to Teach scheduled to take place in May 2020.

In addition the following courses were developed to take place as pre-conference courses at the ICCH 2020 conference in Vienna:

- Curriculum Development for healthcare communication
- End of Life care conversations: identifying patients' goals, values and preferences
- Observational coding of healthcare communication: how and what?
- Shared Decision Making: Strengths and limitations of choices of definitions and measures for your research
- Knowledge translation and dissemination for health promotion

A decision will be made on how best to offer these courses in the near future either as online courses or post-pone their delivery until face to face courses are possible again.

The Teaching Committee (tEACH)

tEACH is the committee of EACH that aims to provide expertise, support, resources and networking opportunities for healthcare communication teachers across Europe and beyond. The tEACH committee at the end of 2020 consisted of 34 working members representing a variety of health care disciplines and 19 different countries.

In 2020, tEACH organized its work through the following 4 main project groups and aims:

Teaching tools: This subgroup leads the development of the searchable database of teaching tools available on the EACH website. This group will continue to collect teaching tools from communication teachers and refine the functions of this database. The Teaching Tools group is currently focusing on extending the database by sourcing videos of simulated or actual consultations that can be used to supplement teaching, particularly online.

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Cross cultural communication teaching: Teaching about Cross-cultural communication has become increasingly important due to an increase of diversity and multiculturalism in societies and with regards to enhanced migration of patients and health care providers. There are 5 tEACH members from five countries involved in this group.

Six month goals are:

1. To develop courses and workshops on how to teach cross cultural communication
2. To provide teaching tools in the area of cross-cultural communication
3. To finalise a scoping review in the form of a publication to reflect the international and multi-professional healthcare perspectives and educational outcomes of cross cultural communication teaching
4. To provide the theoretical, and practical tips on cross cultural communication teaching.

Assessment: This group offers support and training for trainers and teachers regarding the assessment of communication skills in health care across all professional groups.

For this purpose, the group has been collecting assessment tools and related resources to support teachers to organise their assessments of communication skills.

The group has also published an article about the general principles of assessing communication skills and recently finished a scoping review about the written assessment of communication skills in health care professions

Courses and support for trainers: This subgroup provides annual “Train the Trainer” courses on What to Teach, How to Teach, Curriculum Development and Assessment (in collaboration with the Assessment group).

The group has worked hard to expand its portfolio of courses during the global pandemic, with many courses being delivered virtually during 2020. New courses such as Teaching clinical communication skills online and Teaching Shared Decision Making will be added to the course offer for 2021.

Some highlight examples of tEACH activities during 2020 include:

- The support and further development of two new special interest groups namely Interprofessional education and Nursing Network for healthcare communication teaching and research.
- Please note that due to Covid-19 the Teaching Award will be postponed until the EACH hosted ICCH 2020 Part 2 Conference in April 2021.

The Research Committee (rEACH)

The aim of rEACH is to promote good quality communication research within EACH and to support the development of high quality researchers. These aims can be pursued by promoting networking, quality of research, international research collaboration and encouraging the development of new early-career researchers.

In 2020 the research committee (rEACH) continued consolidating its activity by working on the main pillars below:

1. Working with ‘yEACH’, the special interest group composed of researchers. yEACH has a ‘liaison’ with rEACH.
2. Training in Research on Communication in Healthcare: As was planned, rEACH is developing two courses, one on Coding tools to assess communication in healthcare, and another on conducting research on Shared decision making (SDM). The SDM course is being developed in collaboration with tEACH and designed to be offered partly together. Both courses will be offered pre-conference courses prior to ICCH 2020 Part II in April 2021. They are planned to be further developed into in-person courses. rEACH is further organizing a Summer School to be held online in September 2021.
3. Database/Sharing Information: rEACH is involved in conducting an updated and extension of a review on coding tools. Results will be incorporated in the online searchable database of research tools to code healthcare communication.
4. Write on research topics: rEACH is in the process of developing a plan for concise papers on research methodology (e.g., a brief overview of inductive and deductive methods to analyse communication) and research topics (e.g., introduction to nocebo/placebo effects) to be published in Patient education & Counseling
5. Networking: rEACH held a session during ICCH 2020 to discuss views on how to further promote networking among and support for EACH researchers. Plans are being made to foster connectivity between researchers, e.g. by raising awareness amongst EACH members about the possibilities for connection that already exist within EACH (i.e. Forums)

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and encourage participation (i.e. profile completion) (including exploring barriers for use), and organizing a series of seminars/webinars.

6. Social media presence: Plans are being made in collaboration with the Social Media Officers to increase rEACH output on Twitter and other channels, such as by weekly sharing articles and by providing evidence-based tips for communication to healthcare professionals.

All group leads have met with the chair and co-chairs via ZOOM conferences approximately every six weeks. The subgroups have led work on their project development and have had teleconferences as appropriate.

rEACH held one online full committee meetings in June 2020, attended by 19 members, and plans to meet again in February 2021. During the meeting, we have allowed time for fun (e.g., celebrating rEACH milestones, have a quiz) and swapping the roles of chairing, minute-taking, and timekeeping. We further dedicated time to work together on ongoing projects, and in break-out groups held in parallel (e.g., run a first draft proposal for the content of the rEACH SDM course; ask input for the format of the Summer School and for a possible peer-feedback platform). Finally, we prioritized projects and defined tasks and actions for the next 6 months. Members who do not actively contribute to rEACH work and meetings continue to be a challenge for achieving progress. We will discuss whether we should continue having one of the two meetings per year online, after covid-19 does not put restrictions on travel and meetings anymore. We had already included the possibility to attend in-person meetings via video-conferencing for selected parts of the in-person meetings, including work time, and will continue to do so.

rEACH was involved in the planning committee of ICCH 2020 and the current rEACH Chair and one of the Co-Chairs will be on the planning committee for ICCH 2022. rEACH will chair the Jozen Bensing Award committee. In consultation with the ICCH 2020 planning committee, the Research Award will be postponed to 2021 and awarded during ICCH 2020 Part II in April 2021.

Looking forward, rEACH plans to finalize the election process for Chair and Co-Chair in order that it can seek to replace the current leadership in 2021. A staggered approach to leadership transition is planned, in which one of the two current Co-Chairs will stay on for three month after the new Chair and Co-Chair have been installed, before stepping down.

The practice and policy committee (pEACH)

Current research originating from the field of implementation sciences emphasizes the limited ability of health systems to improve the quality of care by translating research evidence into health care practice and policy. This limitation also concerns the implementation of findings from health communication, a discipline that has successfully identified several health care areas where the improvement of communication and the use of evidence-based communication education can lead to optimal patient-centred care. pEACH is the EACH committee that targets policy-making and clinical practice in health communication. Its specific mission is to foster the application of health communication education and research into healthcare practice, professional educational programs, everyday clinical practice and policy. In 2020, pEACH continued to work on the following main projects:

Networking EACH and its activities: Knowledge dissemination and implementation are not isolated processes, but they presuppose an integrative exchange between research findings and the different stakeholders, i.e. creators and users of evidence. Engaging in networking activities is an important mechanism for knowledge dissemination as it results in the exchange of views and the creation of synergies for the improvement of professional practice. To prepare EACH for engaging in networking, pEACH delineated the profile of EACH as the leading International association for promoting effective communication between patients, relatives and health providers, as well as to identify what EACH can offer to enhance health communication at different levels of the health care system.

Knowledge creation: The second main activity of pEACH was to create a body of evidence on the value of specific interventions of health communication in relevant areas of health care practice. Scientific publications alone often cannot be directly translated in practice. Knowledge syntheses in a user-friendly format are important to address the needs of end-users. pEACH identified areas of healthcare where communication problems can negatively impact healthcare practice, and illustrated how health communication theories, models and tools (in their multifaceted format) and teaching approaches can be used to help solving these problems. In particular, there are two main projects in progress. The first one, called 'Evidence Snapshots', consists in the production of comprehensive but usable texts based on evidence from key areas of health communication research (e.g. shared-decision making). The second one, called "Position Papers Series", consists in the creation of full text papers that have a policy oriented framework and exploit further the content of the bullet point papers.

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All together, these texts and proposed publications aim at informing and enhancing policy making in the field and being able to speak to key health stakeholders external to the healthcare communication sector.

More specifically, in the course of 2020, within the 'Evidence Snapshots' project more topics have been added on the EACH website and their layout restyled. Each topic has also been enriched by an infographic, which is shared on the EACH Twitter account. Within the 'Position Papers Series', full articles have begun to appear regularly on the journal 'Patient Education and Counseling'.

Learning from experience: In pEACH there is a strong awareness that implementation projects should be led by theory and research, but when it comes to designing interventions previous experience is also fundamental. Given also the challenge of providing useful insights globally, while interventions are realized locally, the initiative started in 2019 called "Lessons from Implementation" has been further developed in 2020. The aim of this project is to produce resources that will allow all EACH members to learn from each other when designing and implementing projects that aim to impact healthcare systems by improving communication skills and practices. The first phase of this project has produced a publication on PEC. In 2020, work has continued on the development of a core evaluation framework for implementation projects, creating a repository of experiences, and identifying key steps to maintain the effects of the intervention in the long term.

In 2020 pEACH was composed of 26 members from eleven countries.

The Advisory Committee (AC)

In 2020 the AC held two online meetings, one linked at the ICCH 2020 online conference in September and one at the end of December. Items we worked on:

- The Porto Document was finalized: This contains the views of all national representatives on how the AC should function concerning content, process and relationships within EACH. This document also serves as a guide to new national and deputy national representatives, who become member of the AC.
- An article on the structure and function of the AC to be published in PEC in 2021.
- Guidelines for national and deputy national representatives, put together by the representatives themselves.
- Incorporating the Networking Committee (NC) into the AC. The reason why is that networking on a local or wider level is seen as a task for all country representatives, as stated in their guidelines. This NC in the AC will be guided by the chairs, and will be populated by members voluntarily on a needs based.
- Due to the current pandemic, the plan is to work in the future with online meetings on two separate timings. This will allow all members from different time zones to participate on the AC work.

The Networking Committee (NC)

The NC originated out of the subgroup work from tEACH, and became an independent committee with representation in the EC. As stated under 'strategy' and 'activities', networking in the world of communication in healthcare is key to the success of this organisation.

As networking on a local or wider level is seen as a task for all country representatives, as stated in the representatives' guidelines, the NC becomes part of the AC. It will be guided by the chairs, and will be populated by members voluntarily on a needs based.

The first action that needs to be undertaken will be networking during the upcoming ICCH 2020 part two in April 2021.

In 2020 the NC organized the networking activities at the ICCH online conference in September, with good feedback afterwards.

Administrative infrastructure and website

The administrative infrastructure of the association has continued to progress under our management company - SAS Events & Association Management. SAS provide full financial administration, membership administration, project management, event management, governance and procedure advice, meeting administration and communication with members.

Developments in administration over 2020 have been as follows:

- Administering the new membership offer including management of institutional membership applications and membership grant applications.
- Further work was done on creating a new website for EACH. The purpose of the new website is to improve the members area to enable greater interactivity between members & working groups, as well as making the main pages of the website more accessible & easier to navigate creating a fresh, new look.

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- Administrative support for the development of more courses from EACH through the creation of a small committee who meet every 6-8 weeks. This committee was disbanded in September 2020.
- Planning for the ICCH 2020 conference in conjunction with EACH members who form the planning committees. SAS will participate in planning meetings, and undertake all logistical planning/budgeting for the events.
- Social media support, monitoring the EACH Twitter account & posting about EACH events and other items requested by EACH committees as well as attending the social media committee meetings to discuss how to improve EACH's online profile & engagement. This role was passed on to the social media officers in October 2020 and the social media committee disbanded.
- Administer the EACH election process for President-Elect and Treasurer.
- Create monthly adverts for the Patient Education & Counseling journal at the request of the President-Elect

Donation fund

A donation fund was established in 2014, enabling members to provide financial assistance for people to attend EACH activities including conferences and workshops. Members have been able to donate to this fund when renewing their membership and when booking onto events. The fund stands at £1,482 at the end of 2020. The beneficiaries of this fund will be applicants who would otherwise find it difficult financially to participate in EACH activities. This might include people from less-developed countries, countries in financial difficulties and students.

Project Funding

During 2020 the Executive agreed to fund the following projects:

- tEACH courses grants for attendance for EACH members from low income countries (not applicable in 2020 as all courses were cancelled due to the COVID-19 pandemic)
- Work to re-design and restructure the EACH website for implementation in early 2020
- Development of 6 new courses to increase the breadth of topics offered by EACH
- An honorarium for two Social Media officers to manage and develop the EACH social media accounts

FUTURE PLANS

Implementing the EACH strategic plan

Over 2021, the association will continue to work on delivering its strategic plans, predominantly focussing on the following areas:

- **Website:** With the completion of the new website in 2020, feedback from EACH members and other stakeholders has revealed opportunities to enhance the new appearance and structure. The President-elect has been tasked to oversee this next phase of website refinement that will increase the functionality of the members only sections of the website as well as the user friendliness and accessibility of the public areas of the website. EACH has committed to paying an outside consult to help complete this website work.
- **Courses:** Given the ongoing restrictions on face to face meetings and international travel, course development and implementation efforts for 2021 will focus on adapting previously planned courses to be online offerings as pre-conference courses for the online ICCH 2020 part 2 meeting schedule for April 2021. Pre-conference online courses will include: Workplace-based Communication Skills Teaching & Learning; Observational Coding of Healthcare Communication; combined research and teaching courses on Shared Decisionmaking; and Knowledge Translation and Dissemination for Health Promotion course. Directors of the two other courses in development, Person-Centered Research in Communication in Healthcare (PREACH) and End of Life Conversations, felt these would not be amenable to being presented virtually so development completion and implementation will be postponed until face to face meetings are resumed. In addition, in Spring 2021 EACH will offer two addition courses: 1) a series of course sessions on How to Teach about Communication Online; and 2) an online offering of the existing What to Teach in Communication Skills Education course. Social Media: The EACH social media committee which includes the newly appointed Social Media officers will continue to meet periodically to try and increase EACH's online profile through Twitter, Facebook and other venues. This group will also increase their engagement with core EACH committees to generate consistent content of interest to be featured in social media posts.

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Provision of conferences

EACH will continue to provide a major international conference every 2 years with an intervening EACH Forum in the fallow year. The 2021 conference will be hosted by ACH and is not yet confirmed if this will be a hybrid or fully virtual event in October 2021. The 2022 ICCH conference will be hosted by EACH and the venue search for this conference is still underway. The conference organisation will be led and facilitated by SAS Event and Association Management.

FINANCIAL REVIEW

The association made a loss of £43,413 in the year which has decreased the total funds at 31 December 2020 to £137,576. There were no capital asset additions or disposals during the year. The Association is in good financial health and a full breakdown of 2020 financial activity is shown on the following pages. EACH continues its policy of holding £90,000 in reserve to ensure the association is able to continue its basic functions in the event of loss of income for one year.

Responsibilities of the Trustees

Law applicable to charities in England and Wales requires the trustees to prepare financial statements for each financial year, which give a true and fair view of the Charity's financial activities during the year and of its financial position at the end of the year.

In preparing those financial statements, the trustees are required to

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable accounting standards and statements of recommended practice have been followed subject to any departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The Trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and to enable them to ensure that the financial statements comply with applicable law and regulations. They are also responsible for safeguarding the assets of the Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

ON BEHALF OF THE TRUSTEES:



.....
Marcy Rosenbaum - President

Dated: 29-11-2021.....

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES

I report to the charity trustees on my examination of the accounts of the charity for the year ended 31 December 2020 which are set out on pages 12 to 19.

RESPONSIBILITIES AND BASIS OF REPORT

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

I report in respect of my examination of your charity's accounts as carried out under section 145 of the Act and in carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the Act.

INDEPENDENT EXAMINER'S STATEMENT

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

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

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



Nicholas Jones FCCA
Fawcetts LLP
Chartered Accountants
Windover House
St Ann Street
Salisbury
SP1 2DR

Date: 11 November 2021

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

STATEMENT OF FINANCIAL ACTIVITIES
for the year ended 31 December 2020

CHARITY NUMBER: 1159050

	Notes	2020			2019
		£ Unrestricted	£ Restricted	£ Total	£ Total
INCOME AND EXPENDITURE					
INCOME AND ENDOWMENTS FROM:					
Donations and subscriptions	2	36,866	1,482	38,348	42,111
Charitable activities	3	92,033	-	92,033	130,481
Investments	4	-	-	-	12,693
Total		<u>128,899</u>	<u>1,482</u>	<u>130,381</u>	<u>185,285</u>
EXPENDITURE ON:					
Charitable activities	5	173,794	-	173,794	224,317
Total		<u>173,794</u>	<u>-</u>	<u>173,794</u>	<u>224,317</u>
NET INCOME/(EXPENDITURE) FOR THE YEAR		(44,895)	1,482	(43,413)	(39,032)
Funds brought forward at 1 January		176,689	4,300	180,989	220,021
TOTAL FUNDS CARRIED FORWARD AT 31 DECEMBER		<u>131,794</u>	<u>5,782</u>	<u>137,576</u>	<u>180,989</u>

The Statement of Financial Activities includes all gains and losses recognised in the period.

All incoming resources and resources expended derive from continuing activities.

The notes form part of these financial statements

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

BALANCE SHEET
31 December 2020

CHARITY NUMBER: 1159050

		2020		2019	
	Notes	£	£	£	£
FIXED ASSETS:					
Tangible	7		3,420		4,310
CURRENT ASSETS:					
Debtors	8	24,695		44,137	
Cash at bank and in hand	9	<u>149,929</u>		<u>184,989</u>	
		174,624		229,126	
CREDITORS: Amounts falling due within one year	10	<u>(40,468)</u>		<u>(52,447)</u>	
NET CURRENT ASSETS:			<u>134,156</u>		<u>176,679</u>
TOTAL ASSETS LESS CURRENT LIABILITIES:			<u>137,576</u>		<u>180,989</u>
FUNDS:					
Unrestricted funds	11		131,794		176,689
Restricted funds	11		<u>5,782</u>		<u>4,300</u>
			<u>137,576</u>		<u>180,989</u>

ON BEHALF OF THE TRUSTEES:



.....
Marcy Rosenbaum - President

Approved by the trustees on: ...29-11-2021.....

The notes form part of these financial statements

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

STATEMENT OF CASH FLOWS
31 December 2020

		2020	2019
		£	£
	Notes		
Cash flows from operating activities:	13	(35,060)	(49,29)7
Cash flows from investing activities:			
Royalty income and bank interest		-	12,693
Purchase of tangible fixed assets		-	-
Cash provided by (used in) investing activities		-	12,693
Change in cash and cash equivalents for the year		(35,060)	(36,604)
Cash and cash equivalents brought forward at 1 January		184,989	221,593
Cash and cash equivalents carried forward at 31 December	9	<u>149,929</u>	<u>184,989</u>

**NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2020**

1. ACCOUNTING POLICIES

Basis of accounting

The financial statements have been prepared under the Charities Act 2011 on the historical cost convention, except investment assets that are carried at market value. The financial statements are prepared in accordance with applicable accounting standards and the Statement of Recommended Practice on Accounting and Reporting by Charities: Charities SORP 2016 FRS102.

EACH: International Association For Communication In Healthcare meets the definition of a public benefit entity under FRS102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy notes.

The accounts are presented in Sterling (£) which is the functional currency of the charity and are prepared on a going concern basis. In the opinion of the trustees the charity will be able to operate for the foreseeable future.

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 funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The cost of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

Incoming resources

All incoming resources are included in the statement of financial activities when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy.

Voluntary income and donations are accounted for as received by the charity.

Membership subscriptions are recognised in the financial year that they relate to.

Training income is recognised in the period that the course takes place. Income received for courses occurring in future periods is deferred and recorded as a liability.

Investment income is recognised when it is receivable.

In accordance with the Charities SORP (FRS102), general volunteer time is not recognised in the accounts. On receipt, donated professional services and donated facilities are recognised as income on the basis of the value of the gift to the charity which the charity would be willing to pay to obtain services or facilities of equivalent economic benefit on the open market. A corresponding amount is then recognised in expenditure in the period of receipt.

Resources expended and irrecoverable VAT

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 attributed to particular headings they have been allocated to activities on a basis consistent with use of the resources.

Expenditure on charitable activities includes the costs of delivering training courses and events undertaken to further the purposes of the charity and their associated support costs.

Expenditure includes any VAT which cannot be fully recovered and is reported as part of the expenditure to which it relates.

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2020

1. ACCOUNTING POLICIES continued

Tangible fixed assets

All assets costing over £1,500 are capitalised. Tangible fixed assets are depreciated on a straight line basis at the following rates:

Computer equipment and software – 10% per annum

Debtors

Debtors are measured at their recoverable amount.

Creditors and provisions

Creditors and provisions 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 and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

Foreign currency

Transactions are carried out primarily in euros and pounds sterling. Foreign currency balances at the year end are translated into pounds sterling at the rate ruling at the balance sheet date. Transactions in foreign currencies are translated at the actual rate on the day of the transaction.

2. VOLUNTARY INCOME

	Unrestricted £	Restricted £	2020 £	2019 £
Donations	-	1,482	1,482	996
Membership subscriptions	<u>36,866</u>	<u>-</u>	<u>36,866</u>	<u>41,115</u>
	<u>36,866</u>	<u>1,482</u>	<u>38,348</u>	<u>42,111</u>

3. CHARITABLE ACTIVITIES

	Unrestricted £	Restricted £	2020 £	2019 £
Training income	41,663	-	41,663	68,519
Forum 2019 income	-	-	-	61,962
Conference income	<u>50,370</u>	<u>-</u>	<u>50,370</u>	<u>-</u>
	<u>92,033</u>	<u>-</u>	<u>92,033</u>	<u>130,481</u>

4. INVESTMENT INCOME

	Unrestricted £	Restricted £	2020 £	2019 £
Royalties	-	-	-	12,693
Bank interest	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
	<u>-</u>	<u>-</u>	<u>-</u>	<u>12,693</u>

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

**NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2020**

5. EXPENDITURE ON CHARITABLE ACTIVITIES

	Membership Benefits £	Research, Teaching Events and Courses £	2020 Total £	2019 Total £
Professional subscriptions	10,833	-	10,833	9,256
Training & research courses costs, including Events/conferences	-	111,575	111,575	162,027
Governance costs	150	1,350	1,500	1,500
Support costs	-	49,886	49,886	51,534
	<u>10,983</u>	<u>162,811</u>	<u>173,794</u>	<u>224,317</u>

The support costs relate to the two key charitable activities and these are split between outsourced administration of £43,979 (2019 - £43,641) and general office costs of £5,907 (2019 - £7,893).

Governance costs represent accountancy fees.

6. NET INCOME/(EXPENDITURE)

This is stated after charging:

	2020 £	2019 £
Independent examiners fee	1,500	1,500
Depreciation	<u>890</u>	<u>890</u>

7. TANGIBLE FIXED ASSETS

	2020 £
Cost	
As at 31 December 2019 and 2020	<u>9,733</u>
Amortisation	
As at 31 December 2019	5,423
Charge for the year	<u>890</u>
As at 31 December 2020	<u>6,313</u>
Net book value at 31 December 2020	<u>3,420</u>
Net book value at 31 December 2019	<u>4,310</u>

EACH: INTERNATIONAL ASSOCIATION FOR COMMUNICATION IN HEALTHCARE

**NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2020**

8. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2020	2019
	£	£
Trade debtors	9,830	23,725
Other debtors	<u>14,865</u>	<u>20,412</u>
	<u>24,695</u>	<u>44,137</u>

9. CASH AND CASH EQUIVALENTS

	2020	2019
	£	£
Cash at bank and in hand	<u>149,929</u>	<u>184,989</u>

10. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2020	2019
	£	£
Trade creditors	19,361	30,516
Other creditors	1,951	1,951
Accruals and deferred income	<u>19,156</u>	<u>19,980</u>
	<u>40,468</u>	<u>52,447</u>

11. FUNDS

	Balance at 1 January 2020 £	Movement in funds		Balance at 31 December 2020 £
		Incoming resources £	Resources expended/transfers £	
Unrestricted funds	176,689	128,899	(173,794)	131,794
Restricted funds	<u>4,300</u>	<u>1,482</u>	<u>-</u>	<u>5,782</u>
	<u>180,989</u>	<u>130,381</u>	<u>(173,794)</u>	<u>137,576</u>

Unrestricted funds

These are funds which can be used, at the discretion of the trustees, in accordance with the charitable objects of the charity.

Restricted funds

Specific donations collected from members can be used to assist people who may require financial assistance to attend EACH activities.

NOTES TO THE FINANCIAL STATEMENTS
for the year ended 31 December 2020

12. TRUSTEES REMUNERATION AND EXPENSES

A number of trustees are involved in the delivery of training and have been paid for their services and received out of pocket expenses which is in agreement with the constitution of the charity.

Services provided: No trustee were paid during 2020 (2019: 1 trustees £625).

Expenses received for accommodation, travel and subsistence: No trustees made claims for such costs (2019: 5 trustees £7,346).

13. RECONCILIATION OF NET INCOME/(EXPENDITURE) TO NET CASH FLOW FROM OPERATING ACTIVITIES

	2020	2019
	£	£
Net income/(expenditure) for the year as per the Statement of Financial Activities	(43,413)	(39,032)
Add back amortisation	890	890
Less investment income	-	(12,693)
(Increase)/decrease in debtors	19,442	(34,142)
Increase/(decrease) in creditors	<u>(11,979)</u>	<u>35,680</u>
Net cash provided by/(used in) operating activities	<u>(35,060)</u>	<u>(49,297)</u>