

**TROPICAL HEALTH AND EDUCATION TRUST**

**REPORT AND FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED 31 DECEMBER 2013**

**CHARITY No. 1113101**

**COMPANY No. 5708871**

# TROPICAL HEALTH AND EDUCATION TRUST

## TRUSTEES' REPORT YEAR ENDED 31 DECEMBER 2013

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### Reference and administrative details of the charity, its Trustees and advisors

The name of the charity is Tropical Health and Education Trust; it is also known as THET.

The following Trustees have acted during the year:

Ms Morounke Akingbola	(from 10 October 2013)
Mr Andy Bacon	
Dr Colin Brown	
Ms Maura Buchanan	
Mr Jim Conybeare-Cross	(to 30 September 2013)
Mr David Cutler	
Professor Sir Andy Haines	(Chairman)
Ms Helen Holmes	
Professor Parveen Kumar	
Mr Andrew Leather	(to 11 April 2013)
Dr Julian Lob-Levyt	(to 14 February 2013)
Mr James Nwabine	
Dr Michael Pelly	

Chief Executive:	Jane Cockerell
Company Secretary:	John Beverley
Registered Office:	1 Wimpole Street, London, W1G 0AE
Bankers:	Charities Aid Foundation, Kings Hill, West Malling, Kent, ME19 4TA
Auditors:	Menzies LLP, Lynton House, 7-12 Tavistock Square, London, WC1H 9LT
Charity Registration No:	1113101
Registered Company No:	05708871

The Trustees, who are also the Directors of the company for the purposes of the Companies Act, present their Annual Report, which is also the Directors' report for purposes of the Companies Act, together with the audited Financial Statements of the company for the year ended 31 December 2013.

The financial statements comply with current statutory requirements, the requirements of the charity's governing document and the Statement of Recommended Practice – Accounting and Reporting by Charities (SORP 2005).

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### **Structure, Governance and Management**

THET is a company limited by guarantee. Its governing document is the memorandum and articles of association dated 14 February 2006. The charity is constituted as a charitable trust for charitable objects and is governed by a Board of Trustees.

Trustees are appointed by the current Trustees. Trustees are subject to re-election at least every three years.

THET recognises that an effective board of trustees is essential if the charity is to be effective in achieving its objects. The board must seek to be representative of the people with whom the charity works and must have available to it all of the knowledge and skills required to run the charity. Individual trustees must have sufficient knowledge, both of trusteeship in general and of the Charity's activities, to enable them to carry out their role and to represent the Charity at meetings and other events.

Policies and procedures adopted for the induction and training of Trustees: the training and induction provided for new Trustees will depend on their existing experience. Where necessary, induction will provide training on charity, legal and financial matters. All Trustees are provided with copies of policies, procedures, minutes, accounts, budgets, plans and other documents that they will need to undertake their role as Trustees.

Trustees meet four times a year as a board, attend an Awayday, and also sit on one of the two sub committees, the Strategy Group or Risk & Governance Committee.

There has been no specific restriction imposed by the charity's governing document on the operation of the Trust. Trustees are authorised by the charity's governing document to invest any money of the Charity not immediately required for its function in appropriate, legal investments provided that any necessary consents are first obtained.

A key objective of THET's Organisational Strategy 2013-2015 is to continue to strengthen THET'S organisational and financial capacity. Progress in 2013 is reported below.

### **Risk assessment**

The Trustees keep strategic and operational risks under regular review with an assessment of probability, impact and mitigating actions. In terms of its general affairs, THET operates prudent policies in all its financial operations, with any significant expenditure requiring approval by Trustees. THET also makes arrangements for appropriate insurance cover and other protection where this is appropriate in its activities at home and overseas.

### **Grant-making policies**

THET issues grants to health partnerships delivering projects in keeping with its mission. Grants are selected following a fair and transparent process whereby applicants are provided with template forms and guidelines that state the purpose of the funds, eligibility criteria and a timeline for

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submission and selection.

Once awarded and when contracts are signed, grants are managed in line with the Grants Management System, which sets out checks and controls to ensure that funds are being used for the purpose stated in the application. Financial and narrative reports are submitted at contracted intervals to show levels of spend and activity against plan and, where necessary, to explain exceptional variances. Milestones are set during the inception phase of each grant and progress is measured against these.

Other risk management processes include checks and controls on adequate financial management and verification of the legal protection and safety of those involved in the project. Information is gathered through reports and meetings and through spot checks on receipts and other documentation.

### **Objectives and activities**

The objectives and core activities of the Trust have not changed during 2013.

THET is a specialist global health organisation that educates, trains and supports health workers through partnerships, enabling people in low and middle-income countries to access essential healthcare.

### **Achievements and performance**

The following sections summarise and measure the year's achievements and performance against our objectives as outlined in the THET Strategic Plan 2013-2015.

**Develop the capacity of government and civil society institutions in low- and middle-income countries to increase the number and quality of appropriately trained health workers.**

In close collaboration with in-country partners, THET directly manages and implements major capacity building programmes in Zambia and Somaliland to strengthen the health workforce and support the health system in those countries. THET also provides grant funding and management support to health partnerships between UK health institutions and counterparts overseas to develop education and training for different cadres of health workers, promote excellence in practice and deliver capacity-building projects which engage UK professionals as volunteers.

### **THET Health Partnerships**

A health partnership is a long-term relationship between a health institution in the UK and a counterpart in a low- or middle-income country that works to improve and strengthen policies and practices, in participating institutions or across health systems, through health workforce development. Partnerships are typically between hospitals, universities, training colleges or professional associations and take a variety of approaches to capacity development; such as short-term training courses, fellowships, mentoring, strengthening data systems, curriculum development, task shifting, leadership and management support and improving the patient journey and referral pathways. Through the DFID funded Health Partnership Scheme (HPS) THET provides the financial

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support and technical expertise necessary to ensure partnership projects are sustainable, strategic and responsive.

### Progress Achieved in 2013

- Nearly 14,000 health workers received training and education across 26 countries in sub-Saharan Africa and Asia.
- HPS projects developed the capacity of over 100 government and civil society institutions across ten health themes; Accident & Emergency Health, Child Health, Eye Health, General Health, Maternal & Newborn Health, Mental Health, Non-communicable Disease, Sexual & Reproductive Health, Palliative Health, and HIV/AIDS, TB & Malaria.
- Over 600 volunteers from the UK National Health Service (NHS) volunteered as part of strategic and long-term organisation arrangements.
- UK universities and NHS staff used medical education skills to work with their colleagues to improve both the quality of existing teaching and to expand the specialist training available. HPS has supported the development of 65 new or improved curricula, including that for Ophthalmic Clinical Officers in the East, Central and Southern Africa (ECSA) region, for Child and Adolescent Mental Health Workers in Uganda, for Health Surveillance Assistants in Malawi and for Volunteer Nurse Assistants in Sierra Leone.

### THET Somaliland

Since 2000, THET has been working to improve the provision of health services in Somaliland. THET's work in Somaliland takes an integrated approach to Human Resources for Health and works to build capacity at three levels - individual health workers, civil society institutions, and government. THET provides expert support for better quality teaching and training for health workers, stronger partner institutions with improved skills and resources, and strengthened governance structures to manage the quality delivery of health services.

### Progress Achieved in 2013

- THET supported the development and dissemination of a revised National Health Policy, reviewed by the Ministerial cabinet and approved by the Parliament.
- In collaboration with the Ministry of Health, THET supported the establishment of Regional Health Boards for the Sahil and Maroodijeh regions and provided training and ongoing mentorship for health leadership, management and resource mobilisation skills to ensure the sustainability and effective implementation of community level interventions.
- THET supported the Ministry of Health in reviewing and updating the Human Resources for Health Strategic Plan and Operational Policy for Somaliland. This included the development of Human Resource Management tools for public health workers, including job descriptions, contracts, performance appraisals and a computerised data base.

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- *The Community Health Workers (CHW) Curriculum & Manuals*, developed by the Ministry of Health with support from THET, were officially launched as the blueprint for the CHW training in Somaliland.
- THET supported the Nursing & Midwifery Training Institutes and the medical faculty students from Borama and Burao to deliver a Health Outreach Programme to increase practical skills and community interaction with students on the themes of seeking prompt medical care, hygiene and sanitation, as well as the treatment of some basic illnesses. More than 6,000 people participated in these activities in different rural communities, at MCHs, Hospitals, IDP Camps, villages, schools and universities.
- In partnership with the African Medical & Research Foundation (AMREF), THET supported the Ministry of Health in preparations for its first National Health Workforce Survey to map the spectrum and capacities of the existing health workforce in Somaliland, and to develop workload indicators and a projection of the health workers needed. The survey data collection is due to start in early 2014.
- In partnership with Medicine Africa, THET supported distance learning for health workers. In 2013, work to develop a new IT platform, obtain user feedback and develop new courses and content (with up to 40 hours per week of teaching) was completed, along with a new portfolio of short programmes based around three key areas identified by our Somaliland partners including clinical education, continuous professional development (CPD) and training of trainers.
- In 2013, as a result of THET support;
  - Two hundred and twenty-three in-service health workers received continuous professional development, including mental health gap training of trainers, by SLNMA, SMA, SOMLA and NHS volunteers,
  - Twenty-eight medical doctors and 74 midwives and nurses newly graduated,
  - Two doctors from the Sahil region received refresher training on Emergency Obstetrics and Newborn Care (EmONC) at Boroma General Hospital,
  - Six nurses received intensive training on Comprehensive Emergency Obstetrics and Newborn Care (CEmONC) at Ifakara Health Institute (IHI) in Tanzania as part of a pilot plan to train nurses for providing lifesaving (EmONC) services, including caesarean section in the Sahil region,
  - Twenty-two tutors from nursing and midwifery training institutions attended teaching methodology training,
  - Thirty-nine community health workers, selected from villages in Sahil and Awdal, started at Burao Institution of Health Science for a nine month training course,
  - Training of trainers (TOT) was conducted for 20 trainers to become tutors and fieldwork supervisors for community health worker trainees,
  - Sixty-nine medical students and 30 trainers received training on Mental Health interventions and guidelines from a long-term NHS volunteer in Hargeisa and Borama,
  - Twenty-nine visits of King's Volunteers, international health professionals and consultants took place to deliver training, curriculum development and institutional

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support as part of the King's THET Somaliland Partnership (KTSP).

### THET Zambia

THET has been working in Zambia since 2009 to strengthen the capacity of health training institutions, support health workers and improve health service delivery. THET has developed close working relationships with the Ministry of Health and the Ministry of Community Development, Mother and Child Health, and other key stakeholders in the field including the University of Zambia (UNZA), the Northern Technical College (NORTEC) and the Health Professionals Council (HPC). Working with the Zambian government and local partners on all programmes, THET focuses on three key areas: training and education, capacity building and workforce planning.

#### Progress Achieved in 2013:

- Secured £1.2m in funding for a 5-year follow-on programme to support UNZA's School of Medicine to deliver three Master of Medicine (MMed) courses in Anaesthesia, Pathology and Psychiatry, as well as to NORTEC for the Biomedical Engineering Technologist (BMET) diploma course.
- Secured £162,000 in additional funding to continue to support nutrition capacity building in Zambia through an MSc in Human Nutrition.
- A medical education specialist delivered intensive, one-to-one mentoring to the Medical Education Department staff members on curriculum development and curriculum review principles and practice, as well as developing and monitoring lecturer/student feedback and assessment tools.
- Working alongside local partners, THET supported the establishment of the Nutrition Capacity Building Working Group (NUCAB), a multi-sectoral group that includes key Line Ministries. NUCAB aims to ensure that Zambia has sufficient nutrition resources to undertake the programmes, interventions and research needed to improve the nutritional status of its population. To achieve this objective, NUCAB focuses on four priority areas: advocacy, workforce planning, training and resource mobilization.
- Hosted the first Eastern, Central and Southern Africa Mental Health Conference with delegates from Zambia, Malawi, Uganda, Somaliland, Ethiopia, and the Democratic Republic of the Congo. Attendees endorsed the establishment of a new, regional, multi-professional body for mental health workers. Work is now underway to generate funding to support the creation of a Secretariat.
- Supported the development of services in mental health including: introducing national Alcohol and Drug services; a standardised general history and assessment taking proforma; setting up psychiatric services at Livingstone General Hospital and Lusaka Central Prison
- In partnership with UNZA and the Ministry of Health, THET carried out a leadership and management training needs analysis for different cadres of health workers. Following this work, the Ministry of Health requested THET to develop a leadership and management training programme for doctors.
- Received an "A" score from DFID on the "Strengthening the Training and Education of Health Workers in Zambia" programme (2010 – 2012).

In 2013, as a result of THET support:



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- Thirty-five trainees enrolled in the three Master for Medicine courses (Anaesthesia, Pathology and Psychiatry) – across 4 cohorts. The first cohort is expected to graduate in 2014 – 3 Psychiatry trainees.
- Twenty-nine students enrolled in the Biomedical Engineering Technologist (BMET) course – across 1 cohort.
- Forty-four students enrolled in the BSc Nutrition course – across 3 cohorts.
- Eleven long-term and 26 short-term senior health professionals recruited to provide technical assistance in training, supervision and mentorship to local training institutions.
- Two placements (4 weeks) in Child Psychiatry Service development took place for trainees on the MMed Psychiatry course – hosted by the Birmingham and Solihull Mental Health Foundation Trust, UK. In addition – 3 placements (5 months) in sub-specialisms for trainees on the MMed Pathology course were secured for 2014 at the University Health Network, Toronto, Canada.

**Train, support and provide guidance to partnerships in the development, implementation and monitoring of effective and sustainable projects.**

THET has 25 years' experience of working with the health partnership community in the UK. During this time, the organisation has increasingly acted as the primary hub for over 150 partnerships and has been at the forefront of efforts to provide training, support and guidance in the delivery of effective health workforce development projects. By taking on this catalytic role THET is able to act as both advocate and advisor for health partnerships work, with the objective of ensuring that quality partnership projects are implemented and their contribution to health workforce development is recognised and supported into the future.

### Progress Achieved in 2013

- THET provided individual support and guidance to 86 health partnership projects funded through the Health Partnership Scheme (HPS).
- Identification, understanding and application of lessons learned from the predecessor of HPS – the International Health Links Funding Scheme (IHLFS) - and analysis of more than 100 grantholder reports was conducted by THET to inform guidance on good practice.
- THET designed and ran skills workshops and sharing and learning events for health partnerships across the UK and in east, central, southern and west Africa, for partners to share experiences and to learn skills on topics such as project management, project monitoring, and strategies for partnership sustainability.
- THET provided resources and held workshops to consider how health partnerships could engage more explicitly with the three key areas of leadership and management, patient safety, and medical equipment, in order to maximize the potential for health partnership interventions to have a sustainable and institution wide impact.
- THET published a toolkit, "Making it Work", for medical equipment donations to low-resource

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settings. The toolkit addresses very practical issues around equipment donation, from evaluating need and appropriateness, to guidance about shipping, installation and maintenance. It is aimed at UK-based donors, but has been disseminated widely and referenced by other organisations in Europe and North America.

- THET developed publicly-available online resources to support the development and operation of health partnerships, which included "Project Planning: Theory of Change approach", "Monitoring and Evaluation Guidance" and "Volunteer Sending". Guidance was also compiled and published in the form of case studies and video series.

**Deliver good practice grants management and quality assurance on behalf of donors supporting health worker development.**

THET manages grant-making programmes that are in line with its core mission to educate, train and support health workers in low- and middle-income countries. We continually work to refine our grants management processes and procedures by internally reviewing lessons learned, through discussion with the Steering Committee group of high-level policy- and decision-makers, and through stakeholder feedback. The THET team provides bespoke as well as generic advice and support to all grant-holders to assist them in project planning and delivery.

### Progress Achieved in 2013

- THET has been managing the £30 million Health Partnership Scheme (HPS) since 2011
  - In 2013, THET continued to deliver this complex grant-making programme in a transparent and equitable manner. We managed support to 86 grants, ranging in value from £5,000 to £1.5 million for projects across over 20 countries in sub-Saharan Africa and Asia.
  - HPS was recognised in a report by the All-Party Parliamentary Group on Global Health *Improving Health at Home and Abroad* as "the most effective government action to support NHS overseas work in recent years. The funding and expertise this has provided is having a transformative effect on the number and quality of international links between the NHS and developing countries".
- THET compiled a completion report on The International Health Links Funding Scheme (IHLFS) detailing the 113 grants awarded under the £3.9m scheme, and analysing lessons learned and their application to the HPS framework, together with descriptions of the support given to grantees and a general commentary about the management of the scheme. Over 14,500 health workers took part in training and education activities under IHLFS.
- THET commissioned and published a qualitative evaluation and a value for money evaluation on the International Health Links Funding Scheme (IHLFS), including THET's response to recommendations.
- THET developed a Grants Management System and manual which sets out checks and controls to ensure that funds are being used for the purpose stated (see *Grant-making policies on p.4*).

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- THET's Grants Management team undertook 44 project monitoring visits overseas, covering 37 health partnership projects across 10 countries.
- THET delivered grants management on behalf of Johnson & Johnson to health partnership projects focused on reducing morbidity and mortality from conditions requiring surgical intervention. In 2013, three projects supported under the Strengthening Surgical Capacity (SSC) Fund completed their projects which trained 600 health workers. Three new grants were given to health partnerships working in the field of surgery and/or anaesthesia in countries that have a critical shortage of health workers.
- THET delivered grants management on behalf of the Pharo Foundation to the Poole Africa Health Partnership which works with Wau Teaching Hospital, South Sudan to train health workers with a focus on the basic skills of diagnosis and care of critically ill patients.

**Advocate for the engagement of UK and other health professionals in global health projects within a supportive and enabling environment for volunteering.**

THET's vision of volunteering through partnerships is for an environment where it is regarded as 'the norm', not the exception, for all UK health professionals. We are continually working to ensure it becomes a valued and sustainable part of the UK health system and to achieve formal recognition of the contribution it is making to the quality of health services overseas and in the UK.

### Progress Achieved in 2013

- THET gave evidence at expert witness seminars and lobbied the All-Party Parliamentary Group on Global Health during the development of their report *Improving Health at Home and Abroad: How Volunteering from the NHS Benefits the UK and the World*, which focused on quality, coordination, and on sustaining success through national policy support. THET also launched a campaign, *Support Volunteering*, on publication of the report to raise the profile of high quality volunteering through partnerships. The report made a number of recommendations, most notably the continuation of the Health Partnership Scheme and the setting of standards to support higher quality engagement in global health.
- THET responded to Monitor's report, *Closing the NHS Funding Gap: How to Get Better Value Health Care for Patients*. Our written response set out the case for how volunteering from the NHS is already a valuable asset which can play a unique role in addressing the challenges faced by the NHS, most importantly in the areas of leadership development and service innovation. Monitor revealed that our response was the most interesting and imaginative at a follow-up meeting, and we have surveyed the partnership community to develop evidence of service improvement with an eye on possible collaboration with Monitor in the future.
- THET worked closely with the NHS International Health Group on developing the new *Framework for NHS Voluntary Engagement in Global Health by the UK Health Sector*. The

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framework, due to be launched in 2014, will give government guidance on how the UK can best engage in global health, will promote the benefits of engagement, will provide sources of support, and will set out standards to encourage more, higher quality engagement to help employers understand the value to the service.

- THET set up the NHS Overseas Volunteering Group in conjunction with the Department of Health Workforce Division to address the barriers to volunteering as set out in the Academy of Medical Royal College's Volunteering Statement and to support further voluntary engagement in global health. The first project the Group has implemented, in conjunction with Health Education England and NHS Employers, addresses the issue of evidencing competencies developed whilst volunteering at appraisals once back in the UK. This evidence gathering process, integrated into NHS systems, will build the case for further voluntary engagement.

**Gather evidence and facilitate the sharing of good practice and lessons learned in order to improve quality and demonstrate the contribution health partnerships make to improvements in global health.**

A key feature of THET as an organisation is a commitment to continuous learning, development and collaboration. Our work with an increasing diversity of partners enables the identification of areas of good practice and quality standards for effective partnerships on a global level.

### Progress Achieved in 2013

- Over 150 health professionals, policy makers and other key stakeholders from the health and international development sectors were brought together at the THET Annual Conference with the theme of 'Learning from each other'. The conference is the largest annual gathering of health partnerships in the UK to present findings, share their experiences and expertise, and debate key issues at the heart of effective delivery of health partnership projects in low- and middle-income countries.
- THET hosted "Getting out of hospital: Primary Care & Public Health in Global Health Partnerships", a conference to explore the potential for health partnerships to engage in primary care and public health, as well as looking at how individuals can get involved. The one day event was covered by the London Journal of Primary Care (due for publication in 2014).
- THET demonstrated the contribution of health partnerships at events across the UK and internationally through exhibition stalls and presentations. These included the International Child Health Group Meeting in Oxford on the theme of "How do we evaluate global health partnerships – what works where and why?", WHO AFRO Region meeting in Harare focusing on Patient Safety and the partnership model, a Global Health Symposium in Edinburgh organised by the Royal College of Physicians, the WHO second global forum on medical devices in Geneva where THET launched the 'Making it Work' equipment toolkit, the Canadian Society for International Health conference in Ottawa, and the Global Health Workforce Alliance: Third Global Forum on Human Resources for Health in Brazil where THET presented

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its formal commitments to Human Resources for Health.

- THET provided guidance and support to partners to enable them to work with local media and within their institutions to raise public awareness of the global human resource for health crisis and health partnerships work. THET also published articles on the health partnership approach in the specialist press including the Nursing Standard, the BMJ (letters to the editor), Scope Magazine (a series on medical equipment partnerships), the Canadian Journal of Anaesthesia ("A new partnership for anaesthesia training in Zambia: reflections on the first year," co-authored by THET volunteers and staff).
- THET participated in the strategy groups for several key stakeholders working in Global Health. This included participation in: the World Health Organization's African Partnership for Patient Safety programme as it expands activities to improve patient safety in the context of an African hospital; the Board of the Wales for Africa Health Links Network; the NHS Overseas Volunteering Group; the Zambia UK Health Workforce Alliance, Vision 20:20 Steering Committee; Kings Health Partners Advisory Board; NHS International Health Group; and the International Committee of the Academy of Medical Royal Colleges.
- THET partnered with the Association of Anaesthetists of Great Britain and Ireland (AAGBI) to gather and share information about anaesthetists involved in international projects in developing countries. The information will be collated into a database and map that will be shared to facilitate collaboration. Other cadres have expressed interest in following suit.
- THET maintained and developed a dedicated website for health partnerships, which includes a registry of over 150 health partnerships and their projects, a resource library, and an online forum to facilitate targeted discussion with over 400 members in 28 countries.

### **Strengthen THET's organisational and financial capacity**

THET's rapid growth has led us to continuously focus on the growth and improvement of our organisational structures, systems and processes. Our talented staff team continue to develop their skills and expertise commensurate with growing roles and responsibilities.

#### **Progress Achieved in 2013**

- A review of governance arrangements led to the introduction of two subcommittees of the Board, the Strategy Group and a Risk & Governance Committee. The subcommittees enable greater scrutiny of the relevant agenda items.
- The ongoing support of CAF Bank and Charitybank with an overdraft and loan facility respectively has enabled THET to manage the funding arrangements associated with prefinancing Health Partnership Scheme grants and expenses.
- The transition of programme management responsibilities to Somaliland started in 2012 has continued. The data entry of financial transactions was devolved to the THET office in Hargeisa. This element of the transition has been supported from the UK by internal audit.

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Reciprocal visits for training purposes have involved UK finance staff and the Somaliland Finance Manager. A finance volunteer was seconded to Hargeisa for six weeks.

- THET's work in Zambia was supported by internal audit. Reciprocal visits for training purposes have involved UK finance staff and the Zambia Operations Manager. A finance volunteer was seconded to Lusaka for three months.
- THET has continued to invest in technology and connectivity. More and more meetings are conducted using Skype and similar systems.
- THET continues to take very seriously the duty of care owed to staff and volunteers, particularly those travelling overseas. THET works closely with brokers Towergate to ensure that appropriate cover is in place and that the cover evolves to encompass any changes to the risk profile.
- Fundraising efforts were led by two regular volunteers. They generated appeals to charitable trusts for contributions to unrestricted income, which is crucial to THET's ability to develop new income streams.
- Towards the end of the year THET joined the GlobalGiving fundraising community to raise funds for a project supporting health centres in Ethiopia.

### Plans for the Future

In 2012, THET developed a strategic plan that refined the vision and direction for the organisation over three years.

#### Over the next two years, 2014 to 2015 THET will continue to:

- Develop the capacity of government and civil society institutions in low- and middle-income countries to increase the number and quality of appropriately trained health workers;
- Train, support and provide guidance to partnerships in the development, implementation and monitoring of effective and sustainable projects;
- Deliver good practice grants management and quality assurance on behalf of donors supporting health worker development;
- Advocate for the engagement of UK and other health professionals in global health projects within a supportive and enabling environment for volunteering;
- Gather evidence and facilitate the sharing of good practice and lessons learned in order to improve quality and demonstrate the contribution health partnerships make to improvements in global health;
- Strengthen THET's organisational and financial capacity to deliver these activities.

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In 2014, there will be a special emphasis on evaluation and expansion. We will establish and integrate new programmes. Evaluation of evidence will enable us to demonstrate effectiveness that assists in accelerating advocacy of health partnerships. We will turn our attention to developing and designing follow-on programmes for our existing work.

### **Financial review: Charitable funds**

The funds held by THET are in interest-bearing accounts managed by the Charities Aid Foundation from which they can be withdrawn as needed. The Trust is able to meet all its obligations and commitments within its present cash flow and assets.

THET does not hold assets except as detailed in the accounts. The salaries of project staff are derived mainly from grants. THET operates in collaboration with other charitable bodies to pursue its objectives.

### **Public benefit**

In order to demonstrate the benefit of our work, this Trustees' report outlines our key achievements against what we said we would do in last year's report and states our priorities for the year ahead. In producing this report, THET's Board of Trustees can confirm that they have complied with the duty outlined in the Charities Act 2011 to have due regard to Charity Commission guidance on public benefit.

### **Reserves Policy**

#### **The reasons why THET needs reserves**

THET holds reserves in order to ensure the ongoing viability of its charitable objectives. Key to THET's success has been the development over a long period of time of partnerships between UK health professionals, their institutions and counterparts in the developing world.

In light of the long-term nature of these partnerships, Trustees consider that it is appropriate for THET to hold a level of reserves sufficient that in the event of a failure of funding THET managers would be able to wind-down the organisation in an orderly fashion, identify an appropriate successor organisation and hand over oversight of the partnerships with least disruption.

#### **What level of reserves the trustees believe that THET needs**

After consideration of the reliability of THET's income and its level of committed expenditure, Trustees have concluded that twelve months' support costs plus twelve months' costs of governance, i.e. £500,000 (based on the 2014 forecast), is the approximate level of reserves that should be maintained.

Trustees will therefore seek to ensure that reserves are maintained at a level of at least £500,000 for the time being.

#### **The steps THET is going to take to establish this agreed level**

General reserves at 31 December 2013 amount to £524,838 (2012: £443,901). Given the uncertain

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economic future during the coming year and beyond Trustees conclude that THET reserves are in a satisfactory position for the time being.

### **Arrangements for monitoring and reviewing the reserves policy**

The reserves policy is subject to annual review and will be considered each year by Trustees with the next review scheduled for early 2015.

### **Investment Policy**

Investments must be managed in such a way as to provide an income to the charity. The value of investments assets should aim to keep pace with inflation in the long term. An approximate balance is to be maintained between the enhancement of capital and the generation of income. A "low risk" approach is to be adopted in the management of the charity's assets. The objects of the charity are to be met by way of a prudent investment strategy based on a diversified range of bonds and equities which are quoted on a recognised investment exchange, and unit trusts and Open Ended Investment Companies (OEICs) which are authorised under the Financial Services and Markets Act 2000. For the time being Trustees do not consider that external investment advice is required.

The portfolio should not include any investments in companies associated with tobacco products or the arms trade. No further ethical restrictions apply, although Trustees reserve the right to exclude from the portfolio any investments in companies whose representation might prove damaging, directly or indirectly, to the purposes or reputation of the charity.

The performance of the overall portfolio will be monitored by the Trustee Board as a whole at least once each year. This investment policy is subject to periodic review by the Trustee Board to ensure that it remains compatible with the charity's objects and requirements with the next review scheduled for early 2015.

There were no investments at the year-end date

### **Trustees' responsibilities**

Company law requires the Trustees to prepare accounts for each financial year which give a true and fair view of the state of affairs of the charity and of the surplus or deficit of the charity for that period. In preparing these accounts, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- prepare the accounts on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

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 accounts comply with the Companies Act 2006 and Statement of Recommended Practice "Accounting



# TROPICAL HEALTH AND EDUCATION TRUST

## TRUSTEES' REPORT YEAR ENDED 31 DECEMBER 2013

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and Reporting by Charities" (SORP 2005). 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.

### Each of the Trustees confirm that

- so far as they are aware there is no relevant audit information of which the charity's auditors are unaware, and,
- they have taken all the necessary steps that they ought to have taken as Trustees in order to make themselves aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

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

Approved by the Board of Trustees on 24 July 2014 and signed on its behalf by



Professor Sir Andy Haines  
Chairman of the Trustees  
24 July 2014

# TROPICAL HEALTH AND EDUCATION TRUST

## INDEPENDENT AUDITOR'S REPORT YEAR ENDED 31 DECEMBER 2013

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### **Independent Auditor's Report to The Members of Tropical Health and Education Trust**

We have audited the financial statements of Tropical Health and Education Trust for the year ended 31 December 2013 which comprise the Statement of Financial Activities, the Balance Sheet, and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charity's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charity's members those matters we are required to state in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's members as a body, for our audit work, for this report, or for the opinions we have formed.

### **Respective responsibilities of Trustees and auditor**

As explained more fully in the Trustees' Responsibilities Statement, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's (APB's) Ethical Standards for Auditors.

### **Scope of the audit of the financial statements**

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the Trustees; and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the Trustees' Annual Report to identify material inconsistencies with the audited financial statements. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

### **Opinion on financial statements**

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 December 2013 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and

# TROPICAL HEALTH AND EDUCATION TRUST

## INDEPENDENT AUDITOR'S REPORT YEAR ENDED 31 DECEMBER 2013

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- have been prepared in accordance with the requirements of the Companies Act 2006.

### Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Trustees' Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

### Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption in preparing the Trustees' Annual Report and take advantage of the small companies exemption from the requirement to prepare a strategic report.

*Menzies LLP*

Chris Evans (Senior Statutory Auditor)  
for and on behalf of Menzies LLP  
Statutory Auditor  
July 2014

Lynton House  
7-12 Tavistock Square  
London  
WC1H 9LT

## TROPICAL HEALTH AND EDUCATION TRUST

### STATEMENT OF FINANCIAL ACTIVITIES (incorporating Income and Expenditure Account) YEAR ENDED 31 DECEMBER 2013

2012 Total £		Note	Unrestricted Funds £	Restricted Funds £	2013 Total £
	<b>INCOMING RESOURCES</b>				
	<b>Incoming resources from generated funds</b>				
190,919	Voluntary income	2	53,767	10,610	64,377
	Activities for generating funds:				
3,880	Events		534	-	534
191	Fees		12,682	-	12,682
173,227	IHLFS Fees				
777,152	HPS Fees		827,884	-	827,884
1,670	Investment income		2,647	-	2,647
	<b>Incoming resources from charitable activities</b>				
	Operational programmes & projects				
7,175,601	Grants	3	-	9,893,009	9,893,009
<u>8,322,640</u>	<b>Total incoming resources</b>		<u>897,514</u>	<u>9,903,619</u>	<u>10,801,133</u>
	<b>RESOURCES EXPENDED</b>				
<u>24,430</u>	<b>Costs of generating voluntary income</b>	5	<u>26,406</u>	<u>-</u>	<u>26,406</u>
	<b>Charitable activities</b>				
6,972,207	Operational programmes & projects	7	75,121	9,419,768	9,494,889
813,323	Salaries & fees	8	594,633	256,859	851,492
240,875	Other support costs	9	61,283	152,558	213,841
<u>8,026,405</u>	<b>Costs of charitable activities</b>		<u>731,037</u>	<u>9,829,185</u>	<u>10,560,222</u>
<u>47,856</u>	<b>Costs of governance</b>	6	<u>59,134</u>	<u>-</u>	<u>59,134</u>
<u>8,098,691</u>	<b>Total resources expended</b>	4	<u>816,577</u>	<u>9,829,185</u>	<u>10,645,762</u>
223,949	<b>Net incoming resources</b>		80,937	74,434	155,371
<u>2,070</u>	<b>Gains on investments</b>		<u>-</u>	<u>-</u>	<u>-</u>
226,019	<b>Net movement in funds</b>		80,937	74,434	155,371
650,626	<b>Total funds brought forward at 1 January 2013</b>		443,901	432,744	876,645
<u>876,645</u>	<b>Total funds carried forward at 31 December 2013</b>		<u>524,838</u>	<u>507,178</u>	<u>1,032,016</u>

## **TROPICAL HEALTH AND EDUCATION TRUST**

### **STATEMENT OF FINANCIAL ACTIVITIES (incorporating Income and Expenditure Account) YEAR ENDED 31 DECEMBER 2013**

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All gains and losses recognised in the period are included above. The surplus for the year for Companies Act purposes, including realised gains and losses but excluding unrealised gains and losses on investments, would be £155,371 (2012: £226,019).

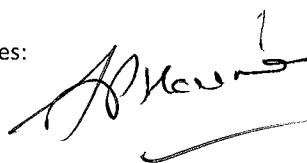
# TROPICAL HEALTH AND EDUCATION TRUST

## BALANCE SHEET AS AT 31 DECEMBER 2013

2012 Total £		Note	2013 Total £
	<b>Fixed assets</b>		
<u>55,512</u>	Tangible assets	10	<u>33,298</u>
	<b>Current assets</b>		
894,308	Debtors	11	377,326
<u>452,287</u>	Cash at bank and in hand		<u>750,517</u>
1,346,595			1,127,843
(525,462)	<b>Creditors: amounts falling due within one year</b>	12	(129,125)
<u>821,133</u>	<b>Net current assets</b>		<u>998,718</u>
<u>876,645</u>	<b>Total net assets</b>		<u>1,032,016</u>
	<b>Represented by:</b>		
443,901	Unrestricted funds		524,838
432,744	Restricted funds		507,178
<u>876,645</u>	<b>Total funds and reserves</b>	13	<u>1,032,016</u>

These financial statements have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies and with the Financial Reporting Standard for Smaller Entities (effective April 2008).

Approved on behalf of the Trustees:  
 Professor Sir Andy Haines  
 Chairman of the Trustees



Date: 24 July 2014

Company No. 5708871

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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### 1 ACCOUNTING POLICIES

#### a Accounting convention

The financial statements have been prepared under the historical cost convention, except for revaluation of investments, and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008). The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP), "Accounting and Reporting by Charities" published in March 2005 (revised May 2008), applicable accounting standards and the Companies Act 2006.

#### b Incoming resources

All income is accounted for when the charity has entitlement to the funds, the amount can be quantified and there is certainty of receipt. Where income is received in advance of providing services, it is deferred until THET becomes entitled to that income.

Donations are recognised in the statement of financial activities in the year in which they are received.

Investment income is recognised in the statement of financial activities in the year in which it is receivable.

Income from legacies is recognised in the statement of financial activities at the earlier of the date on which the estate is finalised, or when proceeds are received.

Donated assets and services are included at the value to THET where this can be reliably quantified. Donated services from our volunteers are not included within the financial statements.

#### c Resources expended

Liabilities are recognised as resources expended where there is a legal or constructive obligation committing the charity to the expenditure. All expenditure is accounted for on an accruals basis.

Costs of charitable activities are the costs applied by the charity in undertaking its work and achieving its charitable objectives, as opposed to the cost of raising funds to finance those objectives.

Governance costs are the costs associated with the governance arrangements of the charity that relate to the general running of the charity, as opposed to those costs associated with fundraising or charitable activity.

Non-directly attributable costs are allocated based on an estimate of time spent.

Value Added Tax which is not recoverable by the charity, is included in the relevant costs in the statement of financial activities.

#### d Grants

Grants are included in the statement of financial activities as they become payable. THET's ability to make grant payments is entirely dependent on funding from DFID under a contract that is subject to monthly reporting and annual renegotiation. In the opinion of Trustees a constructive obligation is only created when (i) ongoing grant

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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conditions are being satisfactorily fulfilled and, (ii) contract renewal has been successfully negotiated with DFID.

### e Fund accounting

Funds held by the Charity are either:-

- Unrestricted general funds - are funds which can be used in accordance with the charitable objects at the discretion of the Trustees
- Designated funds – are funds set aside for specific purposes from THET's own reserves.
- Restricted funds - are funds that 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 purposes.

### f Tangible fixed assets and depreciation

Tangible fixed assets are stated at cost less depreciation. A capitalisation limit of £500 has been applied.

Depreciation is provided on all tangible fixed assets at rates calculated to write off the cost less estimated residual value of each asset over its expected useful life, which is reviewed annually. The rates used are as follows:-

Leasehold property improvements	-	33½% straight line
Furniture and fittings	-	33½% straight line
Computing equipment	-	33½% straight line
Office equipment	-	33½% straight line

### g True and Fair View

The charity does not seek to make a profit, nor can its results be measured by normal commercial criteria. In order that a true and fair view of the activities of the charity is given a statement of financial activities has been included in place of a profit and loss account as required by the Companies Act 2006.

### h Pension

THET operates a defined contribution pension scheme for the benefit of staff. Contributions by THET to the scheme are charged in the statement of financial activities in the period in which the employment services qualifying for the benefit are provided. THET has no further obligations once the contributions have been paid.

### i Investments

Fixed asset investments are included at market value at the balance sheet date.

Realised gains and losses on investments are calculated as the difference between sales proceeds and their market value at the start of the year, or their subsequent cost, and are charged or credited to the statement of financial activities in the year of disposal.



# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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Unrealised gains and losses represent the movement in market values during the year and are credited or charged to the statement of financial activities based on the market value at the year end.

### j Leases

Rental payments under operating leases are charged as expenditure is incurred over the term of the lease.

### k Foreign currency

Transactions denominated in foreign currencies are translated at the average rate of exchange during the month. Foreign currency balances at the balance sheet date are translated at the average rate for the month of December 2013. Foreign exchange losses incurred in respect of overseas operations are included in the Statement of Financial Activities (SOFA) within charitable activity expenditure for the period in which they are incurred.

2	VOLUNTARY INCOME	Unrestricted	Restricted	2013	2012
		Funds	Funds	Total	Total
		£	£	£	£
	Donations	25,742	4,949	30,691	85,352
	Legacies				37,085
	Donations – Rent				30,000
	Grants receivable	28,025		28,025	5,305
	Donated services (KCH staff)		5,661	5,661	33,177
		53,767	10,610	64,377	190,919

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

<b>3 GRANTS</b>	Unrestricted Funds £	Restricted Funds £	<b>2013</b> Total £	<b>2012</b> Total £
Grants from UK Government:				
Department for International Development:				
Health Partnership Scheme		5,232,327	5,232,327	3,152,649
Somaliland (via PSI)		3,850,464	3,850,464	2,421,637
International Health Links Funding Scheme		42,834	42,834	639,289
Zambia Healthworkers				411,914
Zambia Nutrition		250,987	250,987	227,519
Zambia MCH				24,652
Zambia HRH		330,747	330,747	9,073
		9,707,359	9,707,359	6,886,733
Other Grants:				
Trusts		61,560	61,560	73,795
European Commission		21,506	21,506	88,680
UNICEF		59,682	59,682	78,881
Johnson & Johnson		42,131	42,131	51,545
Other Agencies		771	771	(4,033)
<b>TOTAL</b>		9,893,009	9,893,009	7,175,601
<b>4 TOTAL INCOMING RESOURCES/ (RESOURCES EXPENDED)</b>			<b>2013</b> £	<b>2012</b> £
This is stated after charging:				
Auditors' remuneration – audit fees (including VAT)			9,000	8,700

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

5 COSTS OF GENERATING VOLUNTARY INCOME	2013	2012
	£	£
Direct Salaries	-	9,122
Indirect Salaries	13,360	4,325
Total of Direct & Indirect Salaries (see Note 8)	13,360	13,447
Other Direct Costs	9,691	7,001
Indirect Support Costs (see Note 9)	3,355	3,982
	<u>26,406</u>	<u>24,430</u>

6 GOVERNANCE COSTS	2013	2012
	£	£
Indirect Salaries (see Note 8)	31,439	21,185
Audit & Professional Fees	10,665	12,923
Trustees' Expenses & Insurance	6,029	7,474
Indirect Support Costs (see Note 9)	7,896	6,274
Annual Review	3,105	-
	<u>59,134</u>	<u>47,856</u>

No trustees received remuneration for their services. During the year two trustees (2012: 3) received reimbursement of travel and subsistence expenses totalling £545 (2012: £1,585).

7 CHARITABLE ACTIVITIES	Unrestricted Funds	Restricted Funds	2013	2012
	£	£	£	£
Direct Expenditure on Programmes and Projects	75,121	4,041,687	4,116,808	3,307,498
Grants (see Note 20)	-	5,378,081	5,378,081	3,664,709
	<u>75,121</u>	<u>9,419,768</u>	<u>9,494,889</u>	<u>6,972,207</u>

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

### 8 STAFF COSTS (TOTAL)

	<b>2013</b>	<b>2012</b>
	£	£
Salaries & Fees	793,145	752,879
Social Security	76,747	70,978
Pension	26,399	24,098
	<u>896,291</u>	<u>847,955</u>

These costs are charged to Charitable Activities (Unrestricted funds), Generating Income and Governance. The indirect charges are a proportion of unrestricted costs based on time spent by the Chief Executive, Finance Director and other Administrative staff.

	<b>2013</b>	<b>2012</b>
	£	£
Charitable Activities:		
Restricted	256,859	319,255
Unrestricted	594,633	494,068
Total per Statement of Financial Activities	<u>851,492</u>	<u>813,323</u>
Costs of Generating Income – Salaries (see Note 5)	13,360	13,447
Costs of Governance – Indirect Salaries (see Note 6)	31,439	21,185
	<u>896,291</u>	<u>847,955</u>

The average number of employees during the year was as follows:	<b>2013</b>	<b>2012</b>
	No.	No.
Charitable Activities Programme & Projects	20.6	20.1
Administration	6.9	7.0
Generating Income	-	0.5
	<u>27.5</u>	<u>27.6</u>

The number of full-time equivalent posts at the end of the year was 27.5 (2012: 29.4). The FTE average for 2013 was 32.0 (2012: 32.0).

During the year one employee (2012: none) received emoluments in the range of £60,000 to £70,000. Included in those emoluments was a pension contribution of £3,229.

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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<b>9</b>	<b>SUPPORT COSTS</b>	<b>2013</b>	<b>2012</b>
		£	£
	Administration/Office Expenses	99,250	127,297
	Personnel	27,877	26,640
	Accommodation	97,965	97,194
		<hr/>	<hr/>
		225,092	251,131

The following allocation of Unrestricted Support Costs was done pro rata to the estimated time spent by staff (see Note 8):

	<b>2013</b>	<b>2012</b>
	£	£
Charitable Activities:		
Restricted	152,558	176,846
Unrestricted	61,283	64,029
	<hr/>	<hr/>
Total per Statement of Financial Activities	213,841	240,875
Costs of Generating Income - Indirect Support Costs (see Note 5)	3,355	3,982
Costs of Governance - Indirect Support Costs (see Note 6)	7,896	6,274
	<hr/>	<hr/>
	225,092	251,131

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

### 10 TANGIBLE ASSETS

	Leasehold Property Improvements £	Furniture & Fittings £	Computing Equipment £	Office Equipment £	Total £
<u>Cost</u>					
Balance brought forward	30,767	20,602	35,723	344	87,436
Additions			4,943	1,930	6,873
Balance carried forward	30,767	20,602	40,666	2,274	94,309
<u>Depreciation</u>					
Balance brought forward	6,153	8,490	16,937	344	31,924
Charge for year	11,076	6,056	11,785	170	29,087
Balance carried forward	17,229	14,546	28,722	514	61,011
<u>Net Book Value</u>					
Balance brought forward	24,614	12,112	18,786	-	55,512
Balance carried forward	13,538	6,056	11,944	1,760	33,298

### 11 DEBTORS

	2013 £	2012 £
Income tax recoverable	83	1,038
Trade Debtors	4,585	511,933
Accrued income	331,376	349,457
Prepayments	41,282	31,880
	377,326	894,308

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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### 12 CREDITORS

	<b>2013</b>	<b>2012</b>
	£	£
Bank Loan (see Note 16)	-	100,000
Accruals	66,098	296,688
Other taxes and social security	54,645	76,508
Trade Creditors	8,382	52,266
	<hr/> 129,125	<hr/> 525,462

Included in accruals is £4,345 (2012: £3,891) of accrued pension contributions.

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

### 13 STATEMENT OF FUNDS

	Balance at 1 Jan 2013	Surplus/ (Deficit)	Transfers between funds	Balance at 31 Dec 2013
	£	£	£	£
General funds	408,007	94,779	-	502,786
Designated funds				
Programme development fund	23,274	(13,842)	-	9,432
Legacy	12,620	-	-	12,620
	35,894	(13,842)	-	22,052
Total unrestricted funds	443,901	80,937	-	524,838
Restricted funds (see note 19)	432,744	74,434	-	507,178
	876,645	155,371	-	1,032,016

#### General funds

General funds are the accumulation of surpluses, less deficits, on the income and expenditure account, bequests for the general purposes of the charity and various donations and grants.

#### Programme development fund

This is a designated fund that will support future programme development in various countries.

#### Legacy

THET is in receipt of a legacy and has designated it for use by Health Partnerships.

Restricted funds represent balances held for disbursement against specific projects.

Analysis of assets between funds:

	Assets	Cash	Debtors	Creditors	Total 2013	Total 2012
	£	£	£	£	£	£
Unrestricted	33,298	563,357	10,891	(82,708)	524,838	443,901
Restricted	-	187,159	366,436	(46,417)	507,178	432,744
	33,298	750,516	377,327	(129,125)	1,032,016	876,645



# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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### 14 FINANCIAL COMMITMENTS

At 31 December 2013 the charity was committed to making the following annual payments under non-cancellable operating leases:

	2013	2012
	£	£
Operating leases which expire between two and five years	£92,000	£92,000

### 15 FUNDS HELD AS INTERMEDIARY AGENT

At the year-end THET acted as intermediary agent for the following organisations. The balances stated represent cash at bank. The following balances, and any income and expenditure in the period, have not been included in the financial statements:

	Balance held at 1 Jan 2013	Net receipts/ (payments)	Balance held at 31 Dec 2013
	£	£	£
Links Lusaka	1,813	(766)	1,047
Gondar Dermatology Research	2,410	-	2,410
Island Hospice	354	-	354
	<u>4,577</u>	<u>(766)</u>	<u>3,811</u>

#### Links Lusaka

These funds are being held by THET on behalf of a Link between Lusaka's University Teaching Hospital and Brighton and Sussex University Hospitals and Medical School to support their two-way trips by nurses, doctors, librarians and other allied health professionals for teaching and CPD.

#### Gondar Dermatology Research

These funds are held on behalf of Dr Paul Buxton, a member of the Gondar – Leicester Health Link, to provide a subscription to the Community Dermatology Journal and support travel and conferences relating to dermatology research in northern Ethiopia.

#### Island Hospice

Incoming funds from crematorium fees are donated by doctors at a number of hospices and are used to support medical training and exams in Bulawayo, Zimbabwe.

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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### **16 BANK LOAN - MORTGAGE DEBENTURE**

At the year-end date the balance of loan outstanding was £nil (2012 £100,000). The loan facility was arranged with The Charity Bank Limited in the sum of £350,000 and first drawn down in 2012. It has been drawn down and repaid from time to time since that date. Interest is taken by direct debit on a monthly basis. The loan was negotiated (and backed by mortgage debenture signed 21 July 2011) when THET received the HPS contract to enable the pre-financing of grant payments. This mortgage debenture gives The Charity Bank Limited the right to THET's assets from physical assets to unpaid invoices to the business itself. This debenture also gives the right for the bank to step in and appoint a receiver to take charge of THET's business assets as a way of ensuring repayment.

### **17 COMPANY STATUS**

The charity is a company limited by guarantee. The members of the company are the Trustees named on page 3. In the event of the company being wound up, the liability in respect of the guarantee is limited to a maximum of £1 from each of the Trustees.

### **18 CONTROLLING PARTY**

In the opinion of the Trustees, the charity has no ultimate controlling party.

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

### 19 STATEMENT OF RESTRICTED FUNDS

	Balance at 1 Jan 2013	Income during the year	Expenses during the year	Balance at 31 Dec 2013
	£	£	£	£
<b>INTERNATIONAL</b>				
Health Partnership Scheme (see Note 20a)	92,826	5,232,327	(5,300,844)	24,309
International Health Links Funding Scheme (See Note 20b)	34,403	42,834	(77,237)	-
Johnson & Johnson Fund	25,042	32,131	(32,008)	25,165
International Health links Funding Scheme – Department of Health	54,769	-	(25,258)	29,511
Johnson & Johnson WACS UK Surgical Forum	10,000	10,000	(19,000)	1,000
The Pharo Foundation	-	7,638	(7,638)	-
Principles of Medicine in Africa 4th Ed.	6,032	-	(2,510)	3,522
“Tropical Doctor” Subscriptions	-	10,560	-	10,560
<b>Total International</b>	<b>223,072</b>	<b>5,335,490</b>	<b>(5,464,495)</b>	<b>94,067</b>
<b>SOMALILAND</b>				
Health Consortium Somalia	-	2,899,124	(2,512,737)	386,387
Maternal Child Health	185,074	951,340	(1,136,415)	(1)
UNICEF	-	59,682	(59,682)	-
EC Non-State Actors	-	27,167	(27,167)	-
HGH/Comic Relief Building Referral	-	521	(521)	-
<b>Total Somaliland</b>	<b>185,074</b>	<b>3,937,834</b>	<b>(3,736,522)</b>	<b>386,386</b>

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

	Balance at 1 Jan 2013	Income during the year	Expenses during the year	Balance at 31 Dec 2013
	£	£	£	£
<b>ZAMBIA</b>				
Human Resources for Health	-	330,747	(330,739)	8
Nutrition	-	250,987	(250,979)	8
Zambia UK Health Workforce Alliance	8,868	21,074	(29,086)	856
Gordon Urquhart Memorial Fund	1,408	8	-	1,416
<b>Total Zambia</b>	<b>10,276</b>	<b>602,816</b>	<b>(610,804)</b>	<b>2,288</b>
<b>ETHIOPIA</b>				
Supporting Rural Health Centres	-	19,638	(3,442)	16,196
Ethiopia Research	7,766	4,753	(4,279)	8,240
<b>Total Ethiopia</b>	<b>7,766</b>	<b>24,391</b>	<b>(7,721)</b>	<b>24,436</b>
<b>UGANDA</b>				
Uganda Health Workers' Alliance	4,429	5,215	(9,643)	1
Uganda Development	2,127	(2,127)	-	-
<b>Total Uganda</b>	<b>6,556</b>	<b>3,088</b>	<b>(9,643)</b>	<b>1</b>
<b>TOTAL</b>	<b>432,744</b>	<b>9,903,619</b>	<b>(9,829,185)</b>	<b>507,178</b>

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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### **Health Partnership Scheme**

Funded by the UK government's Department for International Development, the four year Health Partnership Scheme supports the development of health services in low and middle-income countries through the provision of £14m of grant funds complemented by other activities designed to strengthen the Health Partnerships community and support the creation of an enabling environment for international volunteering within the NHS. To date, eighty-six grants from £5,000 over six months to £1.54m over three years have been awarded. Start-up grants support the establishment of new Partnerships, whilst larger Paired Institutional Partnership grants allow established Partnerships to extend activities related to training and capacity development. To date, seven Multi-Country Partnership grants (up to £1.8m over three years) have been awarded to Partnerships working in three or more countries with a specific focus on Millennium Development Goals 4, 5 and 6. Four Long-Term Volunteering grants (up to £1.5m over three years) have also been awarded to facilitate the delivery of innovative programmes allowing UK health professionals to work abroad on development projects supportive of national health strategies. Finally, two pilot partnership initiatives have been awarded grants - one of £954,370 awarded to NICE International to accelerate progress towards universal health coverage in India and China, and the other of £404,000 to NHS South of England (Central) to improve global health through leadership development.

### **International Health Links Funding Scheme (IHLFS)**

IHLFS aimed to strengthen the capacity of health services in developing countries by supporting over a hundred health links, each between a UK health institution and a developing country counterpart. Funded by the UK Department for International Development and the Department of Health, it was jointly managed by THET (lead partner) and the British Council, and provided £1.25 million of support per year between 2009 and 2012.

### **Johnson and Johnson Fund**

The Strengthening Surgical Capacity (SSC) Programme focuses on health partnerships working in maternal and child health across Sub-Saharan Africa. Specifically, it supports projects that aim to reduce morbidity and mortality from conditions requiring surgical intervention, either directly or through enhanced patient safety as a result of improved anaesthetic care.

### **IHLFS – Department of Health**

The aim of this grant is to increase the impact of partnerships' work overseas by building their capacity, enhancing the quality of their work and improving their ability to demonstrate the positive impact of their contribution to improving health systems in developing countries. The programme activities focus on achieving this through a more structured engagement of NHS institutions, further capacity building for partnership volunteers and funding partnership projects.

### **Johnson & Johnson WACS UK Surgical Forum**

Johnson & Johnson awarded a grant to the WACS UK Forum's Surgical Mission to Togo. The grant, which is supported and managed by THET, funds a surgical camp run by UK volunteers and the West African College of Surgeons to train local surgeons and treat complex surgical cases.

### **Pharo Foundation**

In November 2012, The Pharo Foundation awarded a grant to the Poole Africa health partnership which works with Wau Teaching Hospital, South Sudan. The grant, which will be supported and managed by THET, aims to train health workers with a focus on basic skills of diagnosis and care of the critically ill patient.

### **Principles of Medicine in Africa 4th Edition.**

This DFID grant is held by THET and is being used for the latest revision of the 'Principles of Medicine in Africa' book, including covering travel, meeting and editing costs.

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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### **“Tropical Doctor” Subscriptions**

The Beit Trust has supported THET for over 20 years to enable the provision of subscriptions to the Tropical Doctor journal for approximately 200 hospitals in Zimbabwe, Malawi and Zambia. The journal provides an essential forum for sharing experiences and establishing best practice, aiding communication between medical professionals around the world.

### **Somaliland: Health Consortium Somalia (previously Maternal Child Health)**

DFID’s funding over 5 years for the ‘Health Consortium Somalia’ programme is supporting a coherent health systems strengthening programme. This will provide an essential package of Health Services to increase the range, quality and use of services and contribute to community stability in targeted areas in Somaliland through an NGO consortium.

### **Somaliland: UNICEF**

UNICEF funded a three year Sexual and Reproductive Health project in Somaliland through the development of Emergency Maternal and New-Borne Care (EmONC) National protocols and training for health workers in the Awdal and Puntland regions of Somalia.

### **Somaliland: EC Non-State Actors**

This EC grant is supporting the improvement of technical and managerial capacity of non-state health training and professional institutions, enabling them to contribute effectively to the human resource development and governance needs of the health sector. This is delivered through inputs of specialist technical assistance to seven non-state actors. The grant pays for the expenses associated with the technical assistance provided by Kings Health Partners to Somaliland, as almost all technical assistance is provided by volunteers.

### **Somaliland: HGH/EAH Building Referral**

This project, funded by Comic Relief, aims to provide accessible health care to the Somaliland community at the point of need, including free care for the poorest, by building the capacity of the Regional Health Bureau; establishing Hargeisa Group Hospital as an effective community referral hospital, raising awareness, increasing use, updating staff skills and improving care, record keeping and management; and working with Community Health Committees to strengthen the relationship between the community and their referral hospitals.

### **Zambia: Strengthening the training & education of health workers in Zambia**

In response to a request by the Zambian Ministry of Health, THET and our partners are delivering this innovative and sustainable training and education project, focussing support on national nursing needs and assisting with the development and delivery of Master of Medicine courses in the selected clinical specialisms of pathology, anaesthetics, psychiatry and biomedical engineering.

### **Zambia: UK Health Workforce Alliance**

Two substantial donations have been received to support the work of key members of the Zambia UK Health Workforce Alliance, a growing network of Zambian-based and UK-based organisations which work together to promote and improve the coordination and impact of Zambia-UK joint work in health.

### **Zambia: Evan Cornish Foundation**

This project aims to improve the quality of nursing education in Zambia by providing teaching resources to schools of nursing.

### **Zambia: Nutrition**

DFID’s funding over three years for the Nutrition Programme is supporting the School of Agriculture at the University of Zambia to deliver a BSc in Nutrition while also supporting faculty development and establishing a MSc in Nutrition.

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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### **Zambia: Gordon Urquhart Memorial Fund**

Gordon Urquhart died suddenly in Zambia in 2012. He was the partner of THET Volunteer Anne Mason. Funds raised from the funeral collection and subsequent donations are going towards local projects selected by Anne.

### **Zambia: Maternal and Child Health**

THET and the Zambia UK Health Workforce Alliance received a grant from DFID to review maternal and newborn health services in Zambia on behalf of the Ministry of Health.

### **Ethiopia: Supporting Rural Health Centres**

This project will enable rural people suffering from chronic diseases to receive essential care near to their homes from health workers who are appropriately trained and continuously supported and encouraged to develop their skills.

### **Ethiopia Research**

- **Chronic Research:** The chronic disease programme enables patients to be seen at the health centre nearest their home around Gondar and Jimma; THET contributes funds for staff development and training, and the collection of data, which is the research base of our work
- **Ethiopia Association of Physicians:** This grant was awarded to Professor David Phillips to investigate, in rural and urban patients assembled through the chronic disease programme, whether early under-nutrition may be partly responsible for their atypical diabetes.
- **Ethiopia Epilepsy:** Chronic disease clinics include epilepsy. This fund was established as epilepsy attracts regular gifts from Southampton; these are used by Dr Martin Prevett, who has worked with THET for 15 years, for studies chiefly in rural patients at the chronic disease clinics.

### **Uganda: Health Workers' Alliance**

The Uganda-UK Health Alliance, based on the successful Zambia-UK Health Workforce Alliance, has been set up in recognition of the mutual interest of Uganda and the United Kingdom in promoting co-operation and interaction in healthcare between the two countries, inspired by their common principles and complementary objectives, and wishing to extend the existing professional, governmental and non-governmental contacts between the UK and the Ugandan health care systems.

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

### 20 GRANTS ANALYSIS

		2013 £	2012 £
Health Partnership Scheme Grants	20(a)	5,300,844	3,055,325
Other		-	4,498
Total Health Partnership Scheme	19	5,300,844	3,059,823
International Health Links Funding Scheme	19 20(b)	77,237	604,886
		5,378,081	3,664,709

### 20(a) Health Partnership Scheme

		2013 Grants £
<b>VSO</b>	Bringing together Midwives and Nurses to Improve Maternal Health in Malawi through Volunteerism and Partnerships	624,190
<b>Royal College of Paediatrics and Child Health</b>	Working in partnership to achieve MDG4 in East Africa: improving the quality and safety of hospital care for sick infants and children through ETAT+	456,537
<b>University of Edinburgh</b>	Strengthening and integrating palliative care into national health systems through a public health primary care approach in 5 African countries to contribute to meeting the targets of MDG goal 6	436,342
<b>Royal College of Pathologists</b>	Africa Laboratory Skills, Management and Improvement Programme	400,000
<b>National Institute for Health and Clinical Excellence</b>	Improving the legitimacy and efficiency of healthcare resource allocation through the systematic use of clinical and economic evidence and social values in decision-making.	381,460
<b>Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Science, University of Oxford</b>	Multilevel training in trauma and musculoskeletal impairment care in East Central and Southern Africa	379,032
<b>University of Manchester</b>	Lugina Africa Midwives Research Network (LAMRN)	290,000



# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

		<b>2013 Grants £</b>
<b>Royal College of Paediatrics and Child Health</b>	RCPCH Global Consortium for the Exchange of Child Health Professionals	224,738
<b>Royal College of Midwives</b>	Embedding the twinning concept between midwifery associations to improve MDG 4 and 5	203,060
<b>Southern Health NHS Foundation Trust</b>	Improving Global Health through Leadership Development (IGH)	190,000
<b>London School of Hygiene &amp; Tropical Medicine</b>	Capacity building in Eastern Africa to eliminate avoidable blindness in urban and rural areas	185,000
<b>Liverpool-Mulago Partnership</b>	Promoting Maternal Health through effective and sustainable volunteering	183,210
<b>Cwm Taf Health Board</b>	Developing integrated primary care networks in Uganda through Welsh links	147,900
<b>Moorfields Eye Hospital NHS Trust</b>	Strengthening eye health systems in Ghana as a model for West Africa	116,990
<b>The Association of Surgeons of Great Britain and Ireland</b>	Multi-level training for healthcare workers in surgical and theatre nursing skills in East, Central and Southern Africa (ECSA) to achieve better outcomes following emergency surgery	107,536
<b>Aneurin Bevan Health Board</b>	Strengthening health workforce capacity and professional development in maternal and new-born emergency care in Bong County, Liberia	104,734
<b>The Kambia Appeal</b>	Improving maternal and child health in the Kambia district through long-term volunteering	96,272
<b>South Devon Healthcare NHS Foundation Trust</b>	Reducing mortality and morbidity from traumatic injury in central Kenya through education, system improvement and prevention	95,975
<b>Gloucestershire Hospitals NHS Foundation Trust</b>	Improving maternal and child health at primary health units in Kambia District, Sierra Leone	76,107
<b>Basildon &amp; Thurrock University Hospital</b>	Creating a National Epilepsy Hub: Reaching Rural Communities in Sierra Leone	69,102
<b>East London Foundation Trust</b>	Development and implementation of multidisciplinary training programme in child and adolescent mental health for mental health professionals in Uganda	54,613
<b>Brighton &amp; Sussex University Hospitals NHS Trust</b>	Improve capacity for inpatient palliative care services at The Cancer Centre, Thakurpukur and develop 5 other regional palliative care centres in W.Bengal	37,130

## TROPICAL HEALTH AND EDUCATION TRUST

### NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

		<b>2013 Grants £</b>
<b>University of York (Department of Health Science)</b>	Strengthening the system of community mental health care in Zomba District, Malawi, through developing the enhanced role of health surveillance assistants	35,557
<b>King's Centre for Global Health</b>	King's Sierra Leone Partnership health education strengthening project	31,250
<b>Association of Anaesthetists of Great Britain &amp; Ireland</b>	Zambia anaesthesia development project	19,745
<b>Countess of Chester NHS Foundation Trust</b>	Improving the Impact of Knowledge Transfer in Health Partnerships through Infrastructural Investment	18,070
<b>Imperial College London (University)</b>	Reducing neonatal mortality and maternal and paediatric infection through improved patient safety in Rwanda	15,000
<b>Southern Health NHS Foundation Trust</b>	Establishing continuous CPD for recently qualified Community Mental Health care workers in Ghana	15,000
<b>University College Hospitals London</b>	Bangladesh Child Cancer Project	15,000
<b>University Hospital Southampton NHS Foundation Trust</b>	Reducing the burden of respiratory and other chronic diseases in rural Ethiopia	15,000
<b>University of Liverpool</b>	Endoscopic therapy and TTT to sustainably prevent deaths from Acute Upper GI Bleed in Malawi	15,000
<b>Association of Surgeons of Great Britain and Ireland</b>	Introduction of "Training the Trainer" (TTT) Courses to enhance surgical training in West Africa	14,996
<b>Guy's &amp; St Thomas' NHS Foundation Trust</b>	A Self-Sustaining Medical Equipment Service in Arthur Davison Children's Hospital & Ndola Central Hospital, Zambia	14,990
<b>School of Nursing and Midwifery, University of Brighton</b>	The implementation of the first Paediatric Nursing course in Zambia	14,520
<b>North Bristol NHS Trust</b>	Localising tools and training to improve maternal and perinatal outcomes in Bulawayo and beyond	13,500

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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		<b>2013 Grants £</b>
<b>Imperial College London (University)</b>	Reducing newborn mortality with staff training, guidelines and respiratory and nutritional support in Rwandan hospitals	13,486
<b>Frimley Park Hospital</b>	Developing specialist eye care services for the people of northern Zambia	13,455
<b>Central and North West London NHS Foundation Trust</b>	Developing a centre of excellence in Tanzania for the therapeutic management of violence and aggression	13,355
<b>East London NHS Foundation Trust</b>	BRAIN GAIN: Training peer support workers (PSW's) to support community mental health in urban Uganda	13,084
<b>Northumbria Healthcare NHS Foundation Trust</b>	Training of a multi-disciplinary team to support the launch of a burns unit in Tanzania	13,072
<b>University of East Anglia</b>	Utilising a 'training the trainers' approach to developing teaching skills of Malawian educators and nurses	12,673
<b>Chelsea and Westminster Hospital</b>	Chelsea and Westminster / Kitovu Hospitals Fistula Training Link	12,244
<b>King's College Hospital</b>	Post Traumatic Limb Reconstruction Fellowship for Palestinian Surgeons	12,000
<b>Rotherham NHS Foundation Trust Hospital</b>	Improving maternal and child health care in remote rural Nepal by supporting primary care workers	11,640
<b>University College London</b>	Partner project: training of radiotherapy equipment maintenance personnel in Ghana	8,820
<b>Royal Hampshire County Hospital</b>	Winchester/Yei health link "care" project	8,068

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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		<b>2013 Grants £</b>
<b>University Hospital of South Manchester NHS Foundation Trust</b>	GULU-MAN link primary trauma course	6,898
<b>Sheffield Teaching Hospitals NHS Foundation Trust</b>	Further Development of the limited Biomedical Engineering Resources within the Hospitals of Tigray Region Ethiopia	6,135
<b>Hampshire Hospitals NHS Foundation Trust</b>	Repair To Care	5,858
<b>Ghana Wessex Stroke Partnership UK (Southern Health NHS Trust)</b>	Wessex Ghana stroke partnership project to develop multi-disciplinary management of patients with stroke	5,210
<b>Aneurin Bevan Health Board</b>	Setting up a health partnership	5,000
<b>Bart's Health NHS FT</b>	Setting up a health partnership	5,000
<b>Barts and Royal London, QMUL</b>	Setting up a health partnership	5,000
<b>Cambridge University Hospitals</b>	Setting up a health partnership	5,000
<b>East Kent Hospitals NHS Trust</b>	Setting up a health partnership	5,000
<b>New Craigs Hospital, NHS Highland</b>	Setting up a health partnership	5,000
<b>Imperial College</b>	Setting up a health partnership	4,975
<b>The Royal College of Surgeons, Edinburgh</b>	Setting up a health partnership	4,517
<b>East London Foundation NHS Trust</b>	Setting up a health partnership	4,212
<b>Association of Anaesthetists of Great Britain and Ireland</b>	SAFE obstetric anaesthesia courses for the whole of the Ugandan anaesthetic workforce	3,297
<b>Royal College of Paediatrics and Child Health</b>	Building professional capacity to improve child health in Palestine	2,799

# TROPICAL HEALTH AND EDUCATION TRUST

## NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

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		<b>2013 Grants £</b>
<b>Nottingham University Hospital NHS Trust</b>	Training and capacity development for colposcopy and cervical pathology reporting in Kathmandu, Nepal	2,583
<b>NHS Highland</b>	Reducing health harm caused by alcohol in Upper West Region, Ghana	2,238
<b>Southern Health NHS Foundation Trust</b>	Health system strengthening via WHO-AIMS in Ghana and building expertise in quality mental health informatics	750
<b>University of East Anglia</b>	Grant refunded to THET	(1,084)
<b>University of Sheffield</b>	Grant refunded to THET	(1,231)
<b>Various unspent small grants reclaimed</b>	Grants refunded to THET	(1,602)
<b>Central Manchester University Hospitals NHS Foundation Trust</b>	Grant refunded to THET	(4,164)
		<hr/> <b>£5,300,844</b> <hr/>

## TROPICAL HEALTH AND EDUCATION TRUST

### NOTES TO THE FINANCIAL STATEMENTS YEAR ENDED 31 DECEMBER 2013

#### 20(b) International Health Links Funding Scheme

		<b>2013 Grants £</b>
<b>Hospice Africa UK</b>	Developing Palliative Care in sub-Saharan Africa through higher level training of health professionals.	9,000
<b>Royal College of Ophthalmologists</b>	Strengthening eye care training in Eastern Africa through VISION 2020 links.	8,996
<b>NHS Tayside, Ninewells Hospital</b>	Reduction of Burn and Scald Mortality in Children in Malawi (ReBaS). The training and development of Burn and Scald management protocols.	8,893
<b>Moorfields Eye Hospital NHS Foundation Trust</b>	Training programme to develop ophthalmic services at Korle Bu Teaching Hospital and for West Africa.	8,852
<b>Mildmay Mission Hospital, London</b>	Strengthening HIV and AIDS Health Professionals' Education in areas of high HIV prevalence in Tanzania.	7,918
<b>Imperial College</b>	Reduce mortality of sick children in Rwanda by Emergency Triage/Treatment Course and improving care pathways.	7,770
<b>South London and Maudsley NHS Foundation Trust + Institute of Psychiatry Kings College London</b>	Integrating Mental Health into Primary Care in remote rural areas of Pakistan.	7,095
<b>East London Foundation Trust</b>	Psychiatric Clinical Officer (PCO) Psychological Training and Projects.	6,407
<b>Gloucestershire Hospitals NHS Foundation Trust</b>	Strengthening maternal and newborn health in the Kambia District of Sierra Leone.	5,960
<b>Alder Hey Children's NHS Foundation Trust</b>	Improving Burn Care in Nepal	3,750
<b>University Hospitals Bristol NHS Foundation Trust</b>	Child survival in Mbarara Regional Referral Hospital and surrounding Districts, Uganda	1,371
<b>Countess of Chester Hospital NHS Foundation Trust</b>	A partnership project to develop and support capacity building of quality health care programmes in Kisiizi Hospital.	1,150
<b>Wisdom Hospice, Medway Community Healthcare</b>	The development of collaborative palliative care education for health care professionals between Nigeria and the UK	631
<b>Brighton &amp; Sussex University Hospitals NHS Trust</b>	Building Capacity in Paediatric Life Support Training in University Teaching Hospital, Zambia.	126
<b>Royal College of Nursing Scotland</b>	Nursing Leadership and Mentorship Training for Young Malawian Nurse & Midwives	(682)
		<b>£77,237</b>