



International Medical Corps (UK)

Annual Report and Financial Statements

30 June 2018

Company Limited by Guarantee
Registration Number
4474904 (England and Wales)

Charity Registration Number
1093861

Contents

Reports

Administrative details of the charity, the trustees and advisors	1
Trustees' report (including strategic report)	2
Independent auditor's report	28

Financial Statements

Statement of financial activities	31
Balance sheet	32
Statement of cash flows	33
Principal accounting policies	34
Notes to the financial statements	38

The following pages do not form part of the statutory financial statements:

Charitable activities detailed analysis	45-49
-----------------------------------------	-------

Administrative details of the Charity, the trustees and advisors

Trustees	Andrew W. Géczy Nancy A. Aosse Tim Kirk C. William Sundblad
Executive Director	Kevin Noone
Finance Director	Fahmida Muhit
Risk & Compliance Committee	Andrew W. Géczy Tim Kirk
Registered office	161 Marsh Wall London E14 9SJ
Telephone	0207 253 0001
Facsimile	0207 250 3269
Website	http://www.internationalmedicalcorps.org.uk
Company registration number	4474904 (England and Wales)
Charity registration number	1093861
Auditor	Buzzacott LLP 130 Wood Street London EC2V 6DL
Bankers	Barclays Bank PLC 5th Floor Level 27 1 Churchill Place London E14 5HP
Solicitors	Bates, Wells & Braithwaite 10 Queen Street Place London EC4R 1BE

Trustees' report (including strategic report) 30 June 2018

The trustees, who are also directors of the company for the purposes of the Companies Act 2006, present their report along with the financial statements of the charity for the year ended 30 June 2018. The financial statements have been prepared under the accounting policies set out therein and comply with applicable law and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), effective from accounting periods commencing 1 January 2015 or later.

The report as a whole has been prepared in accordance with Part 8 of the Charities Act 2011. The information in the sections headed 'Strategic Report' constitutes the strategic report as required by the Companies Act 2006 (strategic report and directors' report) Regulations 2013.

The required information to be presented in a directors' report under the Companies Act 2006 is incorporated in the remaining sections of the report.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Trustees and Organisational Structure

International Medical Corps (UK) ("the Charity") was incorporated as a company limited by guarantee in England and Wales on July 2, 2002 and registered as a charitable organisation with the Charity Commission on September 19, 2002. Activities commenced on November 1, 2002.

International Medical Corps (UK) is an international humanitarian non-governmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a US registered non-profit organisation that shares the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes on the ground in accordance with the terms and conditions of its grants. During the year, over \$146 million of the Charity's programmes were delivered in partnership with International Medical Corps (2017: \$163 million). This represents a 10% decrease (2017: 3% increase) in activities worldwide over the previous year. This is in line with direction from the board to rationalise the Charity's revenue portfolio.

For ease of reference, International Medical Corps (the non-profit organisation registered in California) will be referred to as International Medical Corps. The UK charity will be referred to as International Medical Corps (UK).

The trustees govern in accordance with the Memorandum and Articles of Association of International Medical Corps (UK) as amended by Special Resolution passed on October 25, 2002. In addition, the trustees refer to a governance document setting out clear Terms of Reference for their roles and responsibilities.

The Board of Directors of International Medical Corps has the right to appoint one trustee (and any successor) by notice in writing addressed to the secretary of the Charity, and any person so appointed shall become a trustee immediately upon receipt by the secretary of such notice.

STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)

Trustees and Organisational Structure (continued)

International Medical Corps (UK) coordinates its activities with the UK and other Governments, multilateral agencies and other international NGOs in order to ensure that available resources for relief activities are maximised. It subscribes to the Sphere Project's Minimum Standards in Disaster Relief; and it seeks to be informed by the guiding principles in the newly merged CHS Alliance's Code of Good Practice for the Management and Support of Field Staff.

The Board of Trustees is the governing body for International Medical Corps (UK) and currently comprises of four members who aim to meet three times each year. Additional meetings can be called at the request of the Chairman. For the 2017/2018 financial year, the Board of Trustees met in December 2017 and June 2018. The list of trustees who served in the year is shown on page 1. At least three members, including the Chair, must be present to ensure a quorum.

Risk and compliance committee members meet on a regular basis to monitor the risks and compliance issues of the Charity and report back to the main board. Audit function remains with the main board members.

For the purposes of setting employee remuneration, the trustees have not deemed it fit within the current structure to require a separate remuneration committee and for which appropriate delegation has been given to the Charity's Executive Director, who is also the Administrative Director for this purpose.

Statement on Approach to Safeguarding

The Charity's US affiliate has set up an independent prevention of sexual exploitation and abuse (PSEA) unit who report to the Executive Director of International Medical Corps (UK) on all safeguarding matters.

International Medical Corps (UK) is committed to the security and protection of its staff, beneficiaries, and the communities in which we work. International Medical Corps (UK) has adopted International Medical Corps' safeguarding policies, including its Code of Conduct, with necessary modification as required by legislations in the UK.

International Medical Corps' safeguarding policies are survivor centric and prioritise a do-no-harm approach. All International Medical Corps employees, volunteers, and consultants are trained on and responsible for knowing and abiding by the standards contained in the Code of Conduct and for reporting any suspected violations. International Medical Corps has various reporting mechanisms for suspected violations, including a hotline hosted by a third-party service provider that allows for anonymous reporting, and its policies forbid retaliation for good faith reports.

Reports of violations of International Medical Corps' safeguarding policies are referred to its Investigations Unit, which conducts investigations in consultation with the Safeguarding Case Team, an interdisciplinary group of senior leaders. Individuals who are found to have violated the Code of Conduct are subject to disciplinary action, up to and including termination.

STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)

Trustees and Organisational Structure (continued)

As governing body for the Charity, the trustees take decisions and approvals on a broad level regarding a number of operational issues and, strategic and operational risks as follows:

- ◆ Strategy – Determine and approve International Medical Corps (UK)'s strategic direction and annual business plan, scrutinising the extent to which the Charity has been able to meet its charitable objectives.
- ◆ Management – Review and approve existing and new relationships with the Charity's affiliate as well as the Administrative Services Agreement and defining the implementation of the Charity's country programmes.
- ◆ Financial Management and Compliance requirements – Review and approve annual budgets, statutory statements and ensure full compliance with all constitutional, legal, regulatory and statutory requirements.
- ◆ Risk – The Board has a responsibility for considering and approving International Medical Corps (UK)'s procedures for risk management, ensuring there is a framework of structures, policies and processes in place for the organisation and the Board of Trustees, itself, including an appropriate skills mix.

Key Management Personnel

The key management personnel of the Charity consist of the Trustees, the Executive Director and the senior management team. The trustees have delegated management of the Charity's operations to the Executive Director, who is supported by senior management team, as follows:

International Medical Corps (UK) contracted staff
Senior Director of International Programmes
Director of Finance
Director of Human Resources

International Medical Corps contracted staff
VP International Programmes
VP Finance and Administration
VP Institutional Advancement

In setting the pay and benefits of the UK contracted senior management team, the Executive Director refers to the company's salary scales, which are periodically benchmarked against reliable industry data. The salary scale including the pay policy is approved by the Executive Director.

The remuneration of the Executive Director is paid through an annual service fee set by International Medical Corps.

Trustees' Responsibilities

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

STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)

Trustees' Responsibilities (continued)

Company law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of such resources, including the income and expenditure, of the charitable company for that period. Under company law, the trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period.

In preparing these financial statements, the trustees are required to:

- ◆ select suitable accounting policies and then apply them consistently;
- ◆ observe the methods and principles in the Statement of Recommended Practice Accounting and Reporting by Charities;
- ◆ make judgements and estimates that are reasonable and prudent;
- ◆ state whether applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- ◆ prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Each of the trustees confirms that:

- ◆ so far as the trustee is aware, there is no relevant audit information of which the charitable company's auditor is unaware; and
- ◆ the trustee has taken all the steps that he/she ought to have taken as a trustee in order to make himself/herself aware of any relevant audit information and to establish that the charitable company's auditor is aware of that information.

This confirmation is given and should be interpreted in accordance with the provisions of S418 of the Companies Act 2006.

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

OBJECTIVES AND ACTIVITIES

Public Benefit

The trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit in reviewing the Charity's aims and in planning future activities. The trustees believe that the Charity benefits the public through the achievement of its goals and objectives, specifically by:

- a. Timely and appropriate humanitarian aid to vulnerable victims of wars and disasters.
- b. Building the capacity of local health care providers to increase the standards of health care for local communities and enhancing more sustainable systems.
- c. Contributing to the UK's agenda for international development and, in particular, the achievement of the Sustainable Development Goals including prevention of and response to violence against women and girls.
- d. Contributing to the containment and reduction of infectious diseases globally.
- e. Contributing to an appreciation and technical understanding of the impact of various health issues affecting the vulnerable, through the UK/EU media and other humanitarian networks.

International Medical Corps (UK)'s Goals

- ◆ To mobilise sufficient resources to realise International Medical Corps (UK)'s charitable objects and humanitarian mission.
- ◆ As per International Medical Corps (UK)'s Memorandum of Association, the objects of the organisation are to:
 - a. Relieve suffering, sickness and poverty throughout the world by providing medical aid, health care training and health care programmes and to promote good health and preserve lives by providing medical supplies and trained medical professionals particularly in areas which have suffered through war and conflict; and
 - b. Further such of the activities of International Medical Corps, a non-profit corporation registered in California USA, as are exclusively charitable and which may advance the objects set out in (a) above.

International Medical Corps (UK)'s mission is to provide humanitarian assistance, healthcare and training to communities affected by disasters, conflict and poverty, so they can return to self-reliance.

During the reporting period, the Charity continued to report on six main areas of work which are referred to as flagships:

1. Building health capacity
2. Emergency response

OBJECTIVES AND ACTIVITIES (continued)

International Medical Corps (UK)'s Goals (continued)

3. Mental health
4. Women and children's health
5. Clean water, sanitation and hygiene
6. Nutrition

Monitoring of Activities

International Medical Corps (UK) continues to implement effective internal reporting mechanisms for its activities. It provides regular programmatic and financial reports on project activities and progress as required by all its institutional donors and other stakeholders. Additional internal field programme reports and departmental updates supplement this information for day-to-day management. The Charity also maintains automated recruiting and programme records to track performance and grant compliance. Staff, in various capacities, visit country programmes during the year to provide relevant technical support. During the reported period countries visited included Jordan, Haiti, Central African Republic, Kenya, Afghanistan, Chad, Syria, Turkey, Lebanon, Cameroon, Mexico, Zimbabwe, Nigeria and Sudan to provide field teams with programmatic and technical support.

International Medical Corps (UK) engages external consultants to conduct performance reviews of country programme delivery. During the reported period a consultant has visited a country's mission and has summarised the key findings in a report. In addition, International Medical Corps (UK) is also reliant on its affiliate's internal audit, compliance and PSEA units' independent field reviews and evaluations and reporting. Risk assessment and compliance issues are flagged in various functional units' regular reviews and critical issues are reported back to the senior leadership team. Senior members from International Medical Corps' functional units brief the trustees during board meetings on key developments and risk mitigation measures that have been put in place. International Medical Corps (UK)'s Executive Director participates in the weekly executive leadership team forums of International Medical Corps and is kept informed of challenges and risks associated with implementation undertaken by the Charity's affiliate.

Statement on Contributions by Volunteers

International Medical Corps (UK) was assisted at its headquarters by several volunteers over the course of the year who carried out various duties to support the organisation's work.

International Medical Corps (UK) continues to actively encourage members of the public to become involved in its work, both in the UK to raise awareness of international development issues and overseas to support its operations.

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT

Achievements and Performance

Organisational Performance

Over the course of the financial year to June 2018, International Medical Corps (UK) provided assistance valued at \$ 146,278,574 (2017 - \$162,959,815) to vulnerable populations in 28 countries (2017: 26). This reduced level of activity reflects the trustees' direction to rationalise its global portfolio. This included the distribution of donated medical and other supplies valued at \$16,557,965 (2017 - \$15,277,301).

International Medical Corps (UK) supported through its US affiliate 3,601 staff positions in 28 countries (2017: 4,196 staff positions in 26 countries), providing essential services to several million direct and indirect beneficiaries.

Summary of Measures Used to Assess International Medical Corps (UK)'s Performance

International Medical Corps (UK) continues to use a Balanced Business Scorecard specifying the following main objectives:

Financials: "Transparently and efficiently raising and spending donor money"

Goal	Comment
Timely and efficient delivery of programme activities.	The Charity successfully delivered activities of the value of \$146M (2017: \$163M) which exceeded the Charity's annual budget.
Control over corporate costs.	The Charity has managed corporate expenditure within the provisions of its annual budget and according to the terms specified by its donors. Additional resources were committed to provide adequate support for growth in charitable activities and to ensure compliance with growing donor regulations.
Diversification of income.	The Charity continued to be funded by a wide range of government agencies and foundations apart from the US. Ongoing participation in various forums to discuss potential partnership mechanisms following Brexit.

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Summary of Measures Used to Assess International Medical Corps (UK)'s Performance (continued)

Risk: "Minimise risk while anticipating threats"

Goal	Comment
<p>Strengthened systems for identifying and raising areas of concern in a timely manner to the Executive Management team.</p>	<p>The Charity continued to maintain its risk register and controlled the field operations through regular reviews, cross-team participations and reference to the Charity's scorecard mechanism.</p> <p>The Charity's US affiliate has launched Supply Chain Excellence Program (SCEP): a multi-year program consisting of several transformation and change initiatives in the logistics and supply chain domain, with the ambition of consolidating existing strengths and taking International Medical Corps to an increasing sector leadership position.</p> <p>In addition, the Charity has worked with its US affiliate to strengthen safeguarding mechanisms. During the reported period the Charity also reviewed and improved systems to ensure compliance with General Data Protection Regulation (GDPR) that came into effect in May 18.</p>
<p>Mitigate financial loss through strict control.</p>	<p>Strict controls were maintained and updated as necessary to ensure adherence to internal procedures, requirements of donors and the requirements of the UK Charity Commission.</p> <p>Procurement policies and procedures have been strengthened and systems automated to ensure donor funds are spent in accordance with donor regulation and value for money principles.</p>

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Summary of Measures Used to Assess International Medical Corps (UK)'s Performance (continued)

People: "Always supporting its people to develop professionally while delivering the Charity's mission."

Goal	Comments
Staff are motivated to achieve and exceed performance expectations.	<p>Enhanced multi-team collaborations on challenges faced in implementing programme activities. International programmes team are working closely with International Medical Corps counterparts;</p> <p>Staff undertook in-house and external training on donor regulation and industry best practices to ensure pertinent oversight;</p> <p>Staff wellness and engagement activities are regularly organised.</p>
Improve on the creation of opportunities for effective intercompany collaboration and improved quality of programmes.	<p>Intercompany and interdepartmental collaborations were enhanced to consider opportunities and challenges in wider contexts.</p> <p>Some key programme management, technical unit and logistics positions were recruited who are providing oversight to field operations.</p>

Operations: "Delivering the mission efficiently, through discipline and thoroughness"

Goal	Comments
Regular review of programme performance seeking value added to field operations across all donor funded programmes.	Programme staff at all levels were encouraged to identify and address challenges faced during implementation on an ongoing basis to ensure effective programme implementation and delivery.

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Summary of Measures Used to Assess International Medical Corps (UK)'s Performance (continued)

Operations (continued)

Goal	Comments
Increased monitoring and evaluation activities, training and programme development.	<p>Programme audit visit by an independent consultant was undertaken.</p> <p>On-the-job training of Programme Staff continued throughout the period.</p> <p>During the reported period, the Charity in collaboration with its US affiliate submitted 107 proposals (194 submitted in 2017).</p> <p>82 (77%) proposals have been approved (2017: 134; 84%) while 25 (23%) were rejected (2017: 26; 16%). In addition to the 107 proposals, 6 proposals (2017: 31) were withdrawn by the agency due to changing circumstances.</p>
Secure multi-year grants from donors.	Several multi-year proposals with UK government's Department for International Development (DFID), EU Regional Trust Fund - MADAD, EU Emergency Trust Fund for Africa, Global Affairs Canada were secured.

Donors: "Accountable to a growing group of donors"

International Medical Corps (UK)'s Programme Unit continued to provide enhanced due diligence on the Charity's grants and contracts for compliance with the standards and regulations specified by its donors with support from the US affiliate's compliance and internal audit team. Additionally, International Medical Corps (UK) continues to be a member of the Core Humanitarian Standard (CHS) Alliance and it continues to monitor its compliance with the Humanitarian Accountability Framework.

Goal	Comment
Improve high level donor interaction.	Continued robust interaction with International Medical Corps (UK) donors at all levels throughout the year.
To improve on effective donor intelligence.	Regular communication with donor agencies ensured that developments were captured for improved project developments and implementation.

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Summary of Measures Used to Assess International Medical Corps (UK)'s Performance (continued)

Donors (continued)

Goal	Comment
Compliance with reporting deadlines and improved performance on complementary information requests.	The Charity remains compliant with donor reporting requirements.

Innovation: "Challenging the norm to minimise inefficiency and maximise impact"

Goal	Comment
Encouraging a culture of creativity and problem solving.	Organisation-wide management information systems are being used to obtain real-time reports integrating key indicators across finance, programme delivery, HR and logistics to ensure effective implementation of programmes. Systems improvement projects were implemented in all key areas affecting delivery of programme activities.

STRATEGIC REPORT (continued)

Achievements and performance (continued)

External Communications

International Medical Corps (UK)'s Technical Unit members continued to represent the Charity in forums both within UK and abroad and contributed their expertise in global discussions on sectoral issues. The Charity's WASH advisor attended the Global WASH Cluster meeting in Berlin to contribute International Medical Corps' experience with localisation, accountability, and quality assurance in humanitarian interventions. The Global Health Cluster (GHC) meeting in Brussels, where global health in emergencies and related matters were discussed and recommendations for improvements put forward was attended by the Senior Health Advisor. Given our extensive work in emergency responses and public health emergencies including those of international concern, International Medical Corps is a valuable member of the GHC and our active participation and involvement is highly appreciated.

The Charity's WASH advisor participated in the 8th Emergency Environmental Health Forum (EEHF) to discuss the way forward for WASH interventions in emergencies. Team members participated in a simulation of the field hospital launch in an emergency context organised by International Medical Corps' Emergency Response Unit in Los Angeles, California. International Medical Corps is a member of the Implementing Best Practices (IBP) initiative in Sexual and Reproductive Health consortium and the Director of Technical Unit attended and contributed to a meeting organised by IBP on sexual reproductive health and rights (SRHR). Given our work with women and children including new-borns, our engagement in IBP initiative contributes to global level initiatives to improve sexual and reproductive health of women worldwide, especially those in resource-limited, fragile and precarious situations.

In addition, Senior Health Advisor (SHA) visited International Medical Corps programme in South Sudan to work with the (programme) team on improving the technical quality of our work. He visited two of the hospitals we support and provided on-the-spot technical guidance on quality improvements and facilitated a workshop on quality improvement processes, which was well received and appreciated by the team. Furthermore, the SHA provides technical support for the emergency response to the Ebola virus disease outbreak in the eastern parts of the Democratic Republic of Congo in our efforts for controlling the outbreak. The Director of Global Supply Chain represented International Medical Corps at Logistics cluster general meeting. The agency participated at key sector events through speaking appearances at Aid & Trade London 2018 and attendance to Aidex 2017.

Over the past 12 months, International Medical Corps (UK) has continued to share information with the general public about its programmes and impact through its website, publications, email communication, and social media. International Medical Corps (UK) has sought to increase the number of individuals with whom the organisation communicates through email and online, providing supporters with interesting content and opportunities to contribute to the organisation's work.

For example, International Medical Corps (UK) and its affiliate International Medical Corps, have launched joint, themed campaigns across web, social media and email. June's "Seeking Refuge, Rebuilding Lives" campaign told an ongoing story across the month of the plight of refugees and internally displaced people, the humanitarian needs that International Medical Corps (UK) seeks to address, the stories of those who benefit from our projects and the values of the organisation.

In addition, International Medical Corps (UK) has worked to strengthen its relationships with relevant communications functions of major donors such as DFID and the EU Commission (EU Regional Trust

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

External Communications (continued)

Fund 'MADAD'). As a result of International Medical Corps (UK)'s excellent institutional donor-funded visibility work in the past, the organisation is currently implementing two larger visibility projects (funded by European Civil Protection and Humanitarian Aid Operations (ECHO) and the EU-commission) focusing on our response to the Syria refugee crisis in Lebanon and Jordan. In terms of content, the ECHO-funded project included three high-quality videos from our hospital inside Azraq Refugee Camp, as well as an in-depth story about a Syrian refugee, disseminated on a cutting-edge, digital storytelling platform called ShortHand. Importantly, the visibility projects draw attention to the continued, lifesaving support we are providing to Syrian refugees, which include maternal and other healthcare services.

The Digital Marketing team has continued to refine and improve our channels. New supporters are being mobilized and Facebook advertising campaigns are ongoing.

Review of International Medical Corps (UK)'s Humanitarian Assistance for the Financial Year 2017/2018

A summary of the key activities that have been implemented by International Medical Corps on behalf of International Medical Corps (UK) is provided below. For clarity purposes, references below to International Medical Corps, within the context of programme delivery, indicate "International Medical Corps (UK) through its affiliate International Medical Corps (IMC)".

Emergency Response & Building Health Sector Capacity

◆ **Emergency health and wash services provision in Afghanistan**

With funding from the United Nations, International Medical Corps provides lifesaving trauma care services through three First Aid Trauma Posts (FATPs) in hard-to-reach, conflict-affected districts of Paktika, Barmel, Janikhel and Ziruk. The role of the FATPs is to stabilize the injured and refer them to the nearest hospital for advanced care. In order to provide timely and standard referral, we maintain three equipped ambulances (one at each FATP). In addition, International Medical Corps has trained newly recruited nurses on life support to provide quality trauma care. Since the start of the project in November 2017, around 9,000 individuals suffering from wounds have received trauma care in the FATPs and more than 28,000 have been reached by mobile clinics.

Additionally, Gender Based Violence (GBV) response services are also provided, including clinical management of rape and awareness as well as primary and reproductive health care services, and psychological support through two mobile clinics.

International Medical Corps also provides emergency Water Sanitation and Hygiene (WASH) services to returnees, internally displaced people (IDPs) and underserved groups through construction of boreholes and latrines and distribution of jerry cans and hygiene promotion within the communities.

Under the WASH component, 18 boreholes and 200 latrines have been constructed providing clear water to around 3,600 people and access to proper sanitation facilities to 4,200 people.

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Review of International Medical Corps (UK)'s Humanitarian Assistance for the Financial Year 2017/2018 (continued)

◆ **Emergency response for displaced population from Eastern Ghouta**

As Syrian government forces intensified their offensive in Eastern Ghouta early this year, two humanitarian corridors were set up to allow civilians to leave. In one week only, at least 45,000–50,000 people were evacuated (with about 70% women and children) and taken to seven collective shelters allocated by the government on a daily basis. On the 19th of March, two International Medical Corps' Basic Mobile Medical Clinics were deployed in two areas where collective shelters were located (Najha and Harjaleh) and provided 424 consultations in one day only. International Medical Corps' emergency response continued as the number of displaced population kept increasing day by day, reaching almost 60,000 by the 24th of March. The needs in the areas were huge, as overcrowding conditions in inadequate and unequipped shelters added to the already dire conditions of the population caused by years of fighting and the siege. International Medical Corps was able to secure funding from UNOCHA to expand the scope of its emergency response to a multi-sectorial intervention within the shelters. The intervention included deployment of mobile medical units, mobile Mental Health and Psychosocial Support (MHPSS) units and emergency distribution of hygiene kits. As of the 30th of June, during 2 months of operations in different shelters, the mobile units provided a total of 10,213 consultations to 9,137 beneficiaries.

◆ **Strengthening Community-Based Service Delivery through Multi-Service Centres in Iraq**

In 2017, thanks to multi-year funding from Government Affairs Canada, International Medical Corps established two community centres in underserved areas of Anbar and Salah al-Din. Each centre provides a range of services and referrals, including primary health care consultations, mobile medical clinics, community health outreach, mental health case management and psychosocial support activities, gender-based violence case management, and women's empowerment activities. Since their establishment, the centres have become a lifeline for the surrounding communities, both in terms of employment and essential service provision.

Among the empowerment activities offered are skills-building sessions, which serve as a means for women and girls to support themselves and their families with much-needed income. Sawsan, who was once forced to flee from her home due to violence in 2016, now works at the Anbar community centre as a sewing instructor, which helps her to provide for her nieces and nephews for whom she is the sole caregiver. Sawsan can always be seen with a smile on her face and has an encouraging word for everybody she meets: "I advise every person not to lose hope...I didn't have someone to teach me and I couldn't attend [skills-building] sessions, so now I want to help women have this opportunity." International Medical Corps is working closely with an Iraqi partner organization so that they may take over management and operation of the community centres before the end of 2019 as part of its remit to build capacity among local service providers.

◆ **Cholera Prevention and Response in Yemen through Life-Saving WASH Assistance**

Between April 2017 and July 2018, there were over one million suspected cholera cases in Yemen, including 2,310 associated deaths. As part of efforts to prevent a new wave of cholera in Yemen,

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Review of International Medical Corps (UK)'s Humanitarian Assistance for the Financial Year 2017/2018 (continued)

International Medical Corps began providing water, sanitation, and hygiene (WASH) support for six health facilities in high-risk areas of Sana'a and Al-Dhale'e governorates in 2018. The combined catchment population for these health facilities is close to 150,000 people.

With support from a private donor International Medical Corps provided 34,200,000 litres of clean water through water trucking to two hospitals in Sana'a during the first six months of 2018. Critical repairs of latrines and handwashing points within supported health facilities have also been conducted, while installation of water tanks and metal drum incinerators is ongoing. International Medical Corps has distributed waste bins to supported facilities and trained cleaning and clinical staff in Infection Prevention and Control and Medical Waste Management, in order to prevent cross-infection at supported health facilities. Within catchment communities, International Medical Corps has also trained 100 Community Health Volunteers, of which 79 are women, to deliver hygiene promotion campaigns and distribute hygiene supplies for households with children suffering from acute malnutrition. In May 2018, a total of 4,729 people were reached with hygiene promotion activities.

Elsewhere in Yemen, with support from ECHO, International Medical Corps is rehabilitating municipal and private water systems in the vicinity of five supported health facilities, in order to improve and sustain access to safe water. Rehabilitation of community water systems includes repair and maintenance of water wells, replacement of damaged pumping machinery, repair and installation of water tanks, and extension of pipes.

◆ **EU Trust Fund – MADAD Lebanon**

In January 2018, International Medical Corps started one of the largest grants in its Lebanon Programme. The programme is part of the EU Regional Trust Fund in response to the Syrian crisis with an overall objective to respond to the needs of refugees from Syria in neighbouring countries, as well as of the communities hosting the refugees and their administrations, in particular as regards to resilience and early recovery. The improvement of access to quality primary health services in areas affected by displaced population aims to ensure that local communities and refugees are able to receive critical health and mental health services.

Over 26 months, International Medical Corps will work with its consortium partners, Première Urgence-Aide Médicale Internationale (PU-AMI) and Fundación Promoción Social (FPS), to improve access to quality primary health care, community health, and mental health services for Syrian refugees and other vulnerable populations in Beirut and Mount Lebanon, Akkar, Tripoli, Bekaa, and the South. An estimated 501,930 beneficiaries will be targeted over a 26-month period, including both refugees (at least 50% of total beneficiaries) and vulnerable Lebanese. The consortium will support 48 PHCCs in the above mentioned locations, to provide affordable quality primary healthcare services for refugees and vulnerable Lebanese. The MADAD programme, designed to complement existing efforts by other humanitarian actors, will be implemented in close coordination with the Lebanon Ministry of Health to reduce economic barriers to Syrian refugees and vulnerable Lebanese people.

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Review of International Medical Corps (UK)'s Humanitarian Assistance for the Financial Year 2017/2018 (continued)

Protection

◆ **GBV Prevention and Response for conflict-affected populations in South Sudan**

Under DFID funding and in partnership with Health Link South Sudan, International Medical Corps is working to prevent and respond to gender-based violence (GBV) in Western Bahr el Ghazal, Upper Nile, Unity and Jonglei. This includes case management services using a survivor-centred approach, counselling and psychosocial support to survivors of GBV. We also run women- and girls-friendly spaces (WGFS) in the Protection of Civilians areas in Wau and Malakal, as well as within communities in Akobo, Nyal, Aburoc, Malakal and Wau. We also implement prevention activities through gender discussions aimed at engaging men and empowering community members to fight GBV and take responsibility for their own safety.

So far, more than 1,800 beneficiaries have been reached through case management and referrals to appropriate medical, protection, legal and other GBV response services. 10,396 dignity kits have been distributed to vulnerable women and girls of reproductive age. Additionally, more than 2,000 women have benefited from material assistance such as clothing, slippers, sanitary pads, soaps, underwear, petticoats, handheld solar lights and blankets. Women attend WGFS centres and participate in activities such as education sessions on various GBV topics, literacy lessons and skill building activities in beading, bed sheet and basket making and crocheting. The WGFS is a place where women meet with other women and share their learning and experiences on various issues they are facing from the crisis in their lives and help each other build resilience.

Under the livelihood component, International Medical Corps has provided training in business management and leadership skills to 500 women aiming at preventing GBV risks whilst also empowering them within their households and their communities. In addition, 250 women have received assistance to start income generating activities, such as hairdressing, baking, sale of items like sugar, soap, tea leaves, charcoal, pens and pencils. Support provided to women on livelihood opportunities plays a big role in preventing high risks of GBV and in restoring their dignity and independence.

◆ **SPIRC: Specialized Protection Intervention for Vulnerable Refugees and Host Communities in Jordan**

Since October 2016, the UK Government's Department for International Development (DFID), has been supporting International Medical Corps to provide MHPSS and Protection interventions in Jordan benefitting both refugees and hosting communities. In April 2018, International Medical Corps (UK) successfully secured a continuation of the programme expanding the scope of its intervention in remote areas of the country, the so-called Informal Tented Settlements, in the Jordan Valley and Mafrq areas, where access to basic services is scarce and protection concerns are reported to be widespread.

Through a mobile medical unit, the programme ensures access to primary healthcare services providing approximately 300 consultations per quarter with four static clinics within Jordanian Ministry of Health's Primary Health Clinics in Mafrq, Irbid, Balqa and Jarash. International Medical Corps carries out

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Review of International Medical Corps (UK)'s Humanitarian Assistance for the Financial Year 2017/2018 (continued)

structured psychosocial support activities in the four targeted locations, which also serve as entry for the identification of approximately 550 beneficiaries per quarter in need of more specialised or protections services. A specific component of the programme is the distribution of a cash protection package to 300 vulnerable families, assessed and selected based on established criteria and procedures.

Nutrition

◆ **Integrated Humanitarian Health and Nutrition Assistance to Conflict Affected and Vulnerable Populations of Darfur**

International Medical Corps has received ECHO funding for activities in Darfur since 2006, and is the largest recipient of ECHO funding in Sudan. In 2017, International Medical Corps provided services to 260,072 individuals in Central and South Darfur through ECHO-funded projects, which is over 44 consultations per day, per clinician.

Over 4,000 deliveries were attended by skilled personnel. International Medical Corps provides Basic Emergency Obstetric and Newborn Care training which helped treat 270 cases of post-partum bleeding, 124 newborn complications and 234 postnatal complications.

In Jebel Mara, a site that the government granted access to only last year, International Medical Corps provides comprehensive emergency obstetric and newborn care services at Golo Hospital. In February 2018, International Medical Corps performed the first C-section in over 7 years. Lack of access to proper maternity care, in addition to tribal conflict and inter-communal violence, continues to cause displacement in Darfur and increases the risk of complications during pregnancy.

International Medical Corps also provides nutrition services in Darfur, and in 2017, performed MUAC screening for over 100,000 children under 5, identifying and treating 4,500 cases of severe acute malnutrition and almost 10,000 cases of moderate acute malnutrition.

◆ **Provision of life-saving Health and Nutrition Services to Vulnerable Populations in Galkayo/Mudug, Jowhar /Middle Shabelle and Abudwak/Galgaduud regions of Somalia**

ECHO has funded International Medical Corps in Somalia since 2010, providing support to live-saving interventions and nutrition services for vulnerable, internally displaced persons in the regions of Galkayo/Mudug, Jowhar/Middle Shabelle and Abudwak/Galgaduud.

In Galkayo, where International Medical Corps provides surgical care and C-sections at the Galkayo South Hospital, 33,047 people received secondary care and nutrition programming; 3,219 minor surgeries were conducted and 289 major surgeries were performed. Another 9,000 were hospitalized as in-patients. ECHO also supports the Global Fund award treating TB. In 2017, 116 cases were treated with 106 completing treatment.

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Achievements and Performance (continued)

Review of International Medical Corps (UK)'s Humanitarian Assistance for the Financial Year 2017/2018 (continued)

International Medical Corps also supports the Jowhar Maternity Unit (JMU), which provides comprehensive emergency obstetric and newborn care, and C-Sections. It is one of the only facilities in the region where people can access comprehensive reproductive and obstetric care, and after the Jowhar General Hospital lost funding in 2018, its presence is increasingly important. In 2017, there were 2,170 deliveries at JMU, including 88 C-sections, and already 1,398 in 2018, including 103 C-sections. Additionally, the hospital provided secondary care, nutrition programming and in-patient services to 6,000 individuals.

International Medical Corps (UK) received additional resources for the 2018 ECHO Somalia award, and was able to expand the services, which included a neonatal unit at JMU, an inpatient paediatric ward and stabilization centre at the Kulmis health centre in Jowhar and a stabilisation centre in Abduwak.

With ECHO support, International Medical Corps was also able to respond to a bomb blast in Mogadishu on the 14th October, 2017, when over 600 people, mostly civilians, lost their lives. Within hours of the attack, International Medical Corps deployed a 14-member Emergency Rapid Response Team. The team transported wounded from the scene to Daynile and Keysaney hospitals while also delivering vital medical supplies.

Private donor support of International Medical Corps (UK) programmes

University of Bath
The Henhurst Charitable Trust
UBM
Spurrell Charitable Trust
Ahmed Alshafi
Andor Charitable Trust
GM Morrison Charitable Trust
DM Wood Charitable Trust
The Thomas Sivewright Catto Charitable Settlement
Vitol Foundation

STRATEGIC REPORT (continued)

Fundraising, Communications and Marketing activities

During the year, International Medical Corps (UK) has received donations from institutional donors, corporates, trusts and foundations, as well as private individuals. International Medical Corps (UK) and its US affiliate seek to raise funds to sustain its programs across all countries where they work, as well as funds to fill gaps, support immediate emergency responses, and implement innovative programs. The Charity responds to requests for proposals issued by institutional donors, such as DFID, ECHO, and other institutional donors and UN agencies, and by private sector donors. The Charity works closely with its affiliate to raise funds from corporations and foundations for emergency response activities and ongoing programs. International Medical Corps utilizes multiple fundraising channels, with the goal of raising funds from as diversified a base of supporters as possible. These channels include events, annual giving programs, direct mail and online appeals, in addition to outreach through social media, the website and other online platforms. International Medical Corps (UK) and its affiliate do not employ any commercial fundraising firm to solicit individuals via telephone or door to door.

International Medical Corps (UK) adheres to the standards outlined by the UK's Fundraising Regulator. International Medical Corps (UK) and its affiliate are in compliance with the General Data Privacy Regulations and protect individuals' personal information. Fundraising activities are monitored by the senior leadership of International Medical Corps (UK); regular reporting is shared with the UK Trustees. Over the past year, International Medical Corps (UK) has not received any complaints about its fundraising practices from donors or potential donors. International Medical Corps (UK) undertakes due diligence on both the financial and reputational dealings of potential partners before donations are accepted.

Investment Policy

Due to the nature of the Charity's programmes and funding cycles of its major donors, the Charity keeps its financial assets liquid.

Risk Management

Risk assessment is used to drive the activity of International Medical Corps (UK) and focus its resources. A culture of risk management and mitigation is embedded in the organisation and senior management and the trustees are involved in the management of high risk areas. A risk register is used by management and the trustees to examine and monitor risks to the organisation.

The register identifies and prioritises risk in relation to the likelihood of the risk emerging and the level of impact it would have on the organisation, and outlines the measures in place to safeguard the company's assets against such risk. The risk categories are defined below:

- ◆ Organisational risk
- ◆ Strategic and Management risk
- ◆ Operational risk
- ◆ People
- ◆ Financial risk

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Risk Management (continued)

The Board of Trustees seeks to ensure that systems are in place to monitor, manage and mitigate International Medical Corps (UK)'s exposure to major risks and these are reviewed periodically. It is also recognised that the nature of some of the Charity's work requires active acceptance and management of some risks when undertaking activities in order to achieve the objectives of the Charity.

The key business risks to the Charity continue to include the unexpected loss of funding from key donor organisations, a breakdown in its relationship with International Medical Corps, and major disruption to programmes in countries, resulting from factors either within or beyond the organisation's control. The Board of Trustees for International Medical Corps (UK) continues to implement measures to mitigate these business risks including the review of the reserves policy, the introduction of new technology to ensure that assets are safeguarded to the extent possible, the continued reference to a balanced business scorecard and aggressive reviews into the Charity's funding base. These are further summarised in the table below:

Key Risks	Trustees' plans to mitigate the risk
Insufficient unrestricted reserves.	The Charity recognises that developing a supporter base will take time and sustained efforts from both its own team and from its affiliate. In the meantime, the Charity intends to continue to work with its institutional donors in order to continue delivering activities in the most hard to reach areas, thereby receiving contributions towards its corporate costs and work with its US affiliate to keep effective control on its cost structure.
Unfeasible partnership framework with affiliate International Medical Corps.	International Medical Corps (UK) understands that leadership within its affiliate in the US has implemented a rigorous risk assessment process on its programme implementation. Ongoing efforts are in place to review the scope of the existing Administrative Services Agreement between the two organisations. The review will take in account the risks and exposure of both companies and a realistic review of operational capacities of the entities will be considered.
Adverse payment terms offered by donors affecting liquidity of the Charity.	The trustees have agreed that the Charity's affiliate under the leadership of the VP Finance and Admin will oversee the global treasury function. Under the direction of the LA based Finance Controller the Charity's US affiliate's treasury team continues to implement improved practices in working capital management.

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Risk Management (continued)

Key Risks	Trustees' plans to mitigate the risk
<p>Future funding opportunities affected by Brexit negotiations.</p>	<p>International Medical Corps (UK) continues to closely monitor the discussions between the UK government and the European Union. International Medical Corps (UK)'s US affiliate is currently exploring registration options in mainland Europe and consummate rationalisation of International Medical Corps (UK)'s footprint. At the same time the Charity continues to engage with DFID on the donor's role in supporting UK humanitarian aid organisations in the scenario of a no deal Brexit post-March 2019. (https://www.gov.uk/government/publications/delivering-humanitarian-aid-programmes-if-theres-no-brex-it-deal/delivering-humanitarian-aid-programmes-if-theres-no-brex-it-deal).</p>
<p>Inadequate assessment resulting in poor programming decisions and implementations.</p>	<p>International Medical Corps (UK) understands that its US affiliate executive team has employed robust processes to counter these concerns.</p>
<p>Exposure to movement in foreign currency rates affecting international operations.</p>	<p>The Charity's principal currency exposures arise from translations of European donor monies received into US dollars which is the main operational currency advanced to its field missions overseas. The continued fall in the value of pound sterling against USD has continued to adversely affect International Medical Corps (UK)'s ability to deliver programmes sustainably. Within this context the charity's affiliate has taken responsibility of global treasury management as of July 2018.</p>
<p>Operations in sanctioned countries through the Charity's US affiliate.</p>	<p>Donors and other stakeholders are kept up to date with developments affecting program implementation as a result of terrorist activities in sanctioned countries.</p> <p>Regular updating of the various stakeholders on new/specific challenges faced by the Charity.</p> <p>Working collaboratively with stakeholders and other INGOs to seek longer term solutions.</p>

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Financial Review

Statement of Principal Financial Management Policies Adopted in the Year

It is the policy of International Medical Corps (UK) to maintain effective financial management systems and programmes through its US affiliate, to continuously improve financial operations and systems and to identify more efficient methods of budgeting, accounting, financial reporting and auditing and thereby be responsive to management needs at the various levels of the organisation. Additionally, International Medical Corps (UK) through its US affiliate seeks to be responsive to the financial reporting and other requirements of its donors, as well as to the restrictions imposed by the governments under whose rule of law it operates.

This year, International Medical Corps (UK)'s total income was \$152,284,447 (2017 - \$156,886,002). Of this, the total income received from institutional donors was \$133,904,812 (2017 - \$141,055,384). International Medical Corps (UK) was able to secure \$17,911,044 (2017 - \$15,277,301) of gifts-in-kind that comprised food, medicines, and supplies.

During the reporting period, International Medical Corps (UK) supported training and assistance programmes in 28 (2017: 26) countries through its US affiliate. The Charity's programme expenditures can be disaggregated into the following humanitarian contexts.

	FY 2018	FY 2017
Building health capacity	31.74%	35.50%
Emergency response	22.98%	30.34%
Mental health	6.22%	5.26%
Women & children's health	17.84%	9.72%
Water & sanitation	3.16%	5.08%
Nutrition	18.06%	13.59%

Financial Position

The Charity had restricted funds of **\$23,100,824** at 30 June 2018 (2017 - \$18,613,704) and unrestricted funds of **\$1,828,890** at the same date (2017 - \$340,308). International Medical Corps (UK) receives relevant institutional funding in meeting its restricted charitable expenditure. The balance of free reserves as at 30 June 2018 is \$1,692,646 (2017 - \$148,451).

International Medical Corps UK's improved unrestricted reserves balance as of June 2018 was possible due to achieving efficiency in operation due to economies of scale. International Medical Corps (UK) continues to rely on its affiliate's commitment to meet shortfalls in programmes covered by the affiliate's unrestricted funds.

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Financial Review (continued)

Reserves Policy

The Charity continues to rely on the understanding that its US affiliate will continue its policy of covering shortfalls incurred as a result of its affiliate's strategy to pursue non-federal funds which do not provide for full overhead recovery. After considering the risks identified, the trustees revisited the reserves policy for the financial year 2018, to assess varied needs for reserves.

The policy also seeks to incorporate emerging donor approaches in financing humanitarian initiatives and the ability of International Medical Corps (UK) through its US affiliate to continue to deliver high quality projects with maximum impact. The policy has taken a risk-based approach with special emphasis on:

1. The Charity's income streams and the associated risk profile.
2. The ability of the Charity to meet its commitments and to deliver its expenditure obligations through its US affiliate.
3. The overall risk environment in which the Charity operates.

Overall, International Medical Corps (UK) requires reserves for the following purposes:

- ◆ To fund working capital requirements in the event of unexpected delays in receiving donor funds to ensure continuity in implementation in the field.
- ◆ To fund unplanned expenditure arising from programme related contingencies such as unforeseen events delaying implementation leading to no-cost-extensions and to manage exposure to exchange rate fluctuations.
- ◆ To finance any gap in funding for projects of strategic importance to the Charity and its US affiliate.
- ◆ To fund requirements for additional corporate costs to maintain high quality assurance over the organisation's programmes.

As explained elsewhere in the report the Charity's US affiliate continues to assume, in large part, risks associated with implementation of its charitable activities around the world. An overall reserves policy has been considered by the Board of Trustees that aims to maintain a level of unrestricted reserves equivalent to six month's operating expenditure of the Charity's HQ offices which is \$550,000 for FY 2018-19 and is currently being achieved. Available unrestricted funds balances in excess of the operational reserves requirements will be utilised, as required, to meet the other purposes outlined above.

Trustees' report (including strategic report) 30 June 2018

STRATEGIC REPORT (continued)

Financial Review (continued)

Reserves Policy (continued)

International Medical Corps (UK), due to the fluidity of its reserves, cannot consider projects that do not fully cover its costs. However, through its affiliate, which covers any gap in funding, it continues to accept projects assessed by its affiliate as feasible. International Medical Corps (UK) continues to apply more rigorous assessment of new projects and will accept projects that support its overhead costs required in maintaining acceptable oversight of programme implementation, therefore mitigating the risk of insufficiently resourced projects. The Charity accepts that there are situations where, to meet the Charity's missions and objectives, there is an inevitable need to take on more challenging and strategic global roles, which requires the need to pursue other funding sources. In these instances, the Charity relies on coverage of its risks by its US affiliate. International Medical Corps (UK) seeks to take on programmes that are assessed as break-even, however, circumstances may occur where, in a bid to fulfil its same objectives and mission, recourse to unrestricted funds or restricted funds that are country designated is put into effect. As of 30 June 2018, the Charity held restricted reserves of \$23,100,824 (2017: \$18,613,704). This represents the total funds received for specific projects that are yet to be spent at 30 June 2018. These funds have been excluded from specific reserves policy as they are not for the purposes of general working capital.

As of June 2018, the balance of free reserves was \$1,692,646 (2017 - \$148,451). The Charity is resolved to maintain an adequate level of reserves and is working with its affiliate to implement a feasible strategy for marketing and public awareness of its work to cultivate support but accepts that in the current economic climate this may be difficult. The Charity will respond to the above identified risks as follows:

- In collaboration with its affiliate, the Charity will profile the pipeline income streams and undertake projects with acceptable terms. Also, it will be looking to its affiliate to cover programme funding gaps which the affiliate has reviewed and has considered as acceptable. The Charity continues dialogues with the donor community who value the difference made by its work and negotiate feasible terms for implementing activities;
- The Charity and its affiliate continue to closely monitor the implementation context of quality programmes around the world and resolve operational challenges with its supporters and partners;
- The Charity relies on its affiliate's treasury management, shortfall approval, programme go-no-go decision making processes to minimise risks to an acceptable level; and
- The Charity accepts that recent political changes around the world, including Brexit, will necessitate it to review its plans. Along with its affiliate, the Charity continues to forge new partnerships that will enable it to fulfil its mission and objectives.

Trustees' report (including strategic report) 30 June 2018

INTERNATIONAL MEDICAL CORPS (UK) FUTURE PLANS FOR 2018/2019

International Medical Corps (UK) plans are as below:

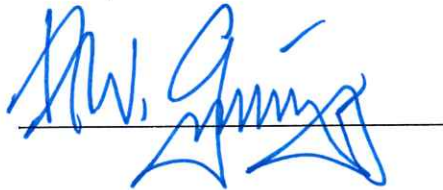
Aim/Objective	Operational area	Measurable Objectives
To increase International Medical Corps (UK)'s engagement with existing donors, in order to negate the anticipated effects of hard Brexit.	International Programme	On-going engagement with donors to ensure to sustained funding streams;
Constructive oversight of the Charity's projects being implemented by its US affiliate to ensure optimum quality control.	International Programme and Technical	Timely roll out of cohesive implementation plans reflective of commitments undertaken by its US affiliate.
Exploring joint strategic approaches to fundraising for International Medical Corps (UK) with its US affiliate.	Fundraising	To raise \$25,000 (£19,250) in unrestricted income.
Applying enhanced techniques to ensure maximum visibility, donor and supporter engagement.	Marketing and Communications	An increase in supporter base of the Charity;
To ensure an enhanced culture of Compliance and Accountability within International Medical Corps (UK) to both donors and beneficiaries.	Compliance and Programme Audit	Timely implementation of audit recommendations; Charity to obtain independent review of programme activities.
To drive efficiency through effective finance business partnering and leveraging of financial information to improve business performance and stakeholder value.	Finance	Reports are completed in a timely manner; Strict control on International Medical Corps (UK) corporate costs; Use of ERM systems for efficiency.
To provide a framework for people management practices that are legally compliant, reflect best practice and enable International Medical Corps (UK) to achieve its strategic and operational goals effectively and efficiently.	Human Resources	Retention of high performing staff based on performance management system; Surveys to determine staff engagement; Availability of up to date relevant HR policies and procedures which support positive working relationship.

INTERNATIONAL MEDICAL CORPS (UK) FUTURE PLANS FOR 2018/2019 (continued)

In addition, the Charity aims to:

1. Expand opportunities for applied research to improve impact of healthcare for vulnerable communities, in line with its mission;
2. Achieve institutional income of \$150m during the 12-month period to 30 June 2019;
3. Continue to expand the organisation's number of partnerships and non-traditional donors;
4. Expand the organisation's profile through increased awareness of its activities across the UK, EU and the Middle East;
5. Review and strengthen current internal processes employed by our US affiliate with a view to increasing organisational efficiency;
6. Continue to work with our US affiliate to apply new technology to systems that mitigate risks arising from the continued growth of its engagement in hostile environments and from the vulnerabilities of the sector in general.

The Trustees' Report and strategic report is approved by the trustees and signed on their behalf by:



Approved by the Board of Trustees on:

6 February 2019

Independent auditor's report 30 June 2018

Independent auditor's report to the members of International Medical Corps (UK)

Opinion

We have audited the financial statements of International Medical Corps (UK) (the 'charitable company') for the year ended 30 June 2018 which comprise the statement of financial activities, the balance sheet, the statement of cash flows, the principal accounting policies and the notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- ◆ give a true and fair view of the state of the charitable company's affairs as at 30 June 2018 and of its income and expenditure for the year then ended;
- ◆ have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- ◆ have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- ◆ the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- ◆ the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

The trustees are responsible for the other information. The other information comprises the information included in the trustees' report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Independent auditor's report 30 June 2018

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- ◆ the information given in the trustees' report including the strategic report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- ◆ the trustees' report including the strategic report has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees' report including the strategic report.

Matters on which we are required to report by exception (continued)

We have nothing to report in respect of the following matters in relation to which 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.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company or to cease operations, or have no realistic

Independent auditor's report 30 June 2018

alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

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



Edward Finch (Senior Statutory Auditor)
For and on behalf of Buzzacott LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL

8/2/19

Statement of financial activities Year to 30 June 2018

	Notes	Unrestricted funds \$	Restricted funds \$	2018 Total funds \$	2017 Total funds \$
Income and expenditure					
Income from:					
Donations and legacies	1	86,309	18,293,326	18,379,635	15,830,618
Charitable activities	2	-	133,904,812	133,904,812	141,055,384
Total income		<u>86,309</u>	<u>152,198,138</u>	152,284,447	<u>156,886,002</u>
Expenditure on:					
Raising funds	3	30,171	-	30,171	68,318
Charitable activities	4	257,084	146,021,490	146,278,574	162,959,815
Total expenditure		<u>287,255</u>	<u>146,021,490</u>	146,308,745	<u>163,028,133</u>
Net (expenditure)/ income		(200,946)	6,176,648	5,975,702	(6,142,131)
Transfer between funds	12	<u>1,689,528</u>	<u>(1,689,528)</u>	-	-
Net movement in funds		1,488,582	4,487,120	5,975,702	(6,142,131)
Fund balances brought forward at 1 July 2017		<u>340,308</u>	<u>18,613,704</u>	18,954,012	<u>25,096,143</u>
Fund balances carried forward at 30 June 2018		<u>1,828,890</u>	<u>23,100,824</u>	24,929,714	<u>18,954,012</u>

The analysis of income and expenditure between funds for the comparative period is shown in the notes to the financial statements.

All of the Charity's activities derived from continuing operations during the above two financial periods.

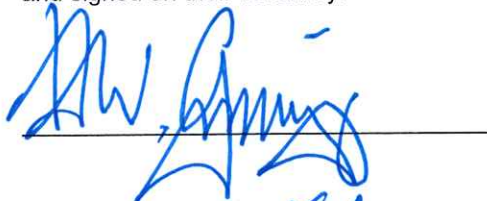
The Charity has no recognised gains and losses other than those shown above.

Balance sheet 30 June 2018

	Notes	2018 \$	2018 \$	2017 \$	2017 \$
Fixed Assets					
Tangible assets	8		136,244		191,857
Current assets					
Stock	9	1,353,078		1,123,724	
Debtors	10	10,564,889		18,432,775	
Cash at bank and in hand		30,453,488		10,326,402	
		<u>42,371,455</u>		<u>29,882,901</u>	
Creditors: amounts falling due within one year	11	<u>(17,577,985)</u>		<u>(11,120,746)</u>	
Net current assets			24,793,470		18,762,155
Total net assets			<u>24,929,714</u>		<u>18,954,012</u>
The funds of the charity					
Restricted funds	12	23,100,824		18,613,704	
Unrestricted funds		1,828,890		340,308	
			<u>24,929,714</u>		<u>18,954,012</u>

Approved by the trustees

and signed on their behalf by:



Approved on:

6 February 2019

International Medical Corps (UK): A company limited by guarantee, Company Registration No. 1093861 (England and Wales)

Statement of cash flows Year to 30 June 2018

	Notes	2018 \$	2017 \$
Cash flows from operating activities:			
Net cash provided by (used in) operating activities	A	<u>20,148,325</u>	<u>(13,742,922)</u>
Cash flows from investing activities:			
Purchase of tangible fixed assets		<u>(21,239)</u>	<u>—</u>
Net cash used in investing activities		<u>(21,239)</u>	<u>—</u>
Change in cash and cash equivalents in the year		20,127,086	(13,742,922)
Cash and cash equivalents at 1 July 2017	B	<u>10,326,402</u>	<u>24,069,324</u>
Cash and cash equivalents at 30 June 2018	B	<u>30,453,488</u>	<u>10,326,402</u>

Notes to the statement of cash flows for the year to 30 June 2018

A Reconciliation of net movement in funds to net cash provided by (used in) operating activities

	2018 \$	2017 \$
Net movement in funds (as per the statement of financial activities)	<u>5,975,702</u>	<u>(6,142,131)</u>
Adjustments for:		
Depreciation charge	76,852	98,404
Loss on disposal of fixed assets	-	7,887
(Increase) in stocks	(229,354)	(185,284)
Decrease (increase) in debtors	7,867,886	(212,321)
(Decrease) increase in creditors	6,457,239	(7,309,477)
Net cash provided by (used in) operating activities	<u>20,148,325</u>	<u>(13,742,922)</u>

B Analysis of cash and cash equivalents

	2018 \$	2017 \$
Cash at bank and in hand	<u>30,453,488</u>	<u>10,326,402</u>
Total cash and cash equivalents	<u>30,453,488</u>	<u>10,326,402</u>

Principal accounting policies 30 June 2018

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are laid out below.

Basis of preparation

These financial statements have been prepared for the year to 30 June 2018.

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant accounting policies below or the notes to these financial statements.

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) (Charities SORP FRS 102) issued on 16 July 2014, the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Charities Act 2011.

The accounts are presented in US dollars and rounded to the nearest dollar.

The charity constitutes a public benefit entity as defined by FRS 102.

Critical accounting estimates and areas of judgement

Preparation of the financial statements requires the trustees to make significant judgements and estimates.

The items in the financial statements where these judgements and estimates have been made include:

- ◆ estimating the value of donated goods undistributed at year end;
- ◆ estimating the recoverability of accrued income balances; and
- ◆ estimating unrealised foreign exchange differences.

Assessment of going concern

The trustees have assessed whether the use of the going concern assumption is appropriate in preparing these financial statements. The trustees have made this assessment in respect to a period of one year from the date of approval of these financial statements.

The Charity has free reserves of \$1,692,646 (2017 - \$148,451) which is above its target as per the reserves policy. The trustees have continued to use the going concern assumption based on the relationship with its affiliate to cover programme funding gaps and provide cash flow bridging. The trustees are of the opinion that the charity will have sufficient resources to meet its liabilities as they fall due.

Income

Income is recognised in the statement of financial activities when the charity is entitled to the income, the amount can be measured with accuracy and it is probable that the income will be received.

Donations and gifts in kind are included in full in the statement of financial activities when receivable.

Principal accounting policies 30 June 2018

Income (continued)

Grants receivable are credited to the statement of financial activities in the year in which they are receivable.

Donated goods and services

Donated goods, typically comprising medical and food supplies, are recognised as income when the goods are received. Amounts are included in expenditure when the goods are distributed. The balance of goods received but not distributed are included as a stock balance at the year end.

Expenditure and the basis of apportioning costs

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

Expenditure comprises the following:

- a. Costs of raising funds include the salaries, direct costs and overheads with generating donated income.
- b. Costs of charitable activities comprise expenditure on the charity's primary charitable purposes as described in the trustees' report. Such costs include:
 - ◆ Technical advisory services
 - ◆ Programme management services
 - ◆ Gifts in kind of donated goods and services

The majority of costs are directly attributable to specific activities. Certain shared costs are apportioned to activities in furtherance of the objects of the charity. These costs are allocated in the same proportion as directly attributable expenditure.

- c. Governance costs comprise the costs incurred by finance, human resources, communications and IT departments and the trustee costs which are directly attributable to the management of the Charity's assets, organisational procedures and the necessary legal procedures for compliance with statutory requirements.

Tangible fixed assets

Items of equipment are capitalised when the purchase price exceeds \$500. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets capitalised are reviewed for impairment if circumstances indicate that their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life.

Vehicles and equipment for use in overseas operational programmes are not capitalised but charged in full to expenditure when purchased. This is because the expected useful life is significantly reduced in such programmes and is generally less than one year for the majority of these assets.

Principal accounting policies 30 June 2018

Fund accounting

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund together with a fair allocation of management and support costs.

Unrestricted funds are donations and other income raised for the objects of the charity.

Other operational currencies

Transactions in US Dollars are recorded at transaction value, with no exchange rate gain or loss. Transactions in other operational currencies are recorded at the calculated monthly average rate. Monetary assets and liabilities are retranslated at the rate of exchange ruling at the balance sheet date. Differences arising on retranslation are charged to the statement of financial activities.

Leased assets

Rentals payable under operating leases, where substantially all the risks and reward of ownership remain with the lessor, are charged to the statement of financial activities over the period of the lease term.

Pension costs

International Medical Corps (UK) sponsors a group personal pension plan. All eligible employees can participate in the scheme and contributions are based on a percentage of annual gross salary.

International Medical Corps (UK) contributes between 3% and 7% of eligible employees' gross earnings. Employees are immediately fully vested in contributions made on their behalf. The Charity is fully staged in its auto-enrolment obligations. Employees may make additional contributions should they wish to do so. Pension costs represent the employer's contributions payable during the year.

Debtors

Debtors are recognised at their settlement amount, less any provision for non-recoverability. Prepayments are valued at the amount prepaid. They have been discounted to the present value of the future cash receipt where such discounting is material.

Cash at bank and in hand

Cash at bank and in hand represents such accounts and instruments that are available on demand or have a maturity of less than three months from the date of acquisition. Deposits for more than three months but less than one year have been disclosed as short term deposits. Cash placed on deposit for more than one year is disclosed as a fixed asset investment.

Creditors and provisions

Creditors and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Creditors and provisions are recognised at the amount the charity anticipates it will pay to settle the debt. They have been discounted to the present value of the future cash payment where such discounting is material.

Principal accounting policies 30 June 2018

Financial instruments

The Charity has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charity's balance sheet when the Charity becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

Basic financial assets

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts, discounted at a market rate of interest if material. Financial assets classified as receivable within one year are not amortised.

Classification of financial liabilities

Financial liabilities and equity instruments are classified according to the substance of the contractual arrangements entered into. An equity instrument is any contract that evidences a residual interest in the assets of the charity after deducting all of its liabilities.

Basic financial liabilities

Basic financial liabilities, including creditors, bank loans, loans from fellow group companies and preference shares that are classified as debt, are initially recognised at transaction price unless the arrangement constitutes a financing transaction, where the debt instrument is measured at the present value of the future payments discounted at a market rate of interest. Financial liabilities classified as payable within one year are not amortised.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

Notes to the financial statements Year to 30 June 2018

1 Donations and legacies

	Unrestricted funds \$	Restricted funds \$	2018 Total \$	2017 Total \$
Donation from International Medical Corps	-	362,542	362,542	350,000
Private grants for projects	-	19,740	19,740	124,888
Other Unrestricted Donations	30,626	-	30,626	78,429
Donated supplies	-	17,911,044	17,911,044	15,277,301
Other income	55,683	-	55,683	-
2018 Total funds	86,309	18,293,326	18,379,635	15,830,618
2017 Total funds	184,668	15,645,950	15,830,618	

2 Income from charitable activities

	Unrestricted funds \$	Restricted funds \$	2018 Total \$	2017 Total \$
Building health capacity	-	46,137,607	46,137,607	60,897,650
Emergency response	-	33,528,299	33,528,299	38,139,491
Mental health	-	8,399,563	8,399,563	9,019,612
Women & children's health	-	28,523,789	28,523,789	14,635,207
Water and sanitation	-	6,239,388	6,239,388	7,557,644
Nutrition	-	11,076,166	11,076,166	10,805,780
2018 Total funds	-	133,904,812	133,904,812	141,055,384
2017 Total funds	-	141,055,384	141,055,384	

3 Expenditure on raising funds

	Unrestricted funds \$	Restricted funds \$	2018 Total \$	2017 Total \$
Fundraising staff costs	12,200	-	12,200	42,878
Other fundraising costs	17,971	-	17,971	25,440
2018 Total funds	30,171	-	30,171	68,318
2017 Total funds	68,318	-	68,318	

Notes to the financial statements Year to 30 June 2018

4 Charitable activities

	Activities undertaken directly \$	Support costs \$	2018 Total \$	2017 Total \$
Building health capacity	43,358,584	3,073,083	46,431,667	57,856,817
Emergency response	31,396,066	2,225,228	33,621,294	50,251,887
Mental health	8,490,625	601,782	9,092,407	8,579,061
Women & children's health	24,369,825	1,727,236	26,097,061	15,845,039
Water and sanitation	4,309,797	305,461	4,615,258	8,283,661
Nutrition	24,672,219	1,748,668	26,420,887	22,143,350
2018 Total funds	136,597,116	9,681,458	146,278,574	162,959,815

Support costs are allocated to projects in line with the level of direct expenditure as this best reflects the level of support required by each project.

Costs of charitable activities can be further analysed as follows:

	Activities undertaken directly \$	Support costs \$	2018 Total \$	2017 Total \$
Staff costs	52,586,497	1,497,125	54,083,622	58,956,918
Donated supplies and services	16,557,965	-	16,557,965	15,277,301
Auditor's remuneration				
. Statutory audit	-	39,609	39,609	38,970
. Other auditors	-	21,792	21,792	24,000
Other costs	67,452,654	8,122,932	75,575,586	88,662,626
	136,597,116	9,681,458	146,278,574	162,959,815

Charitable activities

	Unrestricted funds \$	Restricted funds \$	2018 Total \$	2017 Total \$
Building health capacity	81,604	46,250,063	46,431,667	57,856,817
Emergency response	59,980	33,562,205	33,621,294	50,251,887
Mental health	15,780	9,076,427	9,092,407	8,579,061
Women & children's health	45,866	26,051,195	26,097,061	15,845,039
Water and sanitation	8,111	4,607,147	4,615,258	8,283,661
Nutrition	46,434	26,374,453	26,420,887	22,143,350
2018 Total funds	257,084	146,021,490	146,278,574	162,959,815
2017 Total funds	—	162,959,815	162,959,815	

Notes to the financial statements Year to 30 June 2018

5 Employees and staff costs

Staff costs during the year were as follows:

	2018 Total \$	2017 Total \$
Wages and salaries	1,319,022	1,537,353
Social security costs	120,257	168,106
Other pension costs	57,846	62,679
Total UK staff costs	1,497,125	1,768,138
International Medical Corps Worldwide on International Medical Corps (UK) projects	52,586,497	57,188,780
Total staff costs	54,083,622	58,956,918

The average number of employees during the year, analysed by function, was as follows:

	2018 No	2017 No
UK staff	26	29

International Medical Corps (UK) pays the salaries of a number of staff overseas and on local projects. Such staff may have only part of their salaries charged to projects; however, it is not meaningful to provide a full time equivalent figure. The estimated number of such staff employed in the year was 3,601 (2017 - 4,196).

The number of employees who earned £60,000 or more (including taxable benefits but excluding employer pension contributions) during the year was as follows:

	2018 No	2017 No
£60,001 – £70,000	6	2

Key management personnel comprise those set out on page 4. The total remuneration paid to key management personnel in the year was \$309,070 (2017 - \$259,458).

	2018 \$	2017 \$
Wages and salaries	259,928	219,160
Social security costs	30,962	26,099
Employer pension costs	18,180	14,199
Total costs	309,070	259,458

Notes to the financial statements Year to 30 June 2018

6 Trustees' remuneration

None of the trustees received any remuneration in respect of their services during either of the years under review.

No trustee expenses were incurred during the period (2017- £nil).

7 Taxation

International Medical Corps (UK) is a registered charity and therefore is not liable to corporation tax on income or capital gains derived from its charitable activities or use of assets, as it falls within the various exemptions available to registered charities.

The Charity is not registered for VAT and, accordingly, all expenditure is recorded inclusive of any VAT incurred.

8 Tangible fixed assets

	Office equipment \$
Cost	
Cost at 1 July 2017	383,877
Additions	21,239
Disposals	-
Total cost at 30 June 2018	<u>405,116</u>
Depreciation	
Aggregate depreciation as at 1 July 2017	192,020
Charge for the year	76,852
Released on disposal	-
Aggregate depreciation as at 30 June 2018	<u>268,872</u>
Net book values	
As at 30 June 2018	<u>136,244</u>
As at 30 June 2017	<u>191,857</u>

9 Stocks

	2018 \$	2017 \$
Donated goods received but not distributed	<u>1,353,078</u>	<u>1,123,724</u>

10 Debtors

	2018 \$	2017 \$
Due within one year		
Prepayments and deposits	958,148	848,205
Accrued income	9,463,086	15,596,797
Other debtors – Accounts Receivable	132,130	216,936
Emergency response stock	11,524	11,781
Receivables from IMC US	-	1,759,056
	<u>10,564,888</u>	<u>18,432,775</u>

Notes to the financial statements Year to 30 June 2018

11 Creditors: amounts falling due within one year

	2018 \$	2017 \$
Trade creditors	4,305,479	5,262,002
Amounts owed to International Medical Corps	1,906,037	—
Accruals	6,237,503	5,858,744
Payable to Madad Fund Sub-partners	5,128,966	—
	17,577,985	11,120,746

12 Restricted funds

The funds of the Charity include restricted funds comprising the following unexpended balances of donations held on trusts to be applied for specific purposes:

	At 1 July 2017 \$	Income \$	Expenditure \$	Transfers \$	At 30 June 2018 \$
Building health capacity	10,590,584	47,061,754	(46,197,008)	-	11,455,330
Emergency response	2,272,027	35,373,657	(33,451,377)	-	4,194,307
Mental health	1,845,330	8,408,429	(9,046,455)	-	1,207,304
Women & children's health	867,260	29,195,440	(25,965,170)	-	4,097,530
Water, sanitation and hygiene	151,443	6,264,764	(4,591,934)	-	1,824,273
Nutrition	2,601,652	25,511,812	(26,287,360)	(1,689,528)	136,576
Restricted by country	285,408	382,282	(482,186)	-	185,504
	18,613,704	152,198,138	(146,021,490)	(1,689,528)	23,100,824

Restricted funds are analysed by the type of activity to which the funds relate. All restricted funds are held to carry out activities under these headings.

13 Analysis of net assets between funds

	Unrestricted funds \$	Restricted funds \$	Total 2018 \$
Fund balances at 30 June 2018 are represented by:			
Fixed assets	136,244	-	136,244
Current assets	1,692,646	40,678,809	42,371,455
Creditors: amounts falling due within one year	-	(17,577,985)	(17,577,985)
Total net assets	1,828,890	23,100,824	24,929,714

14 International Medical Corps (UK) Flagship areas

International Medical Corps (UK) continued to operate during the financial year to 30 June 2018 under the main flag ship areas of Building health capacity, Emergency Response, Mental health, Women and Children's health, Water and sanitation (WASH) and Nutrition.

15 Related party transactions

On 1 November 2002, International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps, a US-based non-profit organisation, to share certain services in connection with its operations. International Medical Corps agreed to assist International Medical Corps (UK) in the achievement of its charitable objectives to relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and healthcare projects.

Given the close operating relationship between International Medical Corps and International Medical Corps (UK) there are a number of connected persons between the two organisations at management and trustee level. These connected persons include Nancy A Ossey, who is a founding Trustee of International Medical Corps (UK), and also a President and CEO of International Medical Corps as well as a member of its board. C. William Sundblad, a Trustee of International Medical Corps (UK) provides consultancy services to International Medical Corps. Kevin Noone, the Executive Director of International Medical Corps (UK), is engaged under a contract for services with International Medical Corps.

During the year ended 30 June 2018, International Medical Corps billed International Medical Corps (UK) \$7,922,254 (2017: \$8,240,224) in lieu of Service fee as per Article 5 of the Administrative Services Agreement. During the same period International Medical Corps (UK) has rendered services to International Medical Corps of \$576,872 (2017: \$382,363).

15 Liability of members

The charity is constituted as a company limited by guarantee. Each member has undertaken to contribute £1 to the assets of the company to meet its liabilities if called on to do so.

16 Contingent liability

Due to the nature of the Charity's agreement with donors, the Charity's expenditure is often subject to audit or other review by representatives of donors in a subsequent accounting period. There is a possibility that these audits or reviews would identify expenditure that does not fall within the terms of the grant agreements, and so the Charity would be required to repay the monies received. Trustees are not aware of any material instances of donor clawback since year end.

17 Operating leases

The total of future minimum lease payments under non-cancellable operating leases is as follows:

	Land and buildings \$	Equipment \$	Total 2018 \$
Due within one year	173,210	1,646	174,856
Due between 2 and 5 years	281,466	1,235	282,701
	454,676	2,881	457,557

18 Agency Arrangements

During the year ended 30 June 2018, International Medical Corps (UK) received \$16,182,482 (2017- \$nil) pre-financing from European Union's Madad Trust Fund to implement a two year health programme in Lebanon. Of these pre-financed funds \$6,337,358 (2017 - \$nil) was paid to International Medical Corps (UK) on behalf of sub-partners who will be implementing components of the programme. International Medical Corps (UK) holds the pre-financing received on behalf of the implementing partners in a separate bank account. During the reported period International Medical Corps (UK) has made payments of \$880,664 to the sub-partners. As at 30 June 2018, International Medical Corps (UK) carried forward \$5,128,966 to be disbursed to the sub-partners in the following financial periods.

Charitable activities detailed analysis for the year ended 30 June 2018

The following pages do not form part of the statutory financial statements

Projects categorised under Building Capacity

Country	Donor	Project ID	Total Charitable Income (USD)	Total Charitable Expenditure (USD)
Afghanistan	Columbia University	203426	17,926	17,926
Afghanistan	MoPH Afghanistan	200593	(103,068)	-
Afghanistan	MoPH Afghanistan	202425	(43,163)	-
Afghanistan	MoPH Afghanistan	202835	997,130	1,135,834
Afghanistan	MoPH Afghanistan	203325	(476)	(476)
Afghanistan	UNDP	203108	36,228	43,987
Afghanistan	UNFPA	203036	(18,211)	(18,211)
Afghanistan	UNFPA	203320	287,839	296,922
Cameroon	UNHCR	203317	613,256	888,197
Cameroon	UNHCR	203318	1,771,625	1,771,625
Central African Republic	EC	203210	2,642,772	3,085,235
Chad	ECHO	203547	1,218,500	817,433
DR Congo	SCF	202839	19,509	19,509
Ethiopia	UNHCR	203315	1,132,013	1,167,865
Ethiopia	UNOCHA	202889	(266)	(266)
Ethiopia	UNOCHA	203403	(14,854)	149,840
Iraq	ECHO	203168	(12)	(12)
Iraq	ECHO	203420	3,237,949	4,103,926
Iraq	ECHO	203575	270,443	331,621
Iraq	Global Affairs Canada	203297	2,091,480	2,431,912
Iraq	UNFPA	203439	1,379,125	1,744,442
Iraq	UNOCHA	203272	1,944	1,928
Jordan	ECHO	203275	406,460	464,885
Jordan	ECHO	203467	2,349,200	2,334,326
Jordan	The TNC Foundation	203589	215,000	9
Jordan	UNFPA	203334	76,440	76,440
Jordan	UNHCR	203309	2,621,577	3,491,668
Kenya	UNICEF	202969	375,527	374,654
Lebanon	EC	203528	9,845,124	4,274,199
Lebanon	Global Affairs Canada	203298	2,555,913	2,658,269
Lebanon	Private donor	203235	-	22,805
Lebanon	Private donor	203469	302,534	298,957
Lebanon	UNHCR	203305	1,570,602	1,988,763
Lebanon	UNOCHA	203270	217,097	419,777
Libya	UNHCR	203335	2,503,971	2,563,046
Mali	ECHO	203339	659,167	660,631
Mali	ECHO	203549	553,905	312,371
Mali	WHO	203441	63,500	68,800
Mali	WHO	203494	47,093	47,093
Middle East	DFATD Canada	202809	(123,398)	-
Middle East	UNOCHA	203505	207,668	97,579
Somalia	ECHO	203072	(8,113)	(8,511)
Somalia	ECHO	203338	653,582	653,582
Somalia	ECHO	203529	1,204,640	1,120,684
Somalia	WV	203327	25,745	25,471
Somalia	WV	203561	8,961	10,307
South Sudan	Columbia University	203426	821	821
South Sudan	ECHO	203424	1,644,590	2,039,410
South Sudan	UNDP	203463	100,000	100,000

Charitable activities detailed analysis for the year ended 30 June 2018

The following pages do not form part of the statutory financial statements

Projects categorised under Building Capacity (continued)

Country	Donor	Project ID	Total Charitable Income (USD)	Total Charitable Expenditure (USD)
South Sudan	UNDP	203555	146,852	145,288
South Sudan	UNHCR	203308	552,726	826,009
South Sudan	UNICEF	203432	579,913	575,675
South Sudan	UNICEF	203473	-	78,982
Sudan	EC	203408	-	616,990
Sudan	ECHO	203099	-	(12,557)
Sudan	ECHO	203563	1,052,470	278,718
Sudan	UNDP	203164	(116,203)	-
Sudan	UNDP	203567	142,958	1,793
Sudan	UNDP	203573	155,869	4,191
Turkey	ECHO	202965	(64)	(64)
Turkey	ECHO	203204	(505)	(505)
Turkey	ECHO	203410	7,051	1,395,098
Turkey	Swiss Government	202891	(18,870)	21,433
Turkey	UNHCR	203312	10,713	10,713
Turkey	UNOCHA	203505	9,407	9,407
Ukraine	WHO	202914	(1)	(1)
Total for Building Health Capacity			46,137,611	46,036,443

Projects categorised under Emergency Response

Country	Donor	Project ID	Total Charitable Income (USD)	Total Charitable Expenditure (USD)
Afghanistan	UNOCHA	203195	(14)	(14)
Afghanistan	UNOCHA	203234	81,642	104,642
Afghanistan	UNOCHA	203250	133,239	245,932
Caribbean Islands	PAHO	203518	180,000	154,927
Central African Republic	DFID	202802	(102)	-
Central African Republic	ECHO	203537	868,131	607,908
Central African Republic	MENTOR	203254	1,057,933	1,080,329
Chad	ECHO	203122	1,305,981	1,436,583
Chad	WHO	203224	(732)	-
DR Congo	IRC	203193	447,884	462,204
DR Congo	UNDP	203311	148,804	146,839
DR Congo	WHO	203592	98,506	98,506
Ethiopia	ECHO	203135	2,049	(3,889)
Ethiopia	UNFPA	202874	(20,423)	(20,423)
Ethiopia	UNOCHA	203172	504	15,335
Ethiopia	UNOCHA	203246	5,348	5,348
Ethiopia	WRC	203306	30,130	48,770
Haiti	ECHO	203241	137,561	178,255
Haiti	HT Ministry Public Health	203435	356,975	356,975
Haiti	UNICEF	203286	(22)	-
Iraq	DFATD Canada	203107	2	166
Iraq	DFID	202548	367,045	367,045
Iraq	DFID	203500	2,427,013	2,427,013
Jordan	DFID	202548	1,140,006	1,140,006
Jordan	DFID	203500	102,660	102,660
Lebanon	DFID	202548	1,696,641	1,696,641
Lebanon	DFID	203500	2,331,984	2,331,984

Charitable activities detailed analysis for the year ended 30 June 2018

The following pages do not form part of the statutory financial statements

Projects categorised under Emergency Response (continued)

Country	Donor	Project ID	Total Charitable Income (USD)	Total Charitable Expenditure (USD)
Lebanon	King Salman Humanit. Aid	203553	130,719	130,719
Libya	Danish Refugee Council	203321	276,938	439,161
Libya	UNHCR	203531	2,991,493	3,615,447
Middle East	DFID	203500	2,563,394	2,409,775
Middle East	ECHO	202563	(84,026)	-
Middle East	King Salman Humanit. Aid	203553	480,008	228,227
Nigeria	ECHO	203407	2,463,665	2,941,431
Somalia	ECHO	203498	117,574	116,322
Somalia	NRC	203458	381,656	550,428
Somalia	Qatar Charity	202860	170	170
Somalia	SCF	203404	(1)	402,371
Somalia	UNICEF	203185	356,132	418,049
Somalia	UNOCHA	202238	(2)	-
South Sudan	UNICEF	203128	(33,229)	(33,229)
Syria	DFATD Canada	203097	(64,427)	-
Syria	DFID	202548	1,155,635	1,155,635
Syria	DFID	203500	1,846,386	1,838,335
Syria	Embassy of the Czech Rep.	203453	19,000	19,000
Syria	Stanley Thomas Johnson	203509	50,000	23,542
Syria	UNHCR	203322	388,856	564,011
Syria	UNHCR	203530	620,424	563,611
Syria	UNTF	203568	271,472	35,276
Turkey	DFID	202548	1,616,415	1,616,415
Turkey	DFID	203500	323,079	323,079
Turkey	ECHO	202563	(981)	-
Turkey	UNOCHA	203089	(28,373)	-
Yemen	ECHO	203419	1,994,102	2,455,447
Yemen	ECHO	203558	2,808,000	538,813
Yemen	Start Fund	203440	(14,524)	(353)
Cameroon	UNHCR	203030	-	(309)
Total for Emergency Response			33,528,300	33,335,115

Projects categorised under Mental Health

Country	Donor	Project ID	Total Charitable Income (USD)	Total Charitable Expenditure (USD)
Ethiopia	UNICEF	203536	52,908	59,419
Iraq	Plan Int. Australia	202706	-	(57)
Iraq	UNICEF	203409	577,597	846,107
Jordan	DFID	203258	2,090,041	2,222,232
Jordan	Global Affairs Canada	203302	516,790	516,790
Jordan	Vurtje University	203293	-	42,360
Lebanon	UNHCR	203058	(1,350)	(1,350)
Lebanon	UNICEF	203323	399,290	399,290
Middle East	Global Affairs Canada	203302	1,414,114	1,592,985
Syria	Global Affairs Canada	203302	1,175,967	1,175,967
Turkey	Global Affairs Canada	203302	2,174,204	2,161,268
Total for Mental Health & Psychosocial Support			8,399,561	9,015,011

Charitable activities detailed analysis for the year ended 30 June 2018

The following pages do not form part of the statutory financial statements

Projects categorised under Nutrition

Country	Donor	Project ID	Total Charitable Income (USD)	Total Charitable Expenditure (USD)
South Sudan	IMC UK GIK	203428	-	486,363
Afghanistan	WFP	203313	(10)	75,734
Cameroon	ECHO	203416	1,487,207	2,445,744
Cameroon	WFP	203294	87,161	496,077
Cameroon	WFP	203295	44,556	424,165
Cameroon	WFP	203534	149,201	474,297
Central African Republic	ECHO	203415	1,024,745	1,079,271
Central African Republic	UNDP	203291	95,505	95,505
Central African Republic	WFP	203331	(1,280)	1,761
Chad	ECHO	203421	1,581,065	1,587,510
Chad	IMC UK GIK	203401	-	30,871
Chad	WFP	203400	57,755	209,401
Chad	WFP	203442	76,439	134,890
Chad	WFP	203519	62,607	135,275
Ethiopia	UNICEF	203257	307,506	336,922
Ethiopia	WFP	202863	165,061	3,541,543
Global	UNICEF	203242	43,574	43,574
Global	UNICEF	203497	24,499	24,499
Kenya	UNICEF	203186	(5,622)	(264)
Mali	WFP	203023	-	12,311
Mali	WFP	203431	101,438	367,476
Nigeria	WFP	203251	(162,187)	-
Nigeria	WFP	203330	(385,083)	1,090,701
Nigeria	WFP	203449	822,676	4,284,722
Nigeria	WFP	203543	1,034,161	3,658,208
South Sudan	UNDP	203429	168,072	313,388
South Sudan	UNHCR	203520	617,661	763,164
South Sudan	WFP	203019	5,391	123,330
South Sudan	WFP	203020	(10,063)	109,446
South Sudan	WFP	203066	(112,440)	1,501
South Sudan	WFP	203540	17,439	22,247
South Sudan	WFP	203544	22,562	57,717
South Sudan	WFP	203545	19,310	54,239
South Sudan	WFP	203559	-	240,010
Sudan	ECHO	203425	1,642,850	2,090,870
Sudan	IMC UK GIK	203337	-	28,484
Sudan	UNDP	202996	(3,845)	-
Sudan	WFP	203417	24,942	454,548
Sudan	WFP	203554	-	16,722
Sudan	WFP	203566	-	153,280
Yemen	UNICEF	202466	(680)	-
Yemen	WFP	203102	(9,153)	10,188
Yemen	WFP	203472	393,618	720,306
Nigeria	WFP	203251	162,187	-
Nigeria	WFP	203330	818,969	-
Nigeria	WFP	203449	513,270	-
South Sudan	WFP	203019	36,389	-
South Sudan	WFP	203020	57,566	-
South Sudan	WFP	203066	101,147	-
Total for Nutrition			11,076,166	26,195,996

Charitable activities detailed analysis for the year ended 30 June 2018

The following pages do not form part of the statutory financial statements

Projects categorised under Water and Sanitation

Country	Donor	Project ID	Total Charitable Income (USD)	Total Charitable Expenditure (USD)
Afghanistan	UNICEF	203144	229,794	229,794
Afghanistan	UNOCHA	203541	248,661	112,764
Ethiopia	IRC	203501	815,939	815,939
Haiti	ECHO	203074	(4,079)	(4,079)
Syria	UNTF	203523	680,678	196,089
Yemen	King Salman Humanit. A	203539	1,183,497	514,646
Yemen	NPT UK	203511	700,000	359,754
Afghanistan	UNICEF	203206	407,224	462,103
Afghanistan	UNOCHA	203488	433,187	433,187
Ethiopia	IRC	203283	-	(56)
Ethiopia	Medi Oliver Foundation	203504	207,090	85,022
Ethiopia	UNOCHA	202830	(85)	(85)
Sudan	JOAC	202695	(8,784)	55,430
Turkey	ECHO	202859	3,161	(1,316)
Yemen	King Salman Humanit. A	203205	1,343,105	1,316,783
Total for Water & Sanitation			6,239,388	4,575,975

Projects categorised under Women & Children

Country	Donor	Project ID	Total Charitable Income (USD)	Total Charitable Expenditure (USD)
Afghanistan	UNFPA	203533	153,670	148,043
Cameroon	ECHO	203564	1,077,210	493,005
Cameroon	UNHCR	203524	644,051	580,677
Cameroon	UNHCR	203525	1,810,942	1,632,184
Ethiopia	UNHCR	203522	604,277	823,405
Ethiopia	UNOCHA	203304	-	60,253
Ethiopia	WRC	203576	7,435	2,341
Ethiopia	ZOA Netherlands	203287	1,045,428	425,160
Global	UNFPA	203018	51,857	62,830
Iraq	UNFPA	203535	1,571,918	1,430,021
Iraq	UNOCHA	203150	(22,915)	(168)
Iraq	UNOCHA	203577	240,000	8,235
Jordan	DFID	203556	637,521	449,733
Jordan	UNHCR	203516	4,337,285	3,265,473
Jordan	UNICEF	203299	2,734,803	2,858,880
Jordan	UNICEF	203551	1,408,573	1,193,289
Kenya	EC	203022	314,768	311,558
Lebanon	Plan Int. Australia	203448	677,371	586,653
Lebanon	UNFPA	203326	8,041	8,013
Mali	UNFPA	203457	150,111	150,111
Myanmar	UNOCHA	202992	(46,082)	(2,315)
Nigeria	ECHO	203143	28	28
South Sudan	DFID	203190	5,866,847	6,121,422
South Sudan	UNDP	203461	236,000	233,486
South Sudan	UNFPA	203307	2,450,683	2,444,681
South Sudan	UNFPA	203521	2,499,358	2,523,126
South Sudan	UNICEF	203580	64,608	64,799
Total for Women & Children			28,523,788	25,874,923