



REPORT OF THE TRUSTEES AND
UNAUDITED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022
FOR
FUTURE HEALTH AFRICA

Barretts
Chartered Accountants &
Chartered Tax Advisers
22 Union Street
Newton Abbot
Devon
TQ12 2JS

CONTENTS OF THE FINANCIAL STATEMENTS for the year ended 31st December 2022



	Pages
Report of the Trustees	3-16
Independent Examiner's report	17
Statement of Financial Activities	18
Balance Sheet	19
Notes to Financial Statement	20-23
Detailed Statement of Financial Activities	24-25



CHARITY COMMISSION
FOR ENGLAND AND WALES

Trustees' Annual Report for the period		
From 1st January 2022	to	31st December 2022
Charity name: Future Health Africa (FHA)		
Charity registration number: 1182182		

Objectives and Activities	
The purposes of the charity as set out in its governing document	<p>The objects of the CIO are, for the public benefit, particularly, but not exclusively, in Africa and other low/middle income countries (LMICs):</p> <ol style="list-style-type: none"> (1) the relief of sickness and the preservation of health, particularly but not exclusively by promoting the sharing of healthcare knowledge and skills and assisting in the provision of medical treatment; (2) the advancement of education in healthcare, in particular by the delivery of quality improvement and leadership training in a healthcare context and other health- related education and training to those involved in health and care delivery at all levels and to the wider public, and by raising awareness of global health issues; (3) to develop the capacity & skills of members of socially and economically disadvantaged communities in LMICs in which the CIO is working, in such a way that they are better able to identify and help meet their needs and to participate more in society.
The main activities in relation to those purposes for the public benefit, in particular, the activities, projects or services identified in the accounts.	<p>In 2022, the charity had 8 workstreams (with a 9th in development) directed at achieving our objectives. Not all are active every year. Each is described below along with the activities conducted during the period of this report. All of the work was conducted in Kenya. Further detail can be seen at www.futurehealthafrica.org</p> <p style="text-align: center;">All of our work aligns with the Sustainable Development Goals and in particular goals 1,3,4,5,10,17</p>

	 
	<p>WORKSTREAM 1: TRAUMA TEAM</p> <p>Leads: Mr Christoph McAllen (Consultant Orthopaedic Surgeon, Plymouth, UK) Dr Samuel Ndanya (Consultant Orthopaedic Surgeon, Nanyuki, Kenya) Mr Darren Munn (Surgical Practitioner, Torbay Hospital, UK) Dr Will Jewell (Consultant in Anaesthetics, Truro, UK) Dr Mary Nduta (Medical Doctor, Nairobi, Kenya)</p> <p>Description: This is a clinical & training project in which a joint UK and Kenyan team of skilled professionals of different cadres undertake orthopaedic trauma activities in Kenyan health facilities.</p> <p>Trauma Team activities are categorised into Bronze, Silver and Gold. All services are delivered at the highest standard, with improving quality as a central aim.</p> <p>Bronze: immediate & direct patient care through</p> <ul style="list-style-type: none"> high quality consultations, advice and where appropriate, both operative and non-operative treatment to alleviate pain, suffering and disability <p>Silver: learning opportunities/ new skills</p> <ul style="list-style-type: none"> side-by-side working with exchange of knowledge & skills in relevant disciplines (surgery, anaesthesia, nursing, operating department practice, radiography, physiotherapy) developing a safer surgical environment exchanging knowledge on safe general and regional anaesthesia and pain management <p>Gold: sustaining improvement/ development</p> <ul style="list-style-type: none"> identifying areas to develop a stepwise pathway supporting local need and wishes to change developing non-operative treatment options for local patients providing ongoing support and communication outside of projects inclusion of Kenyan orthopaedic trainees in the team promotes better future practice presentations at national academic meetings to share challenges and best practice
	<p>Activities undertaken:</p> <p>Following an approach for potential partnership from St Joseph's Mission Hospital & Trauma Centre in Nyabondo, Kisumu County, a number of on-line meetings were held followed by a visit in person in April 2022 by the Chair of Trustees (Kerri Jones). Following this positive visit, Darren Munn (Trauma Team Lead) applied for and gained a THET (Tropical Health & Education Trust) grant of £5,000 to establish a new health partnership. A one-week visit took place in November/December 2022 following which an MoU was signed and provisional plans were made for a project to be held there in November 2023. It is hoped that the brand new government-funded Trauma Centre built in St Joseph's grounds will be open and functioning by then.</p>

	<p>A visit was also made to Kisii County & Referral Hospital to explore opportunities there raised during a visit/talk from Kerri Jones at a Kenya-UK Health Alliance (KUKHA) Summit meeting earlier in the year.</p> <p>Planning and fundraising took place for a Trauma Team visit to be held in Nanyuki Teaching and Referral Hospital in Jan/Feb 2023.</p> <p>The UK Lead orthopaedic surgeon, Mr Christoph McAllen was appointed as a Visiting Lecturer to the University of Nairobi.</p>
	<p>WORKSTREAM 2: GRASPIT</p> <p>Leads: Dr Matt Halkes (Consultant in Anaesthetics/Critical Care, Torbay Hospital, UK) Kiruja Gitonga Jason (Senior Nurse, Kenyatta National Hospital, Kenya) Christine Musee (Director of Nursing for Surgery, Kenyatta National Hospital) Dr Mike Swart (Consultant in Anaesthetics/Critical Care, Torbay Hospital, UK)</p> <p>Description: GRASPIT (Global Recognition & Assessment of the Sick Patient & Initial Treatment) is a one-day course which equips clinicians with a structured systematic approach to the management of the deteriorating acutely ill patient. GRASPIT has been shown to increase a clinician's confidence in the management of these challenging patients. The four key principles of GRASPIT are:</p> <ol style="list-style-type: none"> 1. Early recognition of deteriorating acutely ill patients 2. Systematic approach to the assessment of patients 3. Early initial treatment 4. Team working through effective communication <p>When introduced to a new health facility, an introductory 3-day course is run which includes a 'training of trainers' course. Following this, local trainers are able to continue to deliver the course to more healthworkers. Initial training is conducted by Kenyan trainers with support from the UK faculty. The UK lead (Dr Matt Halkes) holds oversight of standards of delivery, strategy and grant applications within his remit.</p>
	<p>Activities undertaken:</p> <p>The GRASPIT team started planning for restarting its work and lead, Dr Matt Halkes, made a one-week visit to Nairobi, St Joseph's Hospital and Kisii Hospital and University in November/December.</p> <p>Professor Raymond Oigara, the Dean of the Health Faculty at Kisii University is particularly keen on experiencing a GRASPIT course and planning started for this to take place in 2023.</p> <p>For part of the year, GRASPIT had the benefit of 2 'Improving Global Health (IGH)' fellows funded by Health Education England (HEE), one of whom (Dr Rosie Lyus) accompanied the team visit to Nairobi in Nov/Dec 2022. She scoped, along with Dr Mike Swart, the potential for re-establishing the course at Kenyatta National Hospital. Dr Damaris Adebambo is concentrating on the work with Kisii. The Fellows are both junior doctors who are paid by HEE a day a week for a 6-12 month period to support GRASPIT.</p> <p>In June 2022 Dr Kerri Jones met with Dr John Wanyungu, Deputy Director of Community Health for Kenya, and he is keen for a version of GRASPIT, suitable for Community Health Volunteers and Community Health Assistants, to be developed. Discussions are now underway to try and develop this along with a review of the current materials for delivery to trained healthworkers.</p>
	<p>WORKSTREAM 3: QUALITY IMPROVEMENT & LEADERSHIP (q4a)</p> <p>Lead: Dr Kerri Jones</p>

	<p>Description: This workstream recognises that ‘sick systems’ prevent better patient outcomes. Our q4a (quality for all) faculty has designed the SPRINGBOARD course to empower frontline healthcare workers to improve quality of care by learning and applying ‘The Science of Improvement’ and the ‘Art of Leadership’. The course normally runs for 10 days and imparts knowledge of improvement methodology, team working, leadership, patient-centred care and an understanding of how to create a positive culture for change. The skills are learned through doing real live quality improvement (QI) projects.</p>
	<p>Activities undertaken:</p> <p>2022 was the 2nd year of our FCDO (formerly DFID) grant which was directed at testing if teaching QI and leadership skills to people running Community Health Units (CHUs). These people were Community Health Volunteers, Community Health Assistants, and subcounty/county community focal people. The aim was to help them to impact positively on maternal and newborn mortality and morbidity. In 2021 the project had run in Migori County but moved to Laikipia County in late 2021 and continued until 30th November 2022.</p> <p>Because of the travel restrictions imposed by COVID-19, activity and grant monies were delegated to a downstream partner to deliver on our behalf. Our chosen partner was LVCT Health, a Kenyan NGO with longstanding links to the Liverpool School of Tropical Medicine. They successfully delivered, in 2 CHUs,</p> <ul style="list-style-type: none"> • a 3-day training in QI at CHU level with the formation of QI teams • a 3-day training in leadership • a further 3-day training in QI • a mid-term Learning event (2 days) April 2022 • a final Learning Event (one day) November 2022 • coaching and mentoring of QI teams focussing on maternal outcomes <p>Workstream lead Kerri Jones retained overall management of the project along with reporting responsibilities. She was able to attend the mid-term Learning Event in April 2022. The training materials used were LVCT QI Community framework complemented by FHA’s Leadership course. This proved to be a successful blend.</p> <p>Grant management was delegated by the FCDO to Mannion Daniels with whom there were regular communications.</p> <p>Findings (brief summary) were</p> <ul style="list-style-type: none"> • CHVs were unclear about their role and had received insufficient training • Data collection was not happening • CHAs were not supervising CHVs • Sub-county staff were not adequately supervising CHAs • County staff were not focussing on Community Health • CHVs were lacking motivation due to lack of remuneration <p>The Learning Events created the opportunity to share the work and produce Action Plans and the county has indicated ongoing commitment to continue and spread the work.</p> <p>Impact:</p> <ul style="list-style-type: none"> • CHVs increased household visits • Pregnant women attended ante-natal clinics more frequently • More women sought a skilled birth attendant <p>All grant targets were met. Clearly QI and Leadership training impacts positively at Community level. A follow-up visit to Migori County, where we had worked in 2021, took place.</p> <p>The findings from this project will be used to inform further grant applications to identify and test further facilitative strategies to help CHVs in their work.</p>

	<p>q4a was fortunate to be allocated an HEE IGH Fellow (as for GRASPIT – see above) for one day per week. The focus of their work has been to develop accessible QI course materials where SPRINGBOARD cannot be delivered in person. UPBEAT is now available at https://open.plymouth.ac.uk/course/view.php?id=210 . A testing site in a LMIC is being sought.</p> <p>Communication continued with the Society for Quality Healthcare Kenya (SQHK).</p> <p>Kerri Jones visited St Joseph's, Nyabondo and Kisii hospital/University where strong interest was expressed in QI and leadership training. Resources need to be found to enable this to happen.</p>
	<p>WORKSTREAM 4: COMMUNITY</p> <p>Leads: Dr Lucy Obolensky Dr Kerri Jones (for QI work)</p> <p>Description: This project aims to improve health outcomes in rural areas of Kenya. It includes working with conservation NGOs (such as Northern Rangelands Trust and Lewa Wildlife Conservancy) and the Ministry of Health.</p> <p>There is a new focus on teaching QI skills at community level.</p>
	<p>Activities undertaken:</p> <p>Community work continued through the QI & Leadership work described in the q4a section above. An FCDO grant of £48,841 allowed us to work (through LVCT Health) with two Community Health Units in Laikipia County (Naibor & Powys) to improve perinatal care of pregnant mothers.</p> <p>The Technical Assistance work with the Northern Rangelands Trust is no longer undertaken under the FHA banner.</p>
	<p>WORKSTREAM 5: TEAM TALK</p> <p>Lead: James Lyon-Taylor</p> <p>Description: Team Talk seeks to directly improve the lives of Kenyan girls, enabling them to be aspirational and play a fuller role in the family and the wider community. It encourages boys to develop a greater level of respect for the girls. It uses TAG rugby in rural primary schools alongside classroom sessions to address gender inequality. Boys and girls to play together, developing teamwork and mutual understanding.</p>
	<p>Activities undertaken:</p> <p>Projects were run in</p> <ul style="list-style-type: none"> • February 2022 <ul style="list-style-type: none"> ○ Borana hosted its 7th Team Talk project. Volunteers from Kenya and Future Health Africa spent 5 days working with Sangaa school and community delivering <ul style="list-style-type: none"> ▪ Education sessions ▪ Tag rugby tournament • July 2022 <ul style="list-style-type: none"> ○ Activities in Gundua - Kisima, Ereri - Ol Pejeta, Leparua – Lewa, Enaikashoma & Ethi – Borana delivering <ul style="list-style-type: none"> ▪ Education sessions ▪ Tag rugby tournament <p>This activity was funded courtesy of the ATLAS FOUNDATION to whom we are very grateful.</p> <p>Team Talk activity will move to become part of this Foundation and ceased to be a FHA workstream on 31st December 2022.</p>
	<p>WORKSTREAM 6: MATERNITY</p>

	<p>Lead: Jacq Crow</p> <p>Description: The overarching objective of the 3 midwife members of the Maternity team is to reduce maternal mortality & morbidity through education of healthworkers, traditional birth attendants and mothers in safer childbirth practices. They have delivered training in</p> <ul style="list-style-type: none"> • Nyahururu (Laikipia County) • Communities around Lewa Conservancy (Laikipia/Meru/Isiolo counties) • Marsabit County • Pumwani (major maternity centre in Nairobi) • Kenyatta National Hospital (KNH) <p>The focus of the teaching is management of the most common emergencies in maternity/obstetric care ie haemorrhage, sepsis, pre-eclampsia/eclampsia, complications of labour (eg obstructed labour).</p>
	<p>Activities undertaken:</p> <p>A scoping exercise was undertaken in St Joseph's Hospital, Nyabondo. Ongoing work is taking place to understand if FHA can meet any of their needs.</p> <p>No other activity took place.</p>
	<p>WORKSTREAM 7: EMERGENCY MEDICINE</p> <p>Description: The purpose of the Emergency Medicine (EM) stream is to improve patient outcomes in Emergency Departments (EDs).</p>
	<p>Activities undertaken:</p> <p>Most of this work was taking place as part of the South West UK EM training programme. This workstream has now moved to a charity with a specific focus on Emergency Medicine.</p>
	<p>WORKSTREAM 8: BURSARIES</p> <p>Description:</p> <p>When our charity resources allow, we support courses and study visits for LMIC individuals. These may take place in either Kenya or the UK.</p>
	<p>Activities undertaken:</p> <p>None.</p>
	<p>WORKSTREAM 9 (emergent): STORYTELLING/THEATRE ARTS</p> <p>Description: A new project is under consideration/development to use storytelling and theatre arts to improve health & wellbeing in adolescents.</p>
	<p>Activities undertaken:</p> <p>No activity took place.</p> <p>It was decided by the workstream lead that this work would not progress and it ceased to become part of FHA's portfolio on 31st December 2022.</p>
Public Benefit	<p>We confirm that trustees have regard to the guidance issued by the Charity Commission on public benefit and have considered https://www.gov.uk/government/publications/public-benefit-the-public-benefit-requirement-pb1. They conclude that FHA met public benefit requirements in 2022.</p>

Additional information	
Policy on grant making	FHA has not to date awarded any grants. Bursaries are decided upon using the charity's agreed policy 'Bursaries'.
Policy on social investment including program related investment	The charity has not utilised social investment finance.

Contribution made by volunteers	<p>All of the activities of the charity, apart from book-keeping, accountancy, web support and some administrative tasks are done on a voluntary <i>pro bono</i> basis.</p> <p>Many project leads' visits to Kenya are self-funded.</p> <p>All Trauma Team volunteers and some other volunteers raise money themselves to be able to take part.</p> <p>Trustees contribute their time voluntarily.</p>
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Achievements and Performance	
Summary of the main achievements of the charity, identifying the difference the charity's work has made to the circumstances of its beneficiaries and wider benefits to society as a whole.	<p>The charity was able to take positive steps to re-establish its work following the restrictions of the COVID-19 pandemic.</p> <p>Achievements: The charity's achievements in brief were:</p> <p>Trauma Team: New partnerships were fostered - worked with St Joseph's Nyabondo to establish a project in late 2023. Planning for Nanyuki Jan/Feb 2023.</p> <p>GRASPIT: A successful scoping visit took place in November/December building relationships with Kenyatta National Hospital and Kisii Hospital / University. Training for healthworkers will result.</p> <p>q4a: successfully completed FCDO grant delivery and opened discussions with Kisii/Nyabondo re potential work. Developed on-line training materials now hosted on the University of Plymouth website. These will enable remote teaching of QI & Leadership skills.</p> <p>Community: FCDO grant has enabled improvements in peri-natal care in Migori and Laikipia counties.</p> <p>TeamTalk: 2 successful projects – moved outside FHA to be a project under its major funder, the Atlas Foundation.</p> <p>Maternity: scoping work in SW Kenya.</p> <p>Emergency Medicine: moved out of FHA.</p> <p>Bursary: No funds allocated.</p> <p>Public benefit:</p> <p>All projects have complied with the requirement for public benefit.</p> <p>The TRAUMA clinical projects have sought to alleviate pain, disability and suffering through direct patient care. Treatment has been open to any member of the public in Kenya and is particularly directed at those who cannot otherwise access care because of geography or poverty.</p> <p>GRASPIT and q4a taught healthworkers the skills they need to enhance care of the public who they serve.</p> <p>Community projects enhance medical services available to communities and individuals.</p>

	<p>TeamTalk is directed at improving the life-chances of young rural children and is available to all.</p> <p>Maternity and Emergency Medicine projects improve education in these specialties for the benefit of any patient receiving services from those trained.</p> <p>The charity trustees believe that the projects deliver the requirement for public benefit and volunteers also gained personal and professional development that they will apply for further public benefit in their individual environments in both the UK and Kenya.</p> <p>FHA Trustees are pleased to consolidate its workstreams and projects around well-being and healthcare. From end 2022, FHA workstreams will be</p> <ol style="list-style-type: none"> 1. Trauma Team 2. GRASPIT 3. QI & Leadership training (SPRINGBOARD) 4. Community <ol style="list-style-type: none"> a. QI b. Maternity 5. Bursaries will be supported when funds allow.
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Additional information	
Achievements against objectives set	All major objectives from the agreed FHA Activity Plan for 2022 were met.
Performance of fundraising activities against objectives set	All necessary funds were raised from volunteer contributions, donations and grants.
Investment performance against objectives	The charity has no investments.
Other	<p>Trustees: Judy Ravenscroft and Isabelle Risso-Gill resigned due to work pressures. Carrie Piper was appointed with expertise in finance. Dr Caroline Dimond was appointed (start 2023) with expertise in Public Health.</p> <p>Volunteers: FHA continued to be led and run by volunteers. Paid work was for bookkeeping, accounting, web support and insurance purposes only.</p>

Financial Review	
Review of the charity's financial position at the end of the period	<p>At the end of the financial year on 31.12.2022, the charity had assets of £55,126, £35,466 of which was restricted. Funds are held to cover future activity, including planned trips to Kenya.</p> <p>The charity reserves £10,000 as contingency in any one year to cover any unanticipated events or incidents.</p>
Statement explaining the policy for holding reserves stating why they are held	Trustees allocate a reserve figure when agreeing the activity plan for the forthcoming year. It is based on the nature of the projects planned for that year and is to cover any unexpected events.

Amount of reserves held	As at 31.12.2022, the charity held free reserves of £19,660. Although this was in excess of the stated policy, plans are in place to upgrade processes in 2023, including employment of administrative/management assistance.
Reasons for holding zero reserves	n/a
Details of fund materially in deficit	n/a
Explanation of any uncertainties about the charity continuing as a going concern	n/a

Additional information	
The charity's principal sources of funds (including any fundraising)	<ul style="list-style-type: none"> • volunteer contributions • donations • grants • fundraising events • significant project leads' personal contributions • major contribution from project leads, trustees and volunteers 'in kind'
Investment policy & objectives including any social investment policy adopted	The charity has no investments.
A description of the principal risks facing the charity	<p>The charity has developed a risk register.</p> <p>Principal risks identified</p> <ul style="list-style-type: none"> • safeguarding • travel associated risks • local societal conflict • sickness of volunteers • non-engagement of participants in LMIC • healthworker strikes in LMIC • availability of project leads • misuse of finances for projects (though minimal amounts are delegated so risk is very low)
Research	<p>Abstract submitted to ISQuA Feb 2022</p> <p>QUALITY IMPROVEMENT AND LEADERSHIP SKILLS FOR THE IMPROVEMENT OF PATIENT CARE IN KENYA</p> <p>Xavier Frisch*, Timothy Panga, Kerri Jones, David Barkwill</p>

Structure, Governance and Management	
Description of charity's trusts:	None
Type of governing document	CIO Constitution plus policies listed below
How is the charity constituted?	CIO
Trustee selection methods	There is an agreed Trustee Management Policy which includes the appointment process

Additional information	
Policies and procedures adopted for the induction and training of trustees	<ol style="list-style-type: none"> 1. Bursaries 2. Code of Conduct & Human Rights 3. Complaints & Whistleblowing 4. Conflict of Interest 5. Financial management including Procurement and Gifts & Hospitality 6. Anti-fraud, bribery, corruption & money-laundering 7. Grant Management 8. Human Resources 9. Needlestick (Sharps) Injury 10. Risk Management (and RAID - risk register) 11. Safeguarding 12. Trustee management 13. Volunteer management 14. Monitoring, Evaluation & Learning
Organisational structure	See attached organogram
Relationship with any related parties	<p>Partnerships/Associations: FHA believes in working with and through local organisations and in building relationships with academics in both countries. These relationships continue to help us to maintain alignment with Kenyan needs, strategy & policy and therefore maximise our efforts.</p> <p>Society for Quality Healthcare Kenya (SQHK) National Resuscitation Council for Kenya (NRCK) LVCT Health (Kenya) Kenya Orthopaedic Association (KOA)</p> <p>St Joseph's Mission Hospital (Nyabondo, Kisumu County, Kenya) Laikipia Health Services</p> <p>University of Nairobi (Kenya) University of Plymouth (UK) through its Global Health Collaborative</p> <p>Tropical Health & Education Trust (THET)</p> <p>South West International Development Network (SWIDN)</p> <p>Kenya-UK Health Alliance: The charity became a member of the Kenya -UK Health Alliance (KUKHA). Kerri Jones gave presentations at its inaugural summit meetings in Kenya (June 2022) and in the UK (July 2022). She is now a member of the KUKHA Steering Committee</p>

Reference and Administrative details	
Charity name	Future Health Africa
Other name the charity uses	n/a but its predecessor charity was the unincorporated Exploring Global Health Opportunities (now closed)
Registered charity number	1182182
Charity's principal address	15 Platway Lane Shaldon Teignmouth Devon TQ14 0AR

Names of the trustees who manage the charity				
	Trustee name	Office (if any)	Dates acted if not for whole year	Name of person (or body) entitled to appoint trustee (if any)
1	Kerri Jones	Chair		Board of Trustees
2	Nicholas Roberts	Vice-Chair		
3	Michael Wake			
4	Judy Ravenscroft		01.01.22 – 05.11.22	
5	Lydia Okutoyi			
6	Isabelle Risso-Gill		01.01.22 – 30.06.22	
7	Carrie Piper		05.04.22 – 31.12.22	
8	Caroline Dimond		Appointed 01.03 23	

Corporate trustees – names of the directors at the date the report was approved	
Director name	n/a

Name of trustees holding title to property belonging to the charity	
Trustee name	n/a

Funds held as custodian trustees on behalf of others	
Description of the assets held in this capacity	Nil
Name and objects of the charity on whose behalf the assets are held	Nil
Arrangements for safe custody & segregation of such assets from the charity's own assets	Nil


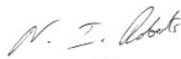
Names and addresses of advisers		
Type of adviser	Name	Address
Bookkeeping	Anita Harper	Devon Square Charity Accounting Ltd 14 Torquay Road Newton Abbot Devon TQ12 1AJ
Independent Examiner	Barrett's Accountants	22 Union St Newton Abbot Devon TQ12 2JS
In-country (Kenya)	Dr Samuel Ndanya Dr Tim Panga Dr Mary Nduta	c/o Nanyuki Hospital, Laikipia County, Kenya

Exemptions from disclosure
n/a

Declarations

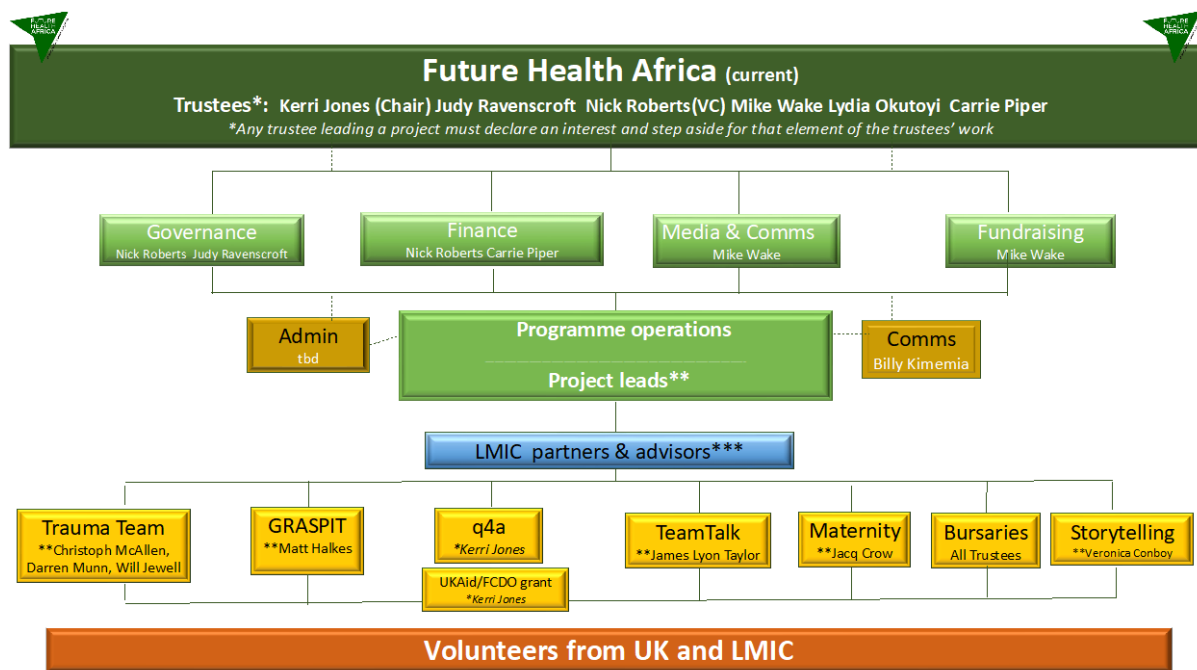
The trustees declare that they have approved the trustees' report above.

Signed on behalf of the charity's trustees

Signature(s)		
Full name(s)	Dr Kerri Jones	Dr Nick Roberts
Position	Chair of Trustees	Vice Chair of Trustees
Date	17 th April 2023	

Organisational Structure (Organogram) & Advisers

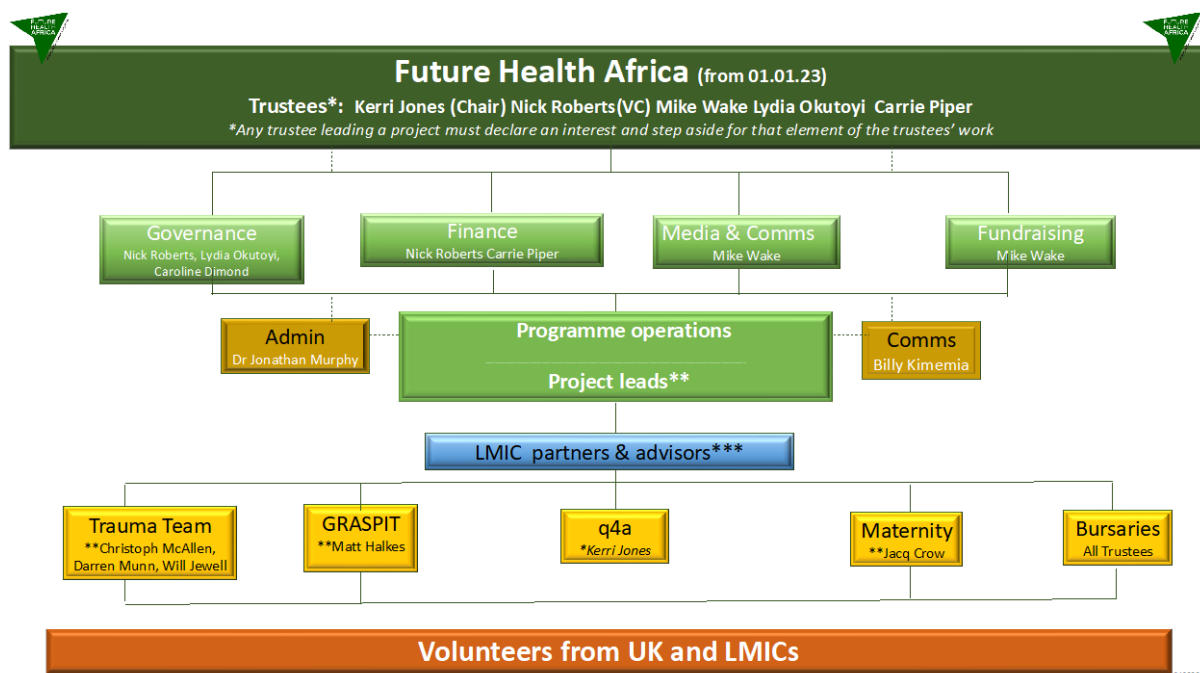
Up to 31.12.2022



*** Kenyan Advisory Team to Future Health Africa

Name	Role in Kenya	Role for Future Health Africa
Dr Samuel Ndanya	Consultant Surgeon Nanyuki, KMA Laikipia Chair	Trauma Team Kenyan Lead, Future Health Africa advisor Emergency Medicine advisor
Dr Tim Panga	CEO Nanyuki Hospital	SPRINGBOARD/q4a Kenyan Lead
Dr Mary Nduta	Medical Doctor, Kenyatta National Hospital	Trauma Team Kenyan Lead, Future Health Africa advisor
Kiruja Jason	Senior Nurse, Kenyatta National Hospital	GRASPIT Education Lead
Christine Musee	Senior Nurse, Kenyatta National Hospital	GRASPIT M&E lead, SPRINGBOARD faculty
Ronny Okoth		TeamTalk implementation & advisor
Josephine Ndirias	Founder, Mukogodo Girls' Empowerment Program	TeamTalk liaison / mentoring

From 01.01.2023



*** Kenyan Advisory Team to Future Health Africa

Name	Role in Kenya	Role for Future Health Africa
Dr Samuel Ndanya	Consultant Surgeon Nanyuki	Trauma Team Kenyan Lead, Future Health Africa advisor
Dr Timothy Panga Dr Lydia Okutoyi	Ag Chief Officer of Health, Laikipia County Government Kenyatta National Hospital	SPRINGBOARD/q4a Kenyan Lead President SQHK
Dr Mary Nduta	Medical Doctor, St Peter's Hospital, Kikuyu, Nairobi	Trauma Team Kenyan Lead, Future Health Africa advisor
Kiruja Jason	Senior Nurse, Kenyatta National Hospital	GRASPIT Education Lead
Christine Musee	Senior Nurse, Kenyatta National Hospital	GRASPIT M&E lead, SPRINGBOARD faculty
Dr Vincent Mutiso	Dept of Orthopaedics, University of Nairobi	Link to UoN

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF
FUTURE HEALTH AFRICA

Independent examiner's report to the trustees of Future Health Africa

I report to the charity trustees on my examination of the accounts of Future Health Africa (the Trust) for the year ended 31 December 2022.

Responsibilities and basis of report

As the charity 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').

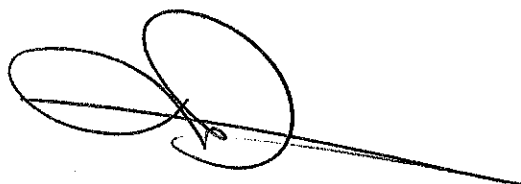
I report in respect of my examination of the Trust's accounts carried out under Section 145 of the Act and in carrying out my examination I have followed all applicable Directions given by the Charity Commission under Section 145(5)(b) of the Act.

Independent examiner's statement

I have completed my examination. I confirm that no material 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 Trust 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 requirements 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.



Ian Barrett

Barretts
Chartered Accountants &
Chartered Tax Advisers
22 Union Street
Newton Abbot
Devon
TQ12 2JS

18 April 2023

FUTURE HEALTH AFRICA

STATEMENT OF FINANCIAL ACTIVITIES
for the Year Ended 31 December 2022

	Notes	Unrestricted fund £	Restricted funds £	2022 Total funds £	2021 Total funds £
INCOME AND ENDOWMENTS FROM					
Donations and legacies		<u>194</u>	<u>42,671</u>	<u>42,865</u>	<u>25,103</u>
EXPENDITURE ON					
Charitable activities					
Charitable expenditure		<u>1,313</u>	<u>52,670</u>	<u>53,983</u>	<u>41,833</u>
NET INCOME/(EXPENDITURE)					
Transfers between funds	8	<u>(1,119)</u> <u>2,575</u>	<u>(9,999)</u> <u>(2,575)</u>	<u>(11,118)</u> <u>-</u>	<u>(16,730)</u> <u>-</u>
Net movement in funds		<u>1,456</u>	<u>(12,574)</u>	<u>(11,118)</u>	<u>(16,730)</u>
RECONCILIATION OF FUNDS					
Total funds brought forward		<u>18,204</u>	<u>48,040</u>	<u>66,244</u>	<u>82,974</u>
TOTAL FUNDS CARRIED FORWARD		<u><u>19,660</u></u>	<u><u>35,466</u></u>	<u><u>55,126</u></u>	<u><u>66,244</u></u>

The notes form part of these financial

FUTURE HEALTH AFRICA

BALANCE SHEET

31 December 2022

	Notes	Unrestricted fund £	Restricted funds £	2022 Total funds £	2021 Total funds £
CURRENT ASSETS					
Debtors	5	3,636	-	3,636	3,170
Cash at bank and in hand		22,009	35,466	57,475	85,878
		<u>25,645</u>	<u>35,466</u>	<u>61,111</u>	<u>89,048</u>
CREDITORS					
Amounts falling due within one year	6	(5,985)	-	(5,985)	(22,804)
NET CURRENT ASSETS		<u>19,660</u>	<u>35,466</u>	<u>55,126</u>	<u>66,244</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u>19,660</u>	<u>35,466</u>	<u>55,126</u>	<u>66,244</u>
NET ASSETS		<u>19,660</u>	<u>35,466</u>	<u>55,126</u>	<u>66,244</u>
FUNDS	8				
Unrestricted funds				19,660	18,204
Restricted funds				35,466	48,040
TOTAL FUNDS				<u>55,126</u>	<u>66,244</u>

The financial statements were approved by the Board of Trustees and authorised for issue on 17 April 2023 and were signed on its behalf by:



K Jones - Trustee

NOTES TO THE FINANCIAL STATEMENTS
for the Year Ended 31 December 2022

1. ACCOUNTING POLICIES

Basis of preparing the financial statements

The financial statements of the charity, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) '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)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Charities Act 2011. The financial statements have been prepared under the historical cost convention.

Income

All income is recognised in the Statement of Financial Activities once the charity has entitlement to the funds, it is probable that the income will be received and the amount can be measured reliably.

Expenditure

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Taxation

The charity is exempt from tax on its charitable activities.

Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

2. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the year ended 31 December 2022 nor for the year ended 31 December 2021.

Trustees' expenses

There were no trustees' expenses paid for the year ended 31 December 2022 nor for the year ended 31 December 2021.

3. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES

	Unrestricted fund £	Restricted funds £	Total funds £
INCOME AND ENDOWMENTS FROM			
Donations and legacies	548	24,555	25,103
EXPENDITURE ON			
Charitable activities			
Charitable expenditure	1,098	40,735	41,833
NET INCOME/(EXPENDITURE)	(550)	(16,180)	(16,730)

3. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES - continued

	Unrestricted fund £	Restricted funds £	Total funds £
RECONCILIATION OF FUNDS			
Total funds brought forward	18,755	64,219	82,974
TOTAL FUNDS CARRIED FORWARD	<u>18,205</u>	<u>48,039</u>	<u>66,244</u>

4. INDEPENDENT EXAMINER'S FEE

The fee for the independent examination is £360.

5. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022 £	2021 £
Trade debtors	600	600
Prepayments and accrued income	1,110	-
Prepayments	1,926	2,570
	<u>3,636</u>	<u>3,170</u>

6. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022 £	2021 £
Bank loans and overdrafts (see note 7)	-	3,714
Trade creditors	1,043	23
Other creditors	4,942	19,067
	<u>5,985</u>	<u>22,804</u>

7. LOANS

An analysis of the maturity of loans is given below:

	2022 £	2021 £
Amounts falling due within one year on demand:		
Bank overdrafts	-	3,714

NOTES TO THE FINANCIAL STATEMENTS - continued
for the Year Ended 31 December 2022

8. MOVEMENT IN FUNDS

	At 1.1.22 £	Net movement in funds £	Transfers between funds £	At 31.12.22 £
Unrestricted funds				
General fund	18,204	(1,119)	2,575	19,660
Restricted funds				
Maternity	448	-	-	448
Team Talk	15,039	(15,385)	346	-
Trauma Team	24,796	5,542	-	30,338
F C D O	(3,714)	3,714	-	-
Community	797	(451)	(346)	-
Springboard	2,364	-	-	2,364
Emergency Medicine	2,575	-	(2,575)	-
Graspit	5,735	(3,419)	-	2,316
	<u>48,040</u>	<u>(9,999)</u>	<u>(2,575)</u>	<u>35,466</u>
TOTAL FUNDS	<u>66,244</u>	<u>(11,118)</u>	<u>-</u>	<u>55,126</u>

Net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	194	(1,313)	(1,119)
Restricted funds			
Team Talk	9,660	(25,045)	(15,385)
Trauma Team	7,729	(2,187)	5,542
F C D O	20,282	(16,568)	3,714
Community	-	(451)	(451)
Graspit	-	(3,419)	(3,419)
St Joseph's	5,000	(5,000)	-
	<u>42,671</u>	<u>(52,670)</u>	<u>(9,999)</u>
TOTAL FUNDS	<u>42,865</u>	<u>(53,983)</u>	<u>(11,118)</u>

NOTES TO THE FINANCIAL STATEMENTS - continued
for the Year Ended 31 December 2022

8. MOVEMENT IN FUNDS - continued**Comparatives for movement in funds**

	At 1.1.21 £	Net movement in funds £	At 31.12.21 £
Unrestricted funds			
General fund	18,755	(551)	18,204
Restricted funds			
Maternity	3,531	(3,083)	448
Team Talk	20,070	(5,031)	15,039
Trauma Team	20,822	3,974	24,796
F C D O	7,298	(11,012)	(3,714)
Community	2,324	(1,527)	797
Springboard	1,839	525	2,364
Emergency Medicine	2,575	-	2,575
Graspit	5,760	(25)	5,735
	<u>64,219</u>	<u>(16,179)</u>	<u>48,040</u>
TOTAL FUNDS	<u>82,974</u>	<u>(16,730)</u>	<u>66,244</u>

Comparative net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	548	(1,099)	(551)
Restricted funds			
Maternity	-	(3,083)	(3,083)
Team Talk	81	(5,112)	(5,031)
Trauma Team	5,696	(1,722)	3,974
F C D O	18,178	(29,190)	(11,012)
Community	-	(1,527)	(1,527)
Springboard	600	(75)	525
Graspit	-	(25)	(25)
	<u>24,555</u>	<u>(40,734)</u>	<u>(16,179)</u>
TOTAL FUNDS	<u>25,103</u>	<u>(41,833)</u>	<u>(16,730)</u>

9. RELATED PARTY DISCLOSURES

There were no related party transactions for the year ended 31 December 2022.

FUTURE HEALTH AFRICA

DETAILED STATEMENT OF FINANCIAL ACTIVITIES
for the Year Ended 31 December 2022

	2022 £	2021 £
INCOME AND ENDOWMENTS		
Donations and legacies		
Donations	6,483	6,261
Gift aid	-	64
Grants	36,282	18,178
Other revenue	100	600
	<u>42,865</u>	<u>25,103</u>
Total incoming resources	42,865	25,103
EXPENDITURE		
Charitable activities		
Direct costs	13,832	9,030
Flights & transport	14,352	2,240
Accommodation & subsistence	5,125	1,346
Equipment and supplies	2,006	3,066
Sub-contracted Project Delivery	10,302	20,332
Project health insurance	2,372	1,882
IT software & consumables	548	328
Website	302	324
Subscriptions	320	13
General expenses	20	-
Charitable donations	2,270	1,528
	<u>51,449</u>	<u>40,089</u>
Support costs		
Finance		
Sundries	-	1
Bank charges	84	83
	<u>84</u>	<u>84</u>
Governance costs		
Accountancy and legal fees	2,450	1,660
	<u>53,983</u>	<u>41,833</u>
Total resources expended	53,983	41,833
Net expenditure	<u>(11,118)</u>	<u>(16,730)</u>

This page does not form part of the statutory financial statements