

40

YEARS OF HEALTH & HOPE



**International
Medical Corps UK**

INTERNATIONAL MEDICAL CORPS (UK)
2023/2024 ANNUAL REPORT

Company Registration No. 04474904



AFGHANISTAN



40 YEARS OF
HOPE

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An aerial photograph of a dirt path in a dry, brushy landscape. A person wearing a white bucket on their head is walking along the path, casting a long shadow. The text is overlaid on the left side of the image.

INTERNATIONAL MEDICAL CORPS (UK)

2023/2024 ANNUAL REPORT

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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, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

Throughout the document, where references to "affiliates" (in plural) are made, they refer to International Medical Corps and International Medical Corps Croatia.

Unless otherwise stated, projects and their statistics referred to in the first part of this report (pages 1-37) are the results of combined International Medical Corps (UK), International Medical Corps and International Medical Corps Croatia global efforts in calendar year 2023 and do not form part of the statutory annual report. Projects and their statistics referred to in the second part of this report (pages 38-88) represent the work of International Medical Corps (UK) only, and covers the 12-month period to 30 June 2024 and forms part of the statutory financial statements and trustees report.

TO OUR SUPPORTERS

International Medical Corps has operated in 80 countries worldwide, reaching millions through our services and training since our founding in 1984. Since 2002, International Medical Corps (UK) has played a critical role in these lifesaving activities. Today, we remain steadfast in our mission to save lives, relieve suffering and foster self-reliance for crisis-affected people around the world.



With your generous contributions, we responded to the world's most pressing crises, providing urgently needed support to nearly 16.5 million people in 2023.

In Ukraine, we've continued to support civilians and healthcare infrastructure by providing essential healthcare and mental health services, rehabilitating hospitals and offering in-person and virtual training in various fields such as emergency care and infection prevention and control. What began as a team of 30 people in Mariupol in 2022 has now expanded to some 400 humanitarians based in cities throughout the country. As the conflict continues, our work ensures the continuity of healthcare for Ukraine's most vulnerable communities.

We also are responding to the crises in Israel and Gaza. In Israel, we are working with a longtime partner to support those who have been hardest-hit, including vulnerable younger, disabled and older citizens. In Gaza, where we have worked since 2008, we deployed two fully equipped field hospitals in early 2024. Our staff provides lifesaving care to civilians affected by the war, including by providing surgical care for trauma, emergency obstetric and newborn care, physical rehabilitation, mental health services and more. We have also launched widespread, community-based nutrition and vaccination campaigns to save children's lives.

In Sudan, the ongoing civil war has caused the world's largest displacement crisis, and our teams are working throughout the country, delivering vital health services amid the turmoil. We also are helping refugees and returnees affected by the crisis who have fled to the Central African Republic, Chad and South Sudan.

As usual, in 2023 our staff responded rapidly to natural disasters around the world, while continuing to provide ongoing support to those affected by earlier disasters in Afghanistan, Libya, Morocco, Somalia, Syria and Türkiye. And in the Middle East and East Africa, we're providing healthcare services to refugees and ensuring that children have access to clean water and nutrition support in drought-stricken Ethiopia, Somalia and Yemen.

Of course, since the founding of International Medical Corps 40 years ago, training local people to be their own best first responders has remained at the heart of our mission. From teaching women to screen children for malnutrition in Yemen's remotest villages to training Ukrainian frontline workers to safeguard their own—and others'—mental health, we're helping the communities that need it most to build their resilience.


Finally, we would like to remember one person who embodied this spirit of teamwork, compassion and dedication: Ognjen "Oggie" Radosavljevic, who sadly passed away in August 2024. A long-time member of the International Medical Corps family and, most recently, the Managing Director of International Medical Corps (UK), his memory will live on in our staff and in the lives of the thousands of people he helped during his humanitarian career. We will miss his warm smile and unwavering commitment to helping others.

And we would like to thank you. None of the work we do to help others would be possible without your support. Together, we will continue to strive for a world where children never go hungry, mothers always survive childbirth and families can access the care and support they need.

Thank you for being part of our global humanitarian efforts to help those in need.



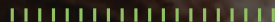
Andrew W. Géczy
Chairman
International Medical Corps (UK)



David Eastman
Acting Managing Director
International Medical Corps (UK)



40 YEARS OF
HEALTH





PAKISTAN

WE ARE A GLOBAL FIRST RESPONDER

We deliver emergency healthcare and related services to those affected by conflict, natural disaster and disease. We do this no matter where they are in the world, whatever the conditions may be. At the same time, we train people in their own communities, providing them with the skills they need to recover, build self-reliance and shape their own future, enabling them to become effective first responders themselves.





 International
Medical Corps

First There, No
Matter Where



SPEED SAVES LIVES

Our emergency response teams deploy quickly to help those in great need—often arriving within hours—even in the most remote, challenging environments.



DEMOCRATIC
REPUBLIC OF
THE CONGO



GAZA FIELD HOSPITAL

We draw on our experience gained over 40 years of responding to disasters in more than 80 countries on six continents. Our staff includes physicians and nurses trained in emergency medicine, supported by specialists in essential healthcare services that range from women and children's health, to nutrition services, to water, sanitation and hygiene, to mental health and psychosocial support, and to gender-based violence protection services.

We maintain our capacity to respond quickly because, in the initial hours following a disaster, speed saves lives. As conditions ease, we remain and partner with survivors to build a better future for their community. The key to our approach is training—an essential component of all our programmes, used to transfer the latest knowledge and skills into local hands, to help build a brighter future. We strengthen local health systems and work with community leaders, hire and train local staff, develop partnerships and constantly evaluate progress to ensure quality outcomes.

With a staff that numbers more than 8,000 worldwide, 96% of whom are recruited locally, our strategy ensures that the knowledge and tools required to prepare for—and respond to—future emergencies are culturally compatible and remain available in the community. We work to ensure that if disaster strikes again, residents can be their own first responders.

OUR PROGRAMMES

In 2023, our teams worldwide faced humanitarian crises head-on, from conflict and hunger to drought and disease. In the face of these challenges, we delivered critical services and training to underserved communities in hard-to-reach areas, often under dangerous conditions.



EMERGENCY RESPONSE AND PREPAREDNESS

In Syria, International Medical Corps' mobile medical teams responded rapidly since the devastating February 2023 earthquakes. We're continuing to provide healthcare services and tackle emerging crises—such as cholera outbreaks—and simultaneously building local capacity through training for local health workers and volunteers.



HEALTH SERVICES SUPPORT

In Yemen, where around half of the country's health facilities are no longer functioning after a decade-long civil war, we're rehabilitating these essential services. We're also delivering essential medical and non-medical supplies, including specialist diagnostic equipment.



FAMILY AND COMMUNITY HEALTH

In Jordan's Azraq and Zaatari refugee camps, we're providing comprehensive health and nutrition services for women and children. In the first half of 2024, we provided 14,716 paediatric consultations, gave inpatient care for 720 children, and counselled 482 mothers in infant and young-child feeding practices.



WOMEN'S AND CHILDREN'S HEALTH

In South Sudan, where conflict and displacement have led to widespread violence against women and girls, our GBV prevention and response work and livelihoods assistance programmes are empowering communities. Over the past eight years, we've also distributed 79,451 dignity kits.



NUTRITION AND FOOD SECURITY

In Ethiopia, where malnutrition is widespread, we're treating vulnerable people, raising awareness and distributing food in schools and communities. We have screened 471,818 people for malnutrition, providing lifesaving care to 56,782 children under five and 56,213 pregnant and lactating women.



WATER, SANITATION AND HYGIENE

In Ukraine, where the conflict has damaged infrastructure, we're rehabilitating water systems. This includes protecting access to safe water for 86,500 people in Sumy and 69,000 in Kharkiv and Mykolaiv by installing new water supply and sewerage pumps.



MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)

In Afghanistan, we're providing crucial MHPSS services. This includes supporting a drug addiction treatment centre in Kabul, where we've helped 401 women and children with integrated evidence-based treatment, rehabilitation and psychosocial support.

40 YEARS OF

TRAINING





TRAINING FOR LASTING IMPACT

Training is the foundation of our work, providing people with the support they need to move from relief to self-reliance. For example, we provide in-person trauma-care and mass-casualty management training to thousands of healthcare professionals in countries plagued by conflict.



LOCALLY, IN 2023, WE TRAINED



107,202

people through 5,611 training sessions covering a range of health-related issues.



3,042

people in the basics of administering psychological first aid.



1,743

people to participate in community-based WASH and health committees.



2,589

people in child protection topics, including case management.





UKRAINE

UKRAINE

Currently, 9 million people in Ukraine are living with non-communicable diseases (NCDs). Two million people live with diabetes, while approximately 22% of the population lives with high blood pressure. Many residents who lived in areas affected by conflict have not received ongoing, sufficient medical care, so doctors who are treating patients in newly liberated areas are facing a rise in heart attacks and strokes caused by NCDs.

In response, International Medical Corps has partnered with the Family Doctor's Association of Southern Ukraine and professors from the Odesa National Medical University to provide training for family doctors and general practitioners in Kherson and Mykolaiv, helping them to better address NCDs in their practices. The training sessions covered such topics as hypertension, diabetes, high cholesterol, the effects of obesity, beneficial lifestyle changes and how to improve nutrition.

In addition, International Medical Corps has continued to partner with the Harvard Humanitarian Initiative to provide trauma-care training to Ukrainian nurses, doctors and other first responders, so far reaching almost 6,000 people with in-person classes. Last year, universities across Ukraine sent faculty to our training courses, helping to strengthen their skills and teaching them to conduct the courses themselves—ensuring that first responders in Ukraine are better prepared to handle trauma and emergency care in their own communities.

TRAINING



SOMALIA

SOMALIA

In Somalia, armed conflict and attacks on groups of civilians are far too common. After such mass-casualty events, hospitals can be overrun with patients—and chaos.

To address this, the World Health Organisation developed mass-casualty management (MCM) standards and a training course for hospital emergency units. In addition, it developed a Basic Emergency Care (BEC) course for health workers who are challenged by the need to provide lifesaving care with limited resources. In October, International Medical Corps provided both MCM and BEC training to Somali health workers, and helped hospitals in the country create MCM plans, enabling them to be ready for surges in demand caused by the fighting.

 *EGYPT, JORDAN AND
THE WEST BANK*

We provided training in Jordan and Egypt to our staff members to prepare them to deploy with our field hospitals in Gaza.

We also provided training to medical professionals in Egypt to help them treat trauma victims brought there from Gaza. In the West Bank, we trained International Medical Corps staff and Palestinian health workers to become instructors, and provided training to local health workers who are treating an increasing number of trauma patients there.





40 YEARS OF

RESILIENCE



In 2023, International Medical Corps responded directly to the needs of nearly 16.5 million people in 29 countries on five continents.



UKRAINE

AMONG THE RESULTS OF OUR WORK



16.5 MILLION

DIRECT BENEFICIARIES

Of these, nearly 3 MILLION were children under 5. Our work also reached more than 55 MILLION others who benefited indirectly from our programmes and work.



107,202

PARTICIPANTS TRAINED

This included clinical and non-clinical health staff, government and non-government staff, community health workers and volunteers.



9.3 MILLION

PRIMARY HEALTH CONSULTATIONS

Of these, more than 2 MILLION were for children under 5.



1,392

HEALTH FACILITIES SUPPORTED

In 2023, we provided vital assistance to 954 primary health facilities and 113 hospitals, and enabled 323 mobile clinics to reach people in underserved and remote areas.



141,004

CHILDREN VACCINATED AGAINST MEASLES

Vaccinating children protects future generations from the dangers of measles and builds more resilient immune systems.





WOMEN'S AND CHILDREN'S HEALTH

The key to our future

Ensured that 102,006 births were assisted by a trained birth attendant.



NUTRITION

The foundation of life

Provided 2,375,098 people with critical nutrition support and treated 282,385 children for acute and severe malnutrition.



WATER, SANITATION AND HYGIENE

The essence of good health

Helped more than 2.8 million people with water, sanitation and hygiene needs, and supported the delivery of 127,734,898 liters of clean, safe water.



MENTAL HEALTH CARE AND PSYCHOSOCIAL SUPPORT

The invisible wounds

Provided services to 1,138,993 people through hundreds of facilities, mobile teams and other means of delivery.

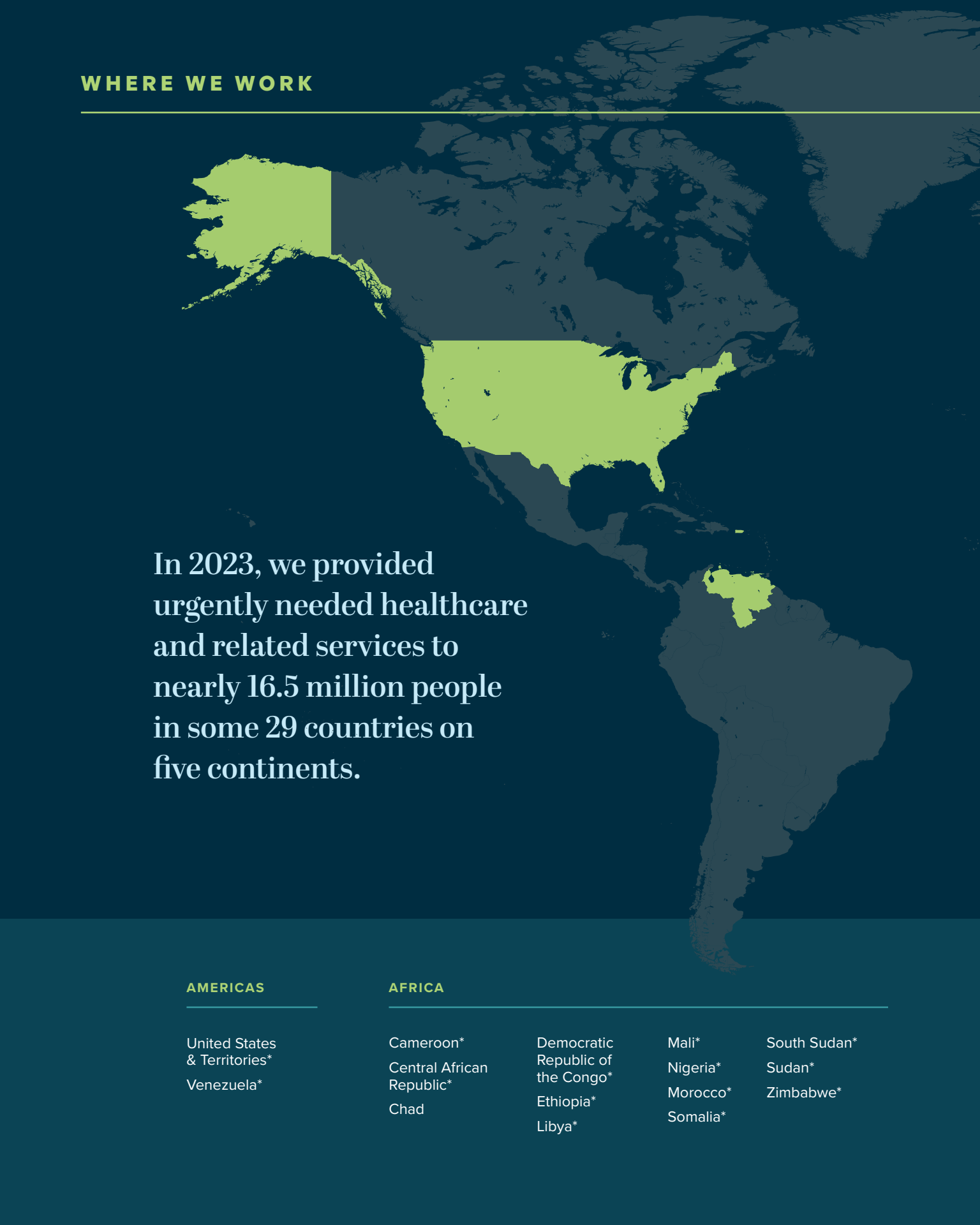


GENDER-BASED VIOLENCE

A violation of fundamental human rights

Offered protection and support to 1,748,080 people living with the threat—or reality—of gender-based violence.

WHERE WE WORK



In 2023, we provided urgently needed healthcare and related services to nearly 16.5 million people in some 29 countries on five continents.

AMERICAS

United States & Territories*
Venezuela*

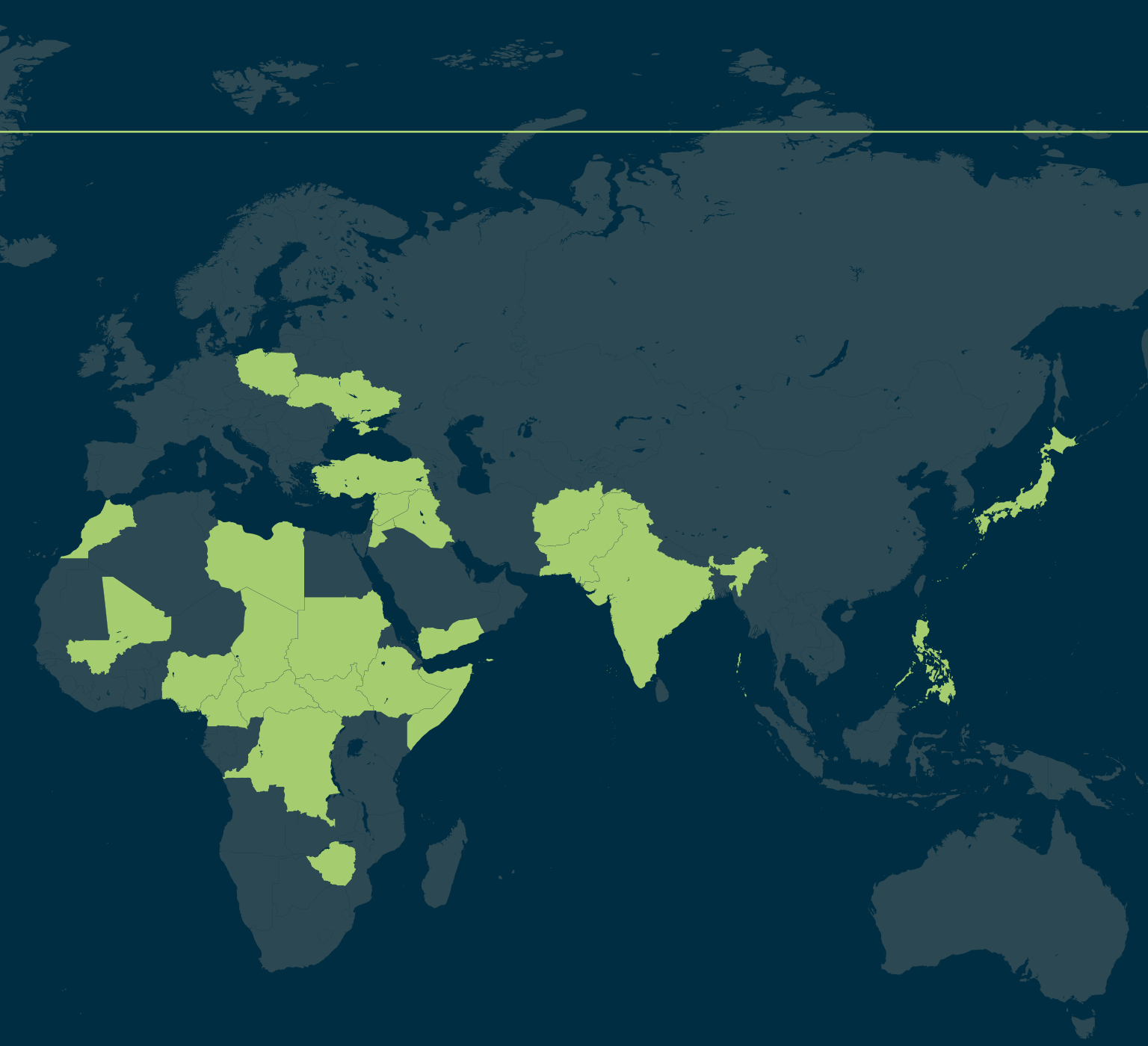
AFRICA

Cameroon*
Central African Republic*
Chad

Democratic Republic of the Congo*
Ethiopia*
Libya*

Mali*
Nigeria*
Morocco*
Somalia*

South Sudan*
Sudan*
Zimbabwe*



EUROPE

Poland*
Ukraine*

MIDDLE EAST

Gaza*
Iraq*
Jordan*
Lebanon*
Syria*
Türkiye
Yemen*

ASIA

Afghanistan*
India
Japan
Pakistan*
Philippines*

**Countries where International Medical Corps (UK) programmes were funded during the 12 months to 30 June 2024.*

A photograph of a field of green plants, possibly a vegetable garden, with a large white arrow pointing upwards in the background. The text is overlaid on the image.

40 YEARS OF

SELF-
RELIANCE

|||||



PARTNERSHIPS

STRENGTHENING HUMANITARIAN RESPONSES TO INFECTIOUS DISEASE OUTBREAKS

International Medical Corps is leading the Local Engagement and Response Network (LEARN) programme, working in partnership with Africa Humanitarian Action, Brigham Women's Hospital/ Harvard Humanitarian Initiative, the International Council of Voluntary Agencies and Veterinaires Sans Frontieres International.

Over the next five years, the programme—funded by the United States Agency for International Development's Bureau for Humanitarian Assistance—will collaborate with 80 local and national organisations across 14 countries to build preparedness for infectious disease outbreaks and expand the capacity to respond to humanitarian crises. The collaboration will strengthen local networks of first responders and support their engagement and participation in regional and international coordination as valued, frontline responders and stakeholders.





CORE GROUP PARTNERS PROJECT

International Medical Corps is a consortium member of the Core Group Partners Project (CGPP), in Borno and Kano states, Nigeria. As members of the CGPP, we work to protect children and interrupt the transmission of the polio virus through vaccinations, outbreak response, case surveillance and community engagement programmes that reduce vaccine hesitancy. We also foster interdisciplinary collaboration among stakeholders, including Nigerian government agencies, the WHO and UNICEF.

While Nigeria attained polio-free status in 2020, the wild poliovirus is still transmitted from other endemic countries. To protect Nigerian children, CGPP is working with the Nigerian government to focus on border communities where large populations of displaced children are at high risk of contracting and spreading polio. CGPP volunteers are working with local community leaders to reach vaccine-hesitant families through door-to-door campaigns, building trust among community members and vaccinating children.

Our CGPP partners also work with International Medical Corps security personnel, alongside the Nigerian Civilian Joint Task Force and military to gather intelligence and staff vaccination teams in remote areas.

LEADERSHIP

International Medical Corps (UK) is an international humanitarian nongovernmental organisation (NGO) with its headquarters in London. The Charity is an independent affiliate of International Medical Corps, a non-profit organisation, and International Medical Corps Croatia, a Croatian non-profit association that share the same mission. Through an Administrative Services Agreement, International Medical Corps (UK) engages International Medical Corps in the delivery and implementation of its programmes in accordance with the terms and conditions of its grants.

INTERNATIONAL MEDICAL CORPS-UK BOARD OF DIRECTORS

Andrew W. Géczy
CHAIRMAN
London

Hendrik Cornelis
SECRETARY
London

Nancy A. Aossey
TREASURER
Los Angeles, CA

Reto Braun
Switzerland

Dominic J. O'Hagan
United States

C. William Sundblad
Santa Monica, CA



▲ Global Ambassador Lily Donaldson works with Somali refugee children in Ethiopia as part of our Photo Camp project with National Geographic.



GLOBAL AMBASSADORS

Kevin Curry
Influencer, Activist

Lily Donaldson
Model, Activist

Judy Greer
Actress, Activist

Maz Jobrani
Comedian, Actor

Sanaa Lathan
Actress, Humanitarian

Sienna Miller
Actress, Activist

Ashley Park
Actress, Humanitarian

Inanna Sarkis
Actress, Activist

Stacy Twilley
Founder and CEO
iVolunteer.org

CELEBRITY FIRST RESPONDERS

Muna AbuSulayman
Genevieve Angelson
Bob Crawford
Jay Ellis
Paul Forman
Nikki Glaser
Ben Harper
Jaclyn Harper
Jihae
David Koehn
Heidi Murkoff
Yvonne Orji
Robert Pattinson
Jeff Probst
Nina Senicar
Tom Sturridge
Tara Summers

ADMINISTRATIVE DETAILS OF THE CHARITY, THE TRUSTEES AND ADVISORS

TRUSTEES

Andrew W. Géczy
CHAIRMAN

Nancy A. Aossey

Reto Braun

Hendrik Cornelis
SECRETARY

Dominic J. O'Hagan

C. William Sundblad

MANAGING DIRECTOR

Ognjen Radosavljevic
(to 4 August 2024)

David Eastman
(Acting Managing Director
from 5 August 2024)

REGISTERED OFFICE

Workspace 4, Mode
1-6 Centric Close
Oval Road, Camden
London
NW1 7EP

FINANCE DIRECTOR

Fahmida Wadud-Muhit

TELEPHONE WEBSITE

0207 253 0001
<https://www.internationalmedicalcorps.org.uk>

COMPANY REGISTRATION NUMBER

04474904 (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

TRUSTEES' REPORT (INCLUDING STRATEGIC REPORT)

30 JUNE 2024

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 2024. 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).

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 2 July 2002 and registered as a charitable organisation with the Charity Commission on 19 September 2002. Activities commenced on 1 November 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, and International Medical Corps Croatia, an association registered in Croatia. 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, more than \$135 million of the Charity's programmes were delivered in partnership with International Medical Corps (2023: \$121 million). This represents an 11% increase (2023: 10% increase compared to 2022) in activities worldwide over the previous year. International Medical Corps (UK) also maintains an Administrative Services Agreement with International Medical Corps Croatia to share certain services in connection with its operation.

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) and all subsequent amendments.

The trustees of the Charity have the powers to appoint and remove a trustee. 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.

International Medical Corps (UK) adheres to and supports the development of the Sphere Project's Minimum Standards in any disaster response. International Medical Corps (UK) is also informed by the guiding principles of 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 six members who aim to meet several times each year. Additional meetings can be called at the request of the Chair. For the 2023–24 financial year, the board of trustees met in December 2023 and June 2024. The list of trustees who served in the year is shown on page 38.

Risk, compliance and external audit functions sit with the board.

As the governing body for the Charity, the trustees take decisions and approvals on a board level regarding 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 provide oversight of 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.** Review and approve International Medical Corps (UK)'s procedures for risk management, and

ensure there is a framework of structures, policies and processes in place for the organisation and the board of trustees.

STATEMENT ON APPROACH TO SAFEGUARDING

International Medical Corps (UK) and its affiliates are committed to delivering programming that is safe, accountable, and inclusive in order to address the inherent inequities of power that can exist in humanitarian settings, by putting the people affected by crisis at the centre of assistance and ensuring there are systems in place to elevate the needs of people and communities affected by crises. Safeguarding is a means of risk prevention and mitigation, which reflects our responsibility to ensure our personnel, operations, and programmes do no harm to the people with whom we work, with a particular focus on protecting those people who may be most vulnerable to exploitation and/or abuse. International Medical Corps (UK) receives all relevant reports of safeguarding violations from its US affiliate. As per the Charity's governance structure, the Managing Director and senior staff manage all safeguarding matters.

The Charity's US affiliate continues to reinforce its safeguarding capacity and capability through an organisation-wide approach, which includes incorporation of guidance received from the Foreign, Commonwealth & Development Office (FCDO) of the UK Government, other donors, and the Charity Commission.

The following policies of International Medical Corps (UK) outline the Charity's approach to managing safeguarding matters. The policies are reviewed and updated periodically.

- Code of Conduct and Ethics
- Safeguarding Policy, encompassing child safeguarding, protection from sexual exploitation and abuse, safeguarding adults at risk, prevention of trafficking in persons
- Whistleblower Policy
- Guidance on Sub-Recipient Safeguarding and Ethical Conduct requirements
- Anti-Harassment and Bullying Policy
- Conflict of Interest Policy/Staff Integrity Policy
- Disciplinary Rules, including grievance procedures
- Recruitment and Selection Process
- Health and Safety Policy
- Modern Slavery Statement

In addition to the policies, staff are also required to complete mandatory training and awareness-raising courses that include:

- Code of Conduct and Ethics
- Prevention of Trafficking in Persons
- Child Safeguarding
- Preventing Harassment in the Workplace
- Prevention of Sexual Exploitation and Abuse

This training is completed at induction, and refresher training is completed on an annual basis.

The Charity's US affiliate continues to reinforce the following key safeguarding actions taken during the recent years.

THE SAFEGUARDING TASK FORCE

The Safeguarding Task Force provides focus, leadership and oversight over all global safeguarding initiatives. The Safeguarding Task Force is a multi-disciplinary team comprising staff from key departments, including Domestic and International Affairs, Legal, Human Resources, Ethics and Compliance, Technical Unit and International Programmes. The Safeguarding Task Force workplan covers the development and implementation of safeguarding initiatives, including policy review and updates, prevention and protection, survivor assistance guidance, capacity strengthening, training and country support.

POLICY DEVELOPMENT AND IMPLEMENTATION

The umbrella Safeguarding Policy encompasses:

- Child Safeguarding
- Protection from Sexual Exploitation and Abuse
- Safeguarding Adults at Risk
- Prevention of Trafficking in Persons

Sexual harassment in the workplace is covered under the Policy for Protection from Harassment, Bullying and Sexual Misconduct. All policies are reviewed and updated periodically.

SAFEGUARDING POLICY IMPLEMENTATION GUIDE AND TOOLKIT

The Safeguarding Task Force has developed a guide to support understanding and implementation of the International Medical Corps' Safeguarding Policy. The guide describes priority actions that need to be undertaken by country teams to ensure the full implementation of the Safeguarding Policy at the country and programme/project level.

Each priority action has a brief explanation of its importance, an overview of the action itself, how to document or demonstrate that an action has been completed, and guidance on where further tools and information can be found within the accompanying Safeguarding Implementation Toolkit, in order to implement the actions.

The accompanying Toolkit contains tools, information and guidance to support the implementation of the Safeguarding Policy. Examples of the tools include a Safeguarding Action Plan Template, the Terms of Reference for the Safeguarding Focal Points and the Survivor Assistance Guidelines.

TALENT ACQUISITION

Safeguarding is included in the corporate staff-recruitment process, from advertisement to hiring.

Key actions include the following steps:

- Safeguarding risks are considered for each role.
- Behavioural-based safeguarding questions are included in the headquarters level interview process for all positions, including field recruitments.
- Managers' responsibilities for ensuring safeguarding measures for volunteers, employees and partners are now routinely included in job descriptions for international staff and are part of the management and staff performance-appraisal process.

International Medical Corps UK and its affiliate International Medical Corps participate in the Inter-Agency Misconduct Disclosure Scheme from the Steering Committee for Humanitarian Response. In accordance with this, we will request information from an applicant's previous employers about any findings of sexual exploitation, sexual abuse and/or sexual harassment during employment, or incidents under investigation when the applicant left employment.

SAFEGUARDING FOCAL POINTS

More than 150 Safeguarding Focal Points are identified at the country level. Safeguarding Focal Points are nominated by the Country Director. Training resources, materials and support include regular orientation sessions, terms of reference, extensive trainings and regular webinars, and a resource library on our intranet.

Safeguarding Focal Points' responsibilities include training, programme support as related to Safeguarding (e.g. proposal development), coordinating with the Headquarters Safeguarding Taskforce, and liaising with other focal points from partner agencies and working groups.

Staff globally receive an annual refresher training that covers Safeguarding. Our Safeguarding Focal Points are responsible for ensuring that this training is completed, in coordination with our Learning & Development team at Headquarters.

SAFEGUARDING VIOLATIONS—CASE MANAGEMENT

Reports of violations of International Medical Corps' safeguarding policies are referred to the Ethics and Compliance Department, which conducts investigations in consultation with the Safeguarding Case Team, an interdisciplinary group of senior leaders. Individuals who are found to have violated International Medical Corps' policies are subject to disciplinary action, up to and including termination. As well as considering individual cases, the Safeguarding Case Team analyses safeguarding data over time to identify risks and emerging themes. Key lessons learned through this process

inform future safeguarding policy updates and practice, as part of an institutional culture of constantly striving to improve.

SURVIVOR/VICTIM SUPPORT

International Medical Corps works to ensure that survivors of safeguarding violations receive appropriate and timely support, including medical, psychosocial and other services, according to their needs and wishes. Survivors are also informed of their rights to report incidents to police and/or other relevant authorities. In contexts where reporting to authorities may be indicated, International Medical Corps' Safeguarding Case Team advises survivors and consults with Legal Counsel to determine the best course of action. To the extent possible, survivors' wishes guide decisions about the types of support received, and survivors are fully informed of their options and rights.

SAFEGUARDING RISKS OF DOWNSTREAM PARTNERS

Downstream partners are required to conduct all activities under sub-agreements in a manner consistent with international laws, humanitarian principles and donor regulations. Subrecipients are prohibited from engaging in any type of harmful misconduct, including but not limited to sexual exploitation, abuse, harassment and trafficking. Subrecipients are required to inform International Medical Corps of any safeguarding issues that arise under the sub-agreement. Safeguarding-specific requirements are included in the downstream partner risk-assessment guidelines.

DEFINING RISK OWNERS

Ownership of safeguarding risks is documented in the organisational risk register of the Charity and its US affiliate, explicitly stating that the risks are owned by executive staff. The Charity's trustees are updated at least twice a year.

SAFEGUARDING—PREVENTION MEASURES

A comprehensive approach to maintaining and strengthening prevention measures includes incorporating protection mainstreaming into programme design and implementation and training of staff to enhance this approach, as well as the utilisation of a risk mitigation approach to dealing with safeguarding violations.

THE ENVIRONMENT

International Medical Corps (UK) actively promotes policies that support the inclusion of safe environmental protection at HQ and country levels. International Medical Corps (UK) emphasises environmental management for the success of our projects. The organisation is committed to upholding national and international standards for sound environmental practices. At the country-level programme implementation, the charity aims to reduce excess morbidity and mortality associated with potential

exposure to environmental factors. International Medical Corps coordinates globally with other stakeholders to deliver integrated approaches addressing environmental, social, public health-related, climate-adaptive and climate-resilient interventions in multiple sectors. The organisation acknowledges the challenges and significance of addressing environmental issues and risks. International Medical Corps collaborates closely with local communities and authorities to ensure a comprehensive understanding and minimal environmental impact. International Medical Corps (UK)'s US affiliate, International Medical Corps, is working to integrate a commitment to maintaining environmental standards in its Code of Conduct, which is subscribed to by all employees, volunteers, suppliers, and sub-partners.

International Medical Corps, recognised as a leader in the field, has taken the proactive step of developing checklists for monitoring ECHO MER (Minimum Environmental Requirements) compliance in WASH and is currently implementing them across country programmes. Country teams conduct risk and impact assessments related to healthcare waste and expired medicine disposal on a project-specific basis and provide recommendations for controlling and mitigating these impacts through tailored interventions. These interventions encompass capacity building, utilisation of alternative energies, prevention of environmental degradation through sustainable groundwater use, greening and solarization of groundwater resources, health facility-based cold chains, soaking water, open defecation prevention, and environmental health (safe domestic and medical waste management at the health facility and community levels). These initiatives aim to positively influence the targeted communities' knowledge, attitude, and behaviour.

The organisation has proudly committed to co-signing the global pledge on Energy and Infrastructure, emphasising our dedication to adopting cost-efficient, environmentally sustainable solutions. Our primary focus lies in supporting climate adaptive, climate resilient and sustainable WASH (Water, Sanitation, and Hygiene) systems designed to effectively address water scarcity and floods and mitigate climate change while harnessing the potential of renewable energy options. Notably, the successful implementation of alternative energy and green initiatives for International Medical Corps-supported solar-powered communal water systems has resulted in sustained access to water for more than 432,626 community members, preserving over 1,650,384 litres of fuel in 2023. Furthermore, in Damboa, Nigeria, International Medical Corps' innovative rainwater harvesting initiative utilising a surface dam has significantly impacted the community, providing multiple benefits, including clean water to an IDP camp, contributing to groundwater recharge, and alleviating stress on scarce groundwater resources.

The Charity is dedicated to upholding high environmental compliance standards and will persist in supporting a cautious approach to environmental challenges. The organisation will undertake initiatives to encourage greater environmental responsibility and promote developing and disseminating environmentally friendly technologies. The organisation contributed to the development of donor minimum environmental requirements, and implemented environmental assessment guidance for the International Medical Corps (UK) donors of Global Affairs Canada and UNICEF for Climate Resilience. International Medical Corps' strategy is designed to comply with various policies, global standards, and management practices. It addresses explicitly environmentally sensitive activities such as water supply, sanitation, and biomedical waste management.

The International Medical Corps has developed comprehensive guidelines to reduce its environmental impact, especially in logistics, the supply chain, and WASH infrastructure interventions. This includes transporting goods and staff, sourcing, packaging, and power supply. The organisation is committed to implementing best practices and recommendations from esteemed agencies such as Groupe URD, IFRC, WHO, and WFP. Additionally, International Medical Corps is actively involved in initiatives like "WREC" (Waste Management And Measuring, Reverse Logistics, Environmentally Sustainable Procurement And Transport, And Circular Economy) and WORM (the "Joint Initiative" that involves collaborating with other humanitarian organisations to review, develop, and share tools and methodologies aimed at reducing the carbon footprint of operations. The Waste in Humanitarian Operations: Reduction and Minimisation (WORM) EU-funded project focuses on waste management during emergencies. International Medical Corps is leading efforts to identify best practices for waste management during Emergency Medical Team deployments.

Since 2022, International Medical Corps measure its CO₂ emissions generated globally by transport (international shipment and vehicles) and power production (including since 2023 power grid – scope 2 emissions), and also international travels emissions. The results are used to identify improvement opportunities and initiatives to be developed in close collaboration with country teams (such as carpooling or solarization of facilities).

International Medical Corps, as member of the Fleet Forum, has committed to report fleet related emissions on annual basis (enabling comparison with other organisations), promote vehicle sharing with other INGO and transition to vehicles with lower negative impact on the environment (i.e., EURO 3 or higher).

International Medical Corps continues to develop and disseminate eLearning to improve awareness and provide solutions for emissions reduction. In 2024, an additional training module was developed promoting sustainable practices in warehouse and stock management.

The Charity offers staff environmentally friendly initiatives such as the Cycle to Work Scheme, which is about promoting an alternative way to travel to work and allowing staff to work from home on some days as part of its flexible working policy, contributing to staff welfare and less pollution due to reduced daily commute to work.

The Charity was a low-energy user during the reported period and is not reporting under the UK Government's Streamlined Energy and Carbon Reporting (SECR) requirements.

STATEMENT ON MODERN SLAVERY

International Medical Corps (UK) publishes its modern slavery statement every year, committing to prevent modern-day slavery and human trafficking within the organisation and its supply chains. The Charity actively and continuously works with its affiliates to reduce and eliminate this risk. New employees are informed about organisational policies that contribute towards eliminating modern day slavery by the Human Resources function during staff onboarding orientation. Additionally, all employees are provided with annual training about the prevention of trafficking in persons, sexual exploitation and abuse, and child labour. Related information is made available to employees on the organisation's intranet, as well as through posters displayed in all field and headquarters offices. In addition, International Medical Corps' Global Safeguarding Policy has been updated, made pursuant to section 54(1) of the Modern Slavery Act 2015 (UK). It mandates that all suspicions are reported and are then reviewed and investigated by the Ethics and Compliance Investigation Unit and the Safeguarding Case Team.

In 2017 International Medical Corps revised the vendor Code of Conduct which must be signed by any supplier before entering into business with International Medical Corps. It includes a chapter on the prohibition of human trafficking. Provisions are also inserted in procurement Master Terms and Conditions. Failure to comply constitutes a breach of an essential term of the Contract, leading to revoking the vendor's registration with International Medical Corps and inclusion of the company on the watch list maintained by our Ethics & Compliance department.

KEY MANAGEMENT PERSONNEL

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

International Medical Corps (UK)-contracted staff:

- Senior Director of International Programmes

- Senior Director of Finance, Grants and Contracts
- Senior Director of Human Resources

International Medical Corps-contracted staff:

- Chief Operating Officer
- Vice President, Finance and Administration
- Chief Advancement Officer
- Vice President, Domestic and International Affairs

For the purposes of setting employee remuneration, delegation has been given to the Charity's Managing Director, who is also the Administrative Director for this purpose. In setting the pay and benefits of the UK-contracted senior management team, the Managing Director refers to the company's pay policy, which is periodically reviewed. Salaries and benefits are benchmarked against reliable industry data. The salary scale, including the pay policy, is approved by the Managing Director and in line with the Charity's pay policy.

The remuneration of the Managing Director is set by the trustees and in line with the Charity's pay policy and scale.

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 Practices, or GAAP).

Company law requires the trustees to prepare financial statements for each financial year that 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 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 charity 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 trustee 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 they ought to have taken as a trustee to make themselves 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

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

- providing timely and appropriate humanitarian aid to vulnerable victims of wars and disasters;
- building the capacity of local healthcare providers to improve the standards of healthcare for local communities and create more sustainable systems;
- contributing to the UK's agenda for international development and, in particular, the achievement of the Sustainable Development Goals, including the prevention of and response to violence against women and girls;

- contributing to the containment and reduction of infectious diseases globally; and
- contributing to the understanding of the impact of various health issues affecting the vulnerable, through the UK/EU media and humanitarian networks.

INTERNATIONAL MEDICAL CORPS (UK)'S GOALS

To mobilise sufficient resources to realise International Medical Corps (UK)'s charitable objectives and humanitarian mission.

As per International Medical Corps (UK)'s Memorandum of Association, the objectives of the organisation are to:

- a. relieve suffering, sickness and poverty throughout the world by providing medical aid, healthcare training and programmes, and to promote good health and preserve lives by providing medical supplies and trained medical professionals particularly, in areas that have suffered through war and conflict; and
- b. further the activities of International Medical Corps, a non-profit corporation registered in California USA, as are exclusively charitable and that may advance the objective set in to (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:

- Strengthening health capacity
- Emergency response and preparedness
- Mental health and psychosocial support
- Woman and children's health
- Clean water, sanitation and hygiene
- Nutrition and food security

MONITORING OF ACTIVITIES

Monitoring of project activities at International Medical Corps aims to achieve three objectives: 1) assess progress of project activities/outputs; 2) identify deviations and gaps/ weaknesses during project implementation and any problems or obstacles encountered; and 3) provide targeted and relevant monitoring data that allows International Medical Corps to develop an action plan to overcome gaps and weaknesses throughout the life of the project.

International Medical Corps (UK) continuously monitors programme activities through effective internal monitoring, supervision and reporting mechanisms. It provides regular programmatic and financial reports on project activities and progress as required by all its institutional donors and other stakeholders. Additional internal programme reports

and departmental updates supplement this information for day-to-day management. The Charity also maintains automated recruitment, financial and programme records to track performance and grant compliance.

Routine project monitoring is conducted at the field levels by the project technical and Monitoring & Evaluation (M&E) teams through standard monitoring and reporting procedures and forms to monitor services and goods provided by International Medical Corps. Monitoring activities include monitoring the quantity and quality of services and goods provided, either through supportive supervision, observation, record review, alternative methods, and teams use standardised checklists and tools that are appropriate for the context. Some activities that are particularly sensitive may be monitored indirectly, such as through client satisfaction surveys or review of anonymised case management files by the appropriate and authorised personnel. The project team focuses more on the technical aspects of services provision to ensure quality and compliance with minimum international standards. However, the M&E team conducts independent monitoring of services International Medical Corps provides at various facilities, including health facilities, child friendly spaces, and women and girls spaces. The findings from monitoring are regularly shared with the project team for their follow-up and corrective measures.

The International Programmes team through the technical teams reinforces supportive supervision and monitoring and communications systems and procedures to track results. International Programmes collaborates with the Global Monitoring, Evaluation and Learning (MEAL) unit in the collection and analysis of programme achievements and addresses constraints to progress in real time through visits, calls and written communications. Monthly calls with country teams also review the achievement of project targets and progress, spending and procurement, as presented by project managers and their technical, financial and logistics colleagues. In addition, International Programme Senior Directors, Directors, Programme Managers and Programme Officers maintain regular communications with country teams to identify and address risks and provide support, working with regional platform department focal points.

Staff, in various capacities, visited country programmes during the year to provide relevant technical support. During the reported period, countries visited included Afghanistan, Ethiopia, Egypt, Gaza, Jordan, Libya, Kenya, Morocco, Pakistan, Somalia, South Sudan, Tunisia, Poland, Ukraine, and Zimbabwe where we provided field teams with programmatic and technical support.

The Charity's affiliate delivers programmes through four geographical, cross-functional platforms (Middle East and

Europe, Central & Southern Africa, North & East Africa and Asia, and Global), which include dedicated interdisciplinary teams of specialists in programmes, technical, finance, resource development, communications, logistics and supply chains, human resources and security. Functional specialists provide effective and efficient business support to field programmes and facilitate speedy and effective responses to disasters in the respective regions.

International Medical Corps (UK)'s Managing Director is a member of the global executive leadership team, and advises and helps evaluate opportunities, challenges and risks associated with implementation of programmes undertaken by the Charity's US affiliate. In addition, International Medical Corps (UK) relies on its US affiliate's Internal Audit, Compliance and Safeguarding Task Force's independent field reviews, evaluations and reports. 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 International Medical Corps' staff brief the trustees during board meetings on key developments and on risk mitigation measures that have been put in place.

STATEMENT ON CONTRIBUTIONS BY VOLUNTEERS

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.

STRATEGIC REPORT

ACHIEVEMENTS AND PERFORMANCE

Organisational Performance

Over the course of the financial year to June 2024, International Medical Corps (UK) provided assistance valued at \$135,518,451 (2023: \$121,596,255) to vulnerable populations in 23 countries (2023: 23). This included the donated medical and other supplies received for distribution.

International Medical Corps (UK) supported, through its US affiliate, 2,538 staff positions in 23 countries (2023: 2,760 staff positions in 23 countries), providing essential services to beneficiaries. Globally, International Medical Corps' activities served 16,417,440 unique beneficiaries in 2023. Globally, International Medical Corps' activities served 8.5 million direct beneficiaries between 1 July 2023 and 31 December 2023 and 8.7 million direct beneficiaries between 1 January 2024 and 30 June 2024.*

International Medical Corps (UK) contributed 32% of global funding to this mutual achievement.

*Please note that beneficiary totals may overlap across calendar years

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.

GOAL	COMMENT
Timely and efficient delivery of programme activities	The Charity successfully delivered activities of the value of \$135M (2023: \$121M).
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.
Diversification of income	The Charity continued to be funded by a wide range of government and UN agencies, as well as private sector donors.

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

GOAL	COMMENT
Staff are motivated to achieve and exceed performance expectations	<p>Charity continues to use performance management and development system which provides platform for managers and their employees to engage in goal setting, performance discussions and provide feedback. The Charity believes that managing employee performance effectively is fundamental to staff motivation, engagement and helping them realise their full potential.</p> <p>Staff continue to receive in-house and external trainings on donor regulations and industry best practices to ensure appropriate oversight.</p> <p>Wellbeing and engagement initiatives including flexible working and specifically remote working arrangements are in place to ensure staff safety and wellbeing.</p>
Improve on the creation of opportunities for effective intercompany collaboration and improved quality of programmes	<p>Intercompany, interdepartmental, HQ and field collaborations were enhanced to consider opportunities and challenges in wider contexts.</p> <p>Each International Medical Corps (UK) team worked closely with its peers in the US to ensure alignment where appropriate.</p>

RISK: 'Minimise risk whilst anticipating threats'

GOAL	COMMENT
<p>Strengthened systems for identifying and raising areas of concern in a timely manner to the senior management team</p>	<p>The Charity continued to maintain its risk register and controlled the field operations through regular reviews, cross-team participation and reference to the Charity's scorecard mechanism.</p> <p>The Charity's US affiliate continues to implement, at field and HQ levels, Logistics Management Software to strengthen assets, procurement and inventory management and controls. Systems enable the creation of exception reports highlighting any potential gaps or risks to be addressed.</p> <p>In addition, HQ Logistics & Supply Chain team is maintaining, in collaboration with the field teams, a register to anticipate, map potential risks and determine / implement mitigation measures. Risks identified as major are elevated to the appropriate management group.</p> <p>Procurement above set thresholds are reviewed through a system called PRAMS (Procurement Review & Approval Management System) at the field and HQ levels. The system enables teams to identify procurements requiring corrections or improvements prior to signing contracts with vendors, and support the analysis of potential capacity building requirements, or business clarifications.</p> <p>In addition, the Charity has worked with its US affiliate to administer and reinforce its safeguarding mechanisms.</p> <p>The Charity's implementing affiliate also implemented a Human Resources Information System (HRIS) for talent acquisition, staff performance management and training. The HRIS is a global integrated platform used to streamline recruitment, learning, performance management and compensation process and management.</p>
<p>Cyber risk is a concern as it involves the potential for data breaches, unauthorized access, and other cyber threats that can compromise systems and confidential data</p>	<p>To mitigate against these risks and limit exposure, the organisation has implemented robust security measures such as encryption, multi-factor authentication, and vulnerability scanning to safeguard and protect its cloud infrastructure. International Medical Corps UK has modernised its infrastructure by migrating to the cloud its applications and data.</p>
<p>Mitigate financial loss through strict controls Strict controls were maintained and updated as necessary to ensure adherence to internal procedures, requirements of donors and the requirements of the Charity Commission</p>	<p>Automation and strict control over the treasury platform have ensured minimisation of foreign exchange and currency exposure risks during turbulent global economic environment.</p>

OPERATIONS: ‘Delivering the mission efficiently, through discipline and thoroughness.’

GOAL	COMMENT
Regular review of programme performance	<p>Programme, MEAL and Technical Unit staff at all levels monitor risks to implementation on an ongoing basis through organisational systems and direct field visits with local stakeholders to ensure effective programme delivery.</p> <p>The Charity’s affiliate’s cross-functional platforms continue to improve the effectiveness and efficiency of operational support to field programmes, as well as facilitate speedy and effective responses to disasters in the respective regions.</p>
Increased monitoring and evaluation activities, training and programme development	<p>Programme staff collaborate with other departments within the cross-functional platforms in decision making related to country programme issues.</p> <p>During the reporting period, the Charity, in collaboration with its US affiliate, submitted 167 proposals.</p> <p>The Charity’s US affiliate’s Internal Audit conducted in-country audits in Zimbabwe, Ethiopia, Central African Republic, Yemen and Cameroon.</p>
Secure multi-year grants from donors	<p>Ongoing discussions were had with FCDO, Global Affairs Canada (GAC), Ministry of Foreign Affairs France and other donors on multi-year grants.</p>

DONORS: ‘Accountable to a growing group of donors’

The Global Programme Unit continued to provide due diligence on the Charity’s grants and contracts to ensure compliance with the standards and regulations specified by its donors, with support from the US affiliate’s Compliance team and the Internal Audit. Additionally, International Medical Corps continues to be a member of the Core Humanitarian Standard (CHS) Alliance and continues to monitor its compliance with the Humanitarian Accountability Framework.

GOAL	COMMENT
Improve high-level donor interaction	<p>Robust interaction with International Medical Corps (UK)’s donors continued at all levels throughout the year.</p>
To improve on effective donor intelligence	<p>Regular communications with donor agencies were maintained, to ensure that relevant opportunities were pursued.</p> <p>Active participation in UK NGO forums and direct communication with FCDO were prioritised, to ensure that humanitarian relief is prioritised following the UK’s exit from the European Union and other governmental efforts to shape the sector.</p>
Compliance with reporting deadlines and improved performance on complementary information requests	<p>The Charity remains compliant with donor reporting requirements.</p>

INNOVATION: 'Challenging the norm to minimise inefficiency and maximise impact'

GOAL	COMMENT
Encouraging a culture of creativity and problem solving	Organisation-wide information management systems are being used to obtain real-time reports integrating key indicators across finance, programme delivery, human resources and logistics, to ensure effective implementation of programmes. A variety of projects continue, with the aim of improving the efficiency of key areas affecting delivery of programme activities. Cross-functional platforms also ensure that real-time information is available and applied in decision making and operations.

External representation and engagement

International Medical Corps (UK)'s Technical Unit members continued to represent the Charity in forums both within the UK and abroad, and make contributions to global discussions on sectoral issues.

INTERNATIONAL MEDICAL CORPS (UK)'S HUMANITARIAN ASSISTANCE FOR THE FINANCIAL YEAR 2023/2024

EMERGENCY RESPONSE AND PREPAREDNESS

In Syria, International Medical Corps' mobile medical teams responded rapidly since the devastating February 2023 earthquakes. We're continuing to provide healthcare services and tackle emerging crises—such as cholera outbreaks—and simultaneously building local capacity through training for local health workers and volunteers.

HEALTHCARE SERVICES SUPPORT

In Yemen, where around half of the country's health facilities are no longer functioning after a decade-long civil war, we're rehabilitating these essential services. We're also delivering essential medical and non-medical supplies, including specialist diagnostic equipment.

NUTRITION AND FOOD SECURITY

In Ethiopia, where malnutrition is widespread, we're treating vulnerable people, raising awareness and distributing food in schools and communities. We have screened 471,818 people for malnutrition, providing lifesaving care to 56,782 children under five and 56,213 pregnant and lactating women.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

In Afghanistan, we're providing crucial MHPSS services. This includes supporting a drug addiction treatment centre in Kabul, where we've helped 401 women and children with integrated evidence-based treatment, rehabilitation and psychosocial support.

WATER, SANITATION AND HYGIENE (WASH)

In Ukraine, where the conflict has damaged infrastructure, we're rehabilitating water systems. This includes protecting access to safe water for 86,500 people in Sumy and 69,000 in Kharkiv and Mykolaiv by installing new water supply and sewerage pumps.

FAMILY AND COMMUNITY HEALTH

In Jordan's Azraq and Zaatari refugee camps, we're providing comprehensive health and nutrition services for women and children. In the first half of 2024, we provided 14,716 paediatric consultations, gave inpatient care for 720 children, and counselled 482 mothers in infant and young-child feeding practices.

WOMEN'S AND CHILDREN'S HEALTH AND PROTECTION

In South Sudan, where conflict and displacement have led to widespread violence against women and girls, our GBV prevention and response work and livelihoods assistance programmes are empowering communities. Over the past eight years, we've also distributed 79,451 dignity kits.

INSTITUTIONAL DONOR SUPPORT FOR INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

To fulfil its mission and to undertake the abovementioned activities, International Medical Corps (UK) received grants from the following private and international donor agencies during the year. The Charity gratefully acknowledges their support.

ACF Canada	Action Against Hunger, Canada
ACF US	Action Against Hunger, US
DAHW	Deutsche Lepra- und Tuberkulosehilfe e.V.
DRC	Danish Refugee Council
FCDO	Foreign, Commonwealth & Development Office
EC	European Commission
France MOFA	France Ministry of Europe and Foreign Affairs
GAC	Global Affairs Canada
GIZ	The Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
IOM	International Organization for Migration
IRC	The International Rescue Committee
Islamic Development Bank	Islamic Development Bank
King Salman Humanit. Aid	King Salman Humanitarian Aid and Relief Center
Ministry of Health CAR	Ministry of Health CAR
UAE MoFA	Ministry of Foreign Affairs and International Cooperation, UAE
Plan Int. Australia	Plan International Australia
Plan Int. Netherlands	Plan International Netherlands
Save the Children	Save the Children
The Power of Nutrition	The Power of Nutrition
The Start Fund	The Start Fund
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WFP	World Food Programme
WHO	World Health Organisation
WV	World Vision
ZOA Netherlands	Stichting ZOA

PRIVATE DONOR SUPPORT OF INTERNATIONAL MEDICAL CORPS (UK) PROGRAMMES

Andor Charitable Trust	AstraZeneca UK Limited
Church of Jesus Christ Latter Day Saints (LDS)	GM Morrison Charitable Trust
Pocklington School	Thea Pharmaceuticals Ltd
Alwaleed Philanthropies	Vitol Foundation
GDS Services International Limited (GDSSIL)	

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 programmes across all countries where they work, as well as funds to fill gaps, support immediate emergency responses and implement innovative programmes.

The Charity responds to requests for proposals issued by institutional donors such as FCDO, 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 programmes. International Medical Corps (UK) undertakes due diligence on both the financial and reputational dealings of potential partners before accepting donations.

International Medical Corps (UK) also utilises multiple fundraising channels, with the goal of raising funds from as diversified a base of supporters as possible. These channels include annual giving programmes and online appeals, in addition to outreach through social media, the website and other reputable online platforms that display clear terms and conditions, including General Data Privacy Regulations (GDPR) compliance.

International Medical Corps (UK) and its affiliate did not employ any commercial fundraising firm to solicit individuals via telephone or door to door during the reported period. Protecting vulnerable people and other members of the public is a key consideration in cultivating a supporter base for the Charity's work. The Charity and its US affiliate actively monitor all efforts to raise funds from the public, in particular vulnerable people. International Medical Corps (UK) did not receive any complaints about its fundraising activities during the reported period.

Although International Medical Corps (UK) is not registered with the UK Fundraising Regulator, the Charity has regard for and adheres to the principles and practices set out in the Code of Fundraising Practices. International Medical Corps (UK) and its affiliate are in compliance with GDPR and protect individuals' personal information. The communications team of International Medical Corps (UK) monitors and moderates our email and social media accounts, and any complaints or concerns regarding fundraising activities are reviewed and responded to by senior management. Fundraising activities also are monitored by the senior leadership of International Medical Corps (UK), which shares regular reporting with the trustees.

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

A culture of risk management and mitigation is embedded in the organisation. 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 and the level of impact it would have on the organisation and outlines 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.

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 which are reviewed periodically. It is also recognised that the nature of the Charity's work requires active acceptance and management of 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

and major disruptions 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 risks, including 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 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 continues to make sustained efforts to expand its supporter base. The Charity intends to continue to work with its institutional donors 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 of its cost structure.
Adverse payment terms offered by donors affecting the liquidity of the Charity	The Charity's liquidity position is closely monitored, and close collaborations are maintained with donor stakeholders to ensure life-saving activities are not impacted by liquidity issues.
Future funding opportunities affected by Brexit and developments in the UK's Foreign and Development policies	International Medical Corps (UK) continues to pursue European Union funding streams where eligible. At the same time the Charity continues to engage with FCDO & other institutional donors on existing and potential portfolios.
Inadequate assessment, resulting in poor programming decisions and implementations	International Medical Corps continues to invest in country-specific assessments, to ensure a relevant and quality orientated programme design.
Exposure to movement in foreign currency rates, affecting international operations	The Charity's principal currency exposures arise from translations of European and other donor monies received into US dollars, the main operational currency advanced to its field missions overseas. The continued fluctuations of currencies against USD can adversely affect International Medical Corps (UK)'s ability to deliver programmes sustainably. Within this context, global treasury management, consisting of International Medical Corps' and International Medical Corps (UK)'s senior staff, created in July 2018, continues to ensure effective use of donor funds.
Operations in sanctioned countries through the Charity's US affiliate	Donors and stakeholders are kept up to date with developments and emerging risks affecting programme implementation in sanctioned countries.

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 and other programmatic management systems with its US affiliate. Efficient controls, budgeting, accounting, financial reporting and auditing systems are employed throughout the organisation, to meet the management and programmatic objectives at various levels, and to be accountable to its donors and supporters.

This year, International Medical Corps (UK)'s total income was \$123,269,954 (2023: \$125,352,674). Of this, the total cash income received from institutional donors and supporter base was \$100,502,430 (2023: \$112,677,278). International Medical Corps (UK) was able to secure \$19,490,270 (2023: \$12,315,666) of gifts-in-kind, comprising food, medicines and supplies.

During the reporting period, International Medical Corps (UK) supported training and assistance programmes in 23 (2023: 23) countries through its US affiliate. The Charity's programme expenditures can be disaggregated into the following humanitarian contexts.

	FY 2024	FY 2023
Strengthening health capacity	28%	30%
Emergency response and preparedness	34%	34%
Mental health and psychosocial support	4%	3%
Women & children's health	9%	12%
Water, sanitation and hygiene	5%	8%
Nutrition & food security	20%	13%

Financial Position

The Charity had restricted funds of \$16,909,499 as of 30 June 2024 (2023: \$29,447,322) and unrestricted funds of \$1,166,039 as of the same date (2023: \$885,850). International Medical Corps (UK) receives relevant institutional funding in meeting its restricted charitable expenditure. The balance of free reserves as of 30 June 2024 is \$1,115,947 (2023: \$815,000). Free reserves are unrestricted funds less the net book value of the fixed assets.

International Medical Corps (UK) committed resources from unrestricted reserves to provide adequate support for growth in charitable activities and to ensure compliance with growing donor regulations. International Medical Corps (UK) continues to rely on its US affiliate's commitment to meet shortfalls in programmes that do not provide full overhead cost recovery.

Reserves Policy

International Medical Corps (UK) requires reserves to:

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

The Charity aims to maintain a level of unrestricted reserves equivalent to six month's operating expenditure of the Charity's HQ offices, which is \$1,115,900 for FY 2023–24 and this is currently being achieved. Available unrestricted-fund balances in excess of the operational reserves' requirements are utilised to meet the other purposes as outlined above. Operating expenditure considered for reserves excludes transfers made for overseas programmes.

International Medical Corps (UK) continues to apply assessment of new opportunities and accepts projects that support its overhead costs required to maintain acceptable oversight of programme implementation, therefore mitigating the risk of insufficiently resourced projects. International Medical Corps (UK) considers accepting projects that do not fully cover its costs with its

US affiliate to ensure sustainability of coverage of any gap in funding. As of 30 June 2024, the Charity held restricted reserves of \$16,909,499 (2023: \$29,447,322). This represents the total funds received for specific projects that are yet to be spent at 30 June 2024, including projects responding to Syria and various other crises. The decrease in restricted funds in the reported period is due to timing difference of receiving donor funds with a number of projects starting in the last months of the previous reported period and continued in the current reporting period. These funds have been excluded from specific reserves policy, as they are not for the purposes of general working capital.

As of 30 June 2024, the balance of free reserves was \$1,115,947 (2023: 815,000). 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 risks identified above as follows.

- In collaboration with its affiliate, the Charity profiles income streams and undertakes projects with acceptable terms. Also, it looks to its affiliate to cover programme funding gaps that the affiliate has reviewed and considered as acceptable.
- 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 is part of global treasury platform.
- The Charity's operational flexibility has enabled it to address risks caused by political changes, including Brexit and the effects of the pandemic.

Section 172 Statement

International Medical Corps (UK) complies with section 172 under the Companies Act 2006. It requires our Board of Trustees act in the way that they consider, in good faith, what would be most likely to promote International Medical Corps (UK)'s impact for our beneficiaries, while considering the long-term effect of decisions on International Medical Corps (UK)'s stakeholders, including its beneficiaries, employees, suppliers, partners, the communities with which it works and their environment.

Engagement with employees.

International Medical Corps (UK)'s internal stakeholders are its employees. Enhancing employee engagement is an integral part of the culture of the Charity and its

implementing affiliates. Senior management are actively involved in the engagement of colleagues through regular electronic communications, staff meetings and periodic Town Hall meetings that include employees working across the world. The trustees receive updates on employee matters from the Managing Director during board meetings. International Medical Cops (UK) undertakes regular salary reviews to ensure that salaries for the UK contracted staff are competitive within the sector in the UK.

Engagement with Other Stakeholders

- Our beneficiaries. As a recognised first responder, we provide emergency relief, often within hours, to those hit by disaster, disease and conflict, no matter where they are, no matter what the conditions. International Medical Corps (UK) continuously monitors programme activities through effective internal reporting. We have a strict Code of Conduct and safeguarding processes in place to ensure the security and safety of our beneficiaries.
- Our partners in project delivery. Our partnerships are critical to ensuring that we deliver programmes in the most hard-to-reach locations. We collaborate with other international and local NGOs when these partnerships bring greater benefits to the people we serve.
- Our supporters and donors. Our donors are primarily institutional, including the UK Foreign, Commonwealth and Development Office (FCDO), UN agencies, Global Affairs Canada and many others. We are committed to delivering timely, high-quality, lifesaving humanitarian assistance, and to reporting on the impact of our work. We report to our donors, and publicise our work on our website, social media and other platforms.
- Our suppliers. We are committed to eradicating modern slavery and trafficking in persons and engage with our suppliers to promote the highest standards.
- Our wider communities and the environment. Our policies and procedures include safe environmental protection in the different countries where we work. Our programmes aim to reduce excess morbidity and mortality associated with potential exposure to environmental factors. For example, on a project-by-project basis, our teams assess the risks associated with healthcare waste and with the disposal of expired medicines.

INTERNATIONAL MEDICAL CORPS (UK) PLANS FOR 2024/2025

International Medical Corps (UK) plans are to:

1. expand opportunities for applied research to improve the impact of providing healthcare for vulnerable communities, in line with its mission;
2. achieve institutional income of \$128 million during the 12-month period to 30 June 2025;
3. continue to expand the organisation's number of partnerships and non-traditional donors;
4. expand the organisation's global profile through increased awareness of its activities;
5. review and strengthen current internal processes employed by its US affiliate, with a view to increasing organisational efficiency; and
6. continue to work with its US affiliate to apply new technology and systems that mitigate risks specific to the sector in general.

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



Approved by the board of trustees on:

13 December 2024

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 2024 which comprise the statement of financial activities, the balance sheet, and 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 2024 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

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

OTHER INFORMATION

The trustees are responsible for the other information. The other information comprises the impact report for International Medical Corps and its affiliates worldwide included in pages 8 to 37, together with information included in the trustees' report, including the strategic 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.

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 course of 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 this gives rise to a material misstatement in the financial statements themselves. 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, which is also the directors' report for the purposes of company law and includes the strategic report, for the financial year for which the financial statements are prepared is consistent with the financial statements; and

- the trustees' report, which is also the directors' report for the purposes of company law and includes 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. 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 (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, 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 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.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- The engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities, and skills to identify or recognise non-compliance with applicable laws and regulations;
- We identified the laws and regulations applicable to the charitable company through discussions with management and from our knowledge and experience of the charity sector;
- We focused on specific laws and regulations in both the UK and overseas, which we considered may have a direct material effect on the financial statements or the activities of the charitable company. These included but were not limited to the Charities Act 2011, the Companies Act 2006, Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their financial statements in accordance with the Financial Reporting Standard applicable to the United Kingdom and Republic of Ireland (FRS 102) (effective 1 January 2019);
- We have assessed the processes in place to ensure that the implementors of programmes are aware of and comply with UK laws and regulations;
- We have assessed the processes in place to ensure that in country laws and regulations are followed; and
- We assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and review of minutes of trustees' meetings.

We assessed the susceptibility of the charitable company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- Making enquiries of management as to where they considered there was susceptibility to fraud,

- their knowledge of actual, suspected, and alleged fraud; and
- Considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.
- To address the risk of fraud through management bias and override of controls, we:
- Performed analytical procedures to identify any unusual or unexpected relationships;
- Tested and reviewed journal entries to identify unusual transactions;
- Tested the authorisation of expenditure;
- Assessed whether judgements and assumptions made in determining the accounting estimates were indicative of potential bias; and
- Investigated the rationale behind significant or unusual transactions.
- In response to the risk of irregularities and noncompliance with laws and regulations, we designed procedures which included, but were not limited to:
- Agreeing financial statements disclosures to underlying supporting documentation;
- Reading the minutes of meetings of trustees; and
- Enquiring of management as to actual and potential litigation and claims.

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance. Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities is available 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)



17 December 2024

For and on behalf of Buzzacott LLP, Statutory Auditor
130 Wood Street
London
EC2V 6DL

STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 30 JUNE 2024

	Notes	Unrestricted funds \$	Restricted funds \$	2024 Total funds \$	Unrestricted funds \$	Restricted funds \$	2023 Total funds \$
Income and expenditure							
Income from:							
Donations and legacies	1	1,741,342	21,026,182	22,767,524	811,526	13,033,107	13,844,633
Charitable activities	2	–	100,502,430	100,502,430	–	111,508,041	111,508,041
Total income		1,741,342	121,528,612	123,269,954	811,526	124,541,148	125,352,674
Expenditure on:							
Raising funds	3	8,465	672	9,137	13,598	1,381	14,979
Charitable activities	4	1,452,688	134,065,763	135,518,451	662,059	120,934,196	121,596,255
Total expenditure		1,461,153	134,066,435	135,527,588	675,657	120,935,577	121,611,234
Net income/(expenditure)		280,189	(12,537,823)	(12,257,634)	135,869	3,605,571	3,741,440
Net movement in funds		280,189	(12,537,823)	(12,257,634)	135,869	3,605,571	3,741,440
Fund balances brought forward							
at 1 July 2024		885,850	29,447,322	30,333,172	749,981	25,841,751	26,591,732
Fund balances carried forward							
at 30 June 2024		1,166,039	16,909,499	18,075,538	885,850	29,447,322	30,333,172

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 AS AT 30 JUNE 2024

	Notes	2024 \$	2024 \$	2023 \$	2023 \$
Fixed Assets					
Tangible assets	8		50,092		70,850
Current assets					
Stock	9	1,325,503		2,025,295	
Debtors	10	8,140,497		10,446,496	
Cash at bank and in hand		8,818,268		18,055,618	
		18,284,268		30,527,409	
Creditors: amounts falling due within one year	11	(258,822)		(265,087)	
Net current assets			18,025,446		30,262,322
Total net assets			18,075,538		30,333,172
The funds of the charity					
Restricted funds	12		16,909,499		29,447,322
Unrestricted funds			1,166,039		885,850
			18,075,538		30,333,172

Approved by the trustees and signed on their behalf by:

Andrew Géczy, Chair



Approved on: 13 December 2024

International Medical Corps (UK): A company limited by guarantee, Company Registration No. 04474904 (England and Wales)

STATEMENT OF CASH FLOWS YEAR TO 30 JUNE 2024

	Notes	2024 \$	2023 \$
Cash flows from operating activities:			
Net cash provided by operating activities	A	(9,220,066)	6,433,031
Cash flows from investing activities:			
Purchase of tangible fixed assets		(17,284)	(43,150)
Net cash used in investing activities		(17,284)	(43,150)
Change in cash and cash equivalents in the year		(9,237,350)	6,389,881
Cash and cash equivalents at 1 July 2023	B	18,055,618	11,665,737
Cash and cash equivalents at 30 June 2024	B	8,818,268	18,055,618

Notes to the statement of cash flows for the year to 30 June 2024

A Reconciliation of net movement in funds to net cash used in operating activities

	2024 \$	2023 \$
Net movement in funds (as per the statement of financial activities)	(12,257,633)	3,741,440
Adjustments for:		
Depreciation charge	38,041	33,340
(Increase)/decrease in stocks	699,792	(1,495,628)
(Increase)/decrease in debtors	2,305,999	4,135,896
Increase/(decrease) in creditors	(6,265)	17,983
Net cash provided by / (used in) operating activities	(9,220,066)	6,433,031

B Analysis of cash and cash equivalents

	2024 \$	2023 \$
Cash at bank and in hand	8,818,268	18,055,618
Total cash and cash equivalents	8,818,268	18,055,618

PRINCIPAL ACCOUNTING POLICIES 30 JUNE 2024

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 2024.

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) (effective 1 January 2019), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

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:

- The estimation of the value of donated goods distributed in the year and undistributed at the year-end.
- The estimation of the recoverability of accrued income balances.
- The estimation of unrealised foreign exchange difference.
- The treatment of intercompany balances with the charity's implementing affiliates.

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 of a period of one year from the date of approval of these financial statements.

The Charity has free reserves of \$1,115,947 (2023: \$815,000), which is 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.

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.

Food and other non-pharmaceutical stocks are valued according to the value placed on the items by the donor.

Pharmaceutical goods received are accounted for at fair value to the Charity with reference to market sources.

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:
 - i. Technical advisory services
 - ii. Programme management services
 - iii. 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) Support 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:

- Computers – three years
- Furniture, fixtures and fittings – five years
- Servers – five years

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.

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% to 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 make additional contributions to meet legal requirements and 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.

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.

BASIC FINANCIAL LIABILITIES

Basic financial liabilities, including creditors, bank loans, loans from fellow group companies. 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 2024

1 Donations and legacies

	Unrestricted funds \$	Restricted funds \$	2024 Total \$
Donation from International Medical Corps	1,539,048	380,520	1,919,568
Restricted Donations	–	1,155,392	1,155,392
Other Unrestricted Donations	62,581	–	62,581
Donated supplies	–	19,490,270	19,490,270
Donated services	111,481	–	111,481
Interest Income	28,232	–	28,232
2024 Total funds	1,741,342	21,026,182	22,767,524

	Unrestricted funds \$	Restricted funds \$	2023 Total \$
Donation from International Medical Corps	87,217	237,632	324,849
Restricted Donations	–	473,861	473,861
Other Unrestricted Donations	695,376	–	695,376
Donated supplies	–	12,315,666	12,315,666
Donated services	–	5,948	5,948
Interest Income	28,933	–	28,933
2023 Total funds	811,526	13,033,107	13,844,633

2 Income from charitable activities

	Unrestricted funds \$	Restricted funds \$	2024 Total \$
Strengthening health capacity	–	35,087,033	35,087,033
Emergency response and preparedness	–	36,180,602	36,180,602
Mental health and psychosocial support	–	2,810,283	2,810,283
Women & children's health	–	10,059,754	10,059,754
Water, sanitation and hygiene	–	6,364,109	6,364,109
Nutrition and food security	–	10,000,649	10,000,649
2024 Total funds	–	100,502,430	100,502,430

	Unrestricted funds \$	Restricted funds \$	2023 Total \$
<i>Strengthening health capacity</i>	–	35,661,830	35,661,830
<i>Emergency response and preparedness</i>	–	39,141,374	39,141,374
<i>Mental health and psychosocial support</i>	–	5,497,404	5,497,404
<i>Women & children's health</i>	–	15,024,516	15,024,516
<i>Water, sanitation and hygiene</i>	–	9,074,931	9,074,931
<i>Nutrition and food security</i>	–	7,107,986	7,107,986
<i>2023 Total funds</i>	–	111,508,041	111,508,041

3 Expenditure on raising funds

	Unrestricted funds \$	Restricted funds \$	2024 Total \$
Fundraising staff costs	–	–	–
Other fundraising costs	8,465	672	9,137
2024 Total funds	8,465	672	9,137

	Unrestricted funds \$	Restricted funds \$	2023 Total \$
<i>Fundraising staff costs</i>	–	–	–
<i>Other fundraising costs</i>	13,598	1,381	14,979
<i>2023 Total funds</i>	13,598	1,381	14,979

4 Expenditure on charitable activities

	Unrestricted funds \$	Restricted funds \$	2024 Total \$
Strengthening health capacity	411,412	37,968,389	38,379,801
Emergency response and preparedness	497,704	45,932,166	46,429,870
Mental health and psychosocial support	54,375	5,018,179	5,072,554
Women & children's health	129,295	11,932,380	12,061,675
Water, sanitation and hygiene	69,530	6,416,795	6,486,325
Nutrition and food security	290,372	26,797,854	27,088,226
2024 Total funds	1,452,688	134,065,763	135,518,451

	Unrestricted funds \$	Restricted funds \$	2023 Total \$
<i>Strengthening health capacity</i>	<i>200,041</i>	<i>36,540,274</i>	<i>36,740,315</i>
<i>Emergency response and preparedness</i>	<i>221,965</i>	<i>40,545,013</i>	<i>40,766,978</i>
<i>Mental health and psychosocial support</i>	<i>19,403</i>	<i>3,544,304</i>	<i>3,563,707</i>
<i>Women & children's health</i>	<i>82,197</i>	<i>15,014,291</i>	<i>15,096,488</i>
<i>Water, sanitation and hygiene</i>	<i>54,757</i>	<i>10,002,082</i>	<i>10,056,839</i>
<i>Nutrition and food security</i>	<i>83,696</i>	<i>15,288,232</i>	<i>15,371,928</i>
<i>2023 Total funds</i>	<i>662,059</i>	<i>120,934,196</i>	<i>121,596,255</i>

4 Charitable activities (continued)

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 \$	2024 Total \$
Staff costs	41,940,582	2,526,379	44,466,961
Donated supplies and services	20,301,543	–	20,301,543
Auditor's remuneration			
• Statutory audit	–	54,999	54,999
Other costs	64,525,231	6,169,717	70,694,948
2024 Total	126,767,356	8,751,095	135,518,451

	Activities undertaken directly \$	Support costs \$	2023 Total \$
Staff costs	38,375,943	2,077,019	40,452,962
Donated supplies and services	10,820,038	10,826	10,830,864
Auditor's remuneration			
• Statutory audit	–	53,475	53,475
Other costs	63,876,806	6,382,148	70,258,954
2023 Total	113,072,787	8,523,468	121,596,255

4 Charitable activities (continued)

	Activities undertaken directly \$	Support costs \$	2024 Total \$
Strengthening health capacity	35,901,428	2,478,373	38,379,801
Emergency response and preparedness	43,431,664	2,998,206	46,429,870
Mental health and psychosocial support	4,744,994	327,560	5,072,554
Women & children's health	11,282,793	778,882	12,061,675
Water, sanitation and hygiene	6,067,471	418,854	6,486,325
Nutrition and food security	25,339,006	1,749,220	27,088,226
2024 Total funds	126,767,356	8,751,095	135,518,451

	Activities undertaken directly \$	Support costs \$	2023 Total \$
<i>Strengthening health capacity</i>	<i>34,164,949</i>	<i>2,575,366</i>	<i>36,740,315</i>
<i>Emergency response and preparedness</i>	<i>37,909,357</i>	<i>2,857,621</i>	<i>40,766,978</i>
<i>Mental health and psychosocial support</i>	<i>3,313,904</i>	<i>249,803</i>	<i>3,563,707</i>
<i>Women & children's health</i>	<i>14,038,277</i>	<i>1,058,211</i>	<i>15,096,488</i>
<i>Water, sanitation and hygiene</i>	<i>9,351,890</i>	<i>704,949</i>	<i>10,056,839</i>
<i>Nutrition and food security</i>	<i>14,294,410</i>	<i>1,077,518</i>	<i>15,371,928</i>
<i>2023 Total funds</i>	<i>113,072,787</i>	<i>8,523,468</i>	<i>121,596,255</i>

5 Employees and staff costs

Staff costs during the year were as follows:

	2024 Total \$	2023 Total \$
Wages and salaries	2,181,058	1,778,658
Social security costs	222,363	207,527
Other pension costs	122,958	90,834
Total UK staff costs	2,526,379	2,077,019
International Medical Corps Worldwide on International Medical Corps (UK) projects	41,940,582	38,375,943
Total staff costs	44,466,961	40,452,962

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

	2024 No	2023 No
UK Staff	33	28

5 Employees and staff costs (continued)

International Medical Corps (UK) contributes towards 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 2,538 (2023: 2,760).

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

	2024 No	2023 No
£60,000 – £70,000	–	2
£70,001 – £80,000	2	1
£80,001 - £90,000	2	2
£90,001 - £100,000	2	–
£100,001 - £110,000	1	1
£130,001 - £140,000	–	1
£150,001 - £160,000	1	–

Key management personnel comprise those set out on page 43. The total remuneration paid to key management personnel in the year was \$691,617 (2023: \$588,852).

	2024 \$	2023 \$
Wages and salaries	569,251	491,512
Social security costs	72,107	63,142
Employer pension costs	50,259	34,198
Total costs	691,617	588,852

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 (2023- £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	
Total cost at 1 July 2023	201,761
Additions	17,284
Disposals	–
Total cost and 30 June 2024	219,045
Depreciation	
Aggregate depreciation as at 1 July 2023	130,911
Charge for the year	38,042
Disposals	–
Aggregate depreciation as at 30 June 2024	168,953
Net book values	
As at 30 June 2024	50,092
As at 30 June 2023	70,850

9 Stocks

	2024 \$	2023 \$
Donated goods received but not distributed	1,325,503	2,025,295

10 Debtors

	2024 \$	2023 \$
Due within one year		
Prepayments and deposits	91,487	79,973
Accrued income	7,618,150	9,901,730
Other debtors – Accounts Receivable	1,105	11,416
Amount receivable from IMC Croatia	25,580	20,651
Amount receivable from IMC	397,925	426,476
Emergency response stock	6,250	6,250
	8,140,497	10,446,496

11 Creditors: amounts falling due within one year

	2024 \$	2023 \$
Trade creditors	43,050	13,988
Accruals	215,772	251,099
	258,822	265,087

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 2023 \$	Income \$	Expenditure \$	At 30 June 2024 \$
Strengthening health capacity	9,018,429	34,482,941	37,780,797	5,720,573
Emergency response and preparedness	13,779,876	36,743,315	45,705,226	4,817,965
Mental health & psychosocial support	2,221,783	3,201,968	4,993,385	430,366
Women & children's health	1,370,250	10,954,521	11,873,425	451,346
Water, sanitation and hygiene	1,026,291	6,867,167	6,385,091	1,508,367
Nutrition and food security	360,002	27,742,788	26,665,453	1,437,337
Restricted by country	1,670,691	1,535,912	663,058	2,543,545
	29,447,322	121,528,612	134,066,435	16,909,499

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.

Transfers between funds relate to surplus funds on contracts which have been used for general purposes in line with donor requirements.

13 Analysis of net assets between funds

	Unrestricted funds \$	Restricted funds \$	Total 2024 \$
Fund balances at 30 June 2024 are represented by:			
Fixed assets	50,092	–	50,092
Current assets	1,115,947	17,168,321	18,284,268
Creditors: amounts falling due within one year	–	(258,822)	(258,822)
2024 Total net assets	1,166,039	16,909,499	18,075,538

	Unrestricted funds \$	Restricted funds \$	Total 2023 \$
Fund balances at 30 June 2023 are represented by:			
Fixed assets	70,850	–	70,850
Current assets	815,000	29,712,409	30,527,409
Creditors: amounts falling due within one year	–	(265,087)	(265,087)
2023 Total net assets	885,850	29,447,322	30,333,172

14 International Medical Corps (UK) flagship areas

International Medical Corps (UK) continued to operate during the financial year to 30 June 2024 under the main flagship areas of strengthening health capacity, emergency response and preparedness, mental health and psychosocial support, women and children's health, water, sanitation and hygiene (WASH) and nutrition and food security.

15 Related party transactions

On 1 July 2023 International Medical Corps (UK) entered into a new Administrative Services Agreement with International Medical Corps, a US-based non-profit organisation to share certain services in connection with its operations.

On 1 July 2019 International Medical Corps (UK) entered into an Administrative Services Agreement with International Medical Corps Croatia, a Croatian based non-profit organisation, to share certain services in connection with its operations.

Given the close operating relationship between International Medical Corps and International Medical Corps (UK) there are two connected persons between the organisations at trustee level. These trustees include Nancy A Aossey, a founding Trustee of International Medical Corps (UK) and the 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) is also the Chief Knowledge Officer of International Medical Corps.

During the year ended 30 June 2024, International Medical Corps billed International Medical Corps (UK) \$7,246,146 (2023: \$7,148,282) 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 \$1,054,335 (2023: \$881,109).

During the year ended 30 June 2024, International Medical Corps Croatia billed International Medical Corps (UK) \$56,132 (2023: \$45,050). During the same period International Medical Corps (UK) has rendered services to International Medical Corps Croatia of \$256,121 (2023: \$172,507).

16 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.

17 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 expenditures that do not fall within the terms of the grant agreements, and so the Charity would be required to repay the monies received. The trustees are not aware of any material circumstances in the year to 30 June 2024 that could give rise to such liability (2023: none).

18 Operating leases

International Medical Corps (UK) exited from its former office lease and moved to new office premises during September 2022. The total of future minimum lease payments under non-cancellable operating leases as at 30 June 2024 is as follows:

	Land and buildings \$	Equipment \$	Total 2024 \$
Due within one year	77,611	1,576	79,187
Due between 2 and 5 years	16,576	788	17,364
	94,187	2,364	96,551

	Land and buildings \$	Equipment \$	Total 2023 \$
Due within one year	73,564	1,585	75,149
Due between 2 and 5 years	94,724	2,270	96,994
	168,288	3,855	172,143

CHARITABLE ACTIVITIES DETAILED ANALYSIS FOR THE YEAR ENDED 30 JUNE 2024

The following pages (pages 76-83) do not form part of the statutory financial statements.

For certain projects, closeout adjustments have resulted in negative charitable Income and expenditure adjustments

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNOCHA	204365	(9,236)	(9,236)
Afghanistan	UNOCHA	204439	-	(15,159)
Afghanistan	UNOCHA	204483	235,222	354,221
Afghanistan	UNOCHA	204558	33,016	53,374
Afghanistan	UNOCHA	204772	645,647	645,647
Cameroon	WHO	204609	125,171	125,171
Central African Republic	EC	203593	-	13,463
Central African Republic	EC	204406	1,145,156	1,144,147
Central African Republic	Ministry of Health CAR	204819	247,000	27,120
Central African Republic	UNOCHA	204416	-	(56)
Central African Republic	WV	204891	27,708	27,708
Democratic Rep of Congo	LDS	204790	750,125	391,438
Democratic Rep of Congo	Save the Children	204571	1,503,146	1,503,146
Ethiopia	GAC	204636	47,304	1,709,857
Ethiopia	KSRelief	204533	147,778	147,778
Ethiopia	UNHCR	204586	630,293	630,293
Ethiopia	UNOCHA	204604	457,713	1,560,814
Ethiopia	WFP	204687	46,552	46,552
Global	UNICEF	204747	74,292	74,292
Global ERU	KSRelief	204533	(757,917)	6,212
Iraq	French MOFA	204808	6,502,200	2,962,673
Jordan	UNHCR	204563	8,038,285	8,578,802
Jordan	UNHCR	204812	7,018,029	7,018,029
Jordan	UNICEF	204811	502,167	502,167
Lebanon	GAC	204375	2,110	1,736,989
Lebanon	KSRelief	203771	(341)	(341)
Lebanon	R2HC	203824	-	(96)
Lebanon	UNOCHA	204256	(64,799)	-
Mali	ACF Spain	203973	-	(4,975)

PROJECTS CATEGORISED UNDER STRENGTHENING HEALTH CAPACITY (CONTD.)

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Mali	UNFPA	204664	430,599	430,599
Mali	UNFPA	204850	362,138	283,818
Mali	UNICEF	204504	(197,261)	1,073,954
Nigeria	UNICEF	204624	(4,326)	88,425
Pakistan	UNHCR	204809	494,308	380,783
Somalia	KSRelief	204533	411,675	411,675
Somalia	UNOCHA	204565	162,971	219,879
Somalia	UNOCHA	204751	400,000	400,000
Somalia	UNOCHA	204752	400,000	400,000
Somalia	WV	204423	113,995	122,275
Somalia	WV	204860	42,054	42,054
South Sudan	UNOCHA	204502	351,865	351,865
South Sudan	UNOCHA	204537	2,432	3,032
South Sudan	UNOCHA	204759	350,000	349,994
Sudan	UNHCR	204430	(14,580)	-
Sudan	UNOCHA	204494	-	236,387
Sudan	UNOCHA	204733	585,000	354,960
Sudan	UNOCHA	204873	616,551	77,061
Syria	DRC	204880	37,053	37,053
Venezuela	LDS	204854	300,000	2,037
Venezuela	UNOCHA	204302	(30,566)	(635)
Yemen	KSRelief	204533	198,464	198,464
Yemen	UAE MoFA	204319	-	994,635
Yemen	UAE MoFA	204662	2,019,552	2,003,286
Yemen	UNOCHA	204328	(23,085)	-
Zimbabwe	UNICEF	204856	127,480	105,582
Total Strengthening Health Capacity			34,382,940	37,797,213

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	LDS	204464	(7)	(7)
Afghanistan	UNOCHA	204276	(14,314)	(14,314)
Cameroon	UNHCR	204566	319,289	486,558
Central African Republic	UNOCHA	204527	70,059	73,920
Ethiopia	UNHCR	204587	1,015,619	1,560,813
Ethiopia	UNOCHA	204907	23,167	23,167
Ethiopia	WHO	204528	(9,199)	-
Ethiopia	WHO	204708	306,182	306,182
Global	French MOFA	204529	141	683,499
Global ERU	KSRelief	204296	-	164
Global ERU	KSRelief	204898	1,243,737	55
Iraq	FCDO	204380	203,138	203,138
Iraq	FCDO	204620	4,986,059	4,986,059
Iraq	French MOFA	204564	4	3,134,578
Iraq	GAC	204378	717,789	717,789
Lebanon	UNOCHA	204024	(845)	(845)
Libya	LDS	204726	521,454	435,566
Libya	ZOA Netherlands	204766	104,753	104,753
Middle East	Alwaleed Philanthropies	204689	250,000	241,609
Middle East	FCDO	204380	121,074	964,735
Middle East	FCDO	204620	5,544,763	4,471,733
Middle East	GAC	204378	555,887	1,542,452
Middle East	Plan Int. Australia	204634	-	97,055
Morocco	LDS	204744	300,000	300,000
Nigeria	UNOCHA	204485	(65,582)	(9,006)
Pakistan	Welthungerhilfe	204505	(7,138)	-
Palestinian Territory	LDS	204778	1,000,000	1,000,000
Palestinian Territory	LDS Charities Australia	204885	1,000,000	-
Poland	Tides Foundation	204535	(2)	9,885
Poland	Tides Foundation	204625	(6)	3,220
Poland	Tides Foundation	204678	(1,591)	166,564
Somalia	ACF US	204770	491,538	491,324
South Sudan	UNICEF	203774	(43,852)	(43,852)
South Sudan	UNICEF	204577	7,799,121	7,930,568
South Sudan	UNOCHA	203972	(7,532)	(7,532)
South Sudan	UNOCHA	204675	702,120	701,463
South Sudan	UNOCHA	204696	644,567	644,567

PROJECTS CATEGORISED UNDER EMERGENCY RESPONSE AND PREPAREDNESS (CONTD.)

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
South Sudan	UNOCHA	204838	300,000	211,231
South Sudan	WHO	204682	158,586	158,586
Sudan	KSRelief	204898	11	11
Sudan	LDS	204679	570,941	472,887
Sudan	Start Fund	204677	94,921	94,921
Syria	Alwaleed Philanthropies	204688	250,000	245,927
Syria	AstraZeneca	204596	(6,579)	176,594
Syria	DAHW	204705	809,375	652,041
Syria	FCDO	204380	215,623	215,623
Syria	FCDO	204620	4,296,400	4,296,400
Syria	GAC	204378	1,727,133	1,727,133
Syria	LDS	204594	-	482,372
Syria	UNOCHA	204239	(269)	(269)
Ukraine	AstraZeneca	204389	-	13,932
Ukraine	AstraZeneca	204639	(1,967)	248,033
Ukraine	GAC	204554	-	2,749,054
Ukraine	LDS	204637	-	944,101
Ukraine	Plan Int. Australia	204442	(3,495)	-
Ukraine	Plan Int. Australia	204641	53,173	162,130
Ukraine	Vitol Foundation	204429	(4,249)	25,972
US&T - Continental US	LDS	204746	300,000	223,638
US&T - Puerto Rico	LDS	204498	-	23,865
Yemen	GAC	204374	(329)	1,161,539
Yemen	KSRelief	204898	6,252	6,252
Yemen	UNOCHA	204511	207,392	207,392
Total Emergency Response and Preparedness			36,743,312	45,705,226

PROJECTS CATEGORISED UNDER MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNFPA	204573	2,104,418	2,248,500
Afghanistan	UNOCHA	204556	(486,859)	(23)
Afghanistan	UNOCHA	204557	(493,950)	(46)
Afghanistan	UNOCHA	204559	(329,397)	(48)
Afghanistan	WHO	204703	91,684	91,684
Afghanistan	WHO	204753	350,417	350,417
Ethiopia	UNFPA	204450	(913)	-
Jordan	GIZ	204510	(2,307)	(2,307)
Jordan	KSR relief	204694	873,000	771,434
Libya	GIZ	204369	(2,406)	(2,406)
Mali	UNFPA	203634	(608)	-
Pakistan	GIZ	204731	199,265	133,135
Pakistan	UNHCR	204574	599,624	599,624
Ukraine	LDS	204813	300,000	48,016
Venezuela	GAC	204621	-	755,405
Total Mental Health and Psychosocial Support			3,201,968	4,993,385

PROJECTS CATEGORISED UNDER WATER, SANITATION AND HYGIENE

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	Islamic Development Bank	204649	215,779	1,056,849
Afghanistan	UNICEF	204310	6,892	6,892
Afghanistan	UNOCHA	204264	(1,997)	(1,997)
Afghanistan	UNOCHA	204368	(44)	(44)
Ethiopia	UNHCR	204326	(336)	-
Ethiopia	UNHCR	204603	242,687	363,163
Ethiopia	UNHCR	204822	866,844	866,844
Ethiopia	UNHCR	204824	236,884	236,884
Ethiopia	UNHCR	204825	1,825,458	1,629,712
Ethiopia	UNOCHA	204376	(896)	(896)
Libya	UNICEF	204745	522,988	520,729
Nigeria	UNOCHA	204691	768,000	708,147
Pakistan	UNICEF	204785	286,131	285,984
Syria	UNOCHA	204789	180,000	96,482
Yemen	UNOCHA	204732	650,517	418,828
Yemen	UNOCHA	204805	800,000	100,906
Zimbabwe	UNICEF	204869	268,260	96,608
Total Water, Sanitation and Hygiene			6,867,167	6,385,091

PROJECTS CATEGORISED UNDER WOMEN & CHILDREN'S HEALTH

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	UNFPA	204309	(98)	(98)
Afghanistan	UNFPA	204814	2,251,628	2,251,628
Afghanistan	UNOCHA	204295	(3,760)	(3,760)
Cameroon	UNHCR	204567	167,523	292,610
Cameroon	UNHCR	204800	860,958	702,418
Cameroon	UNICEF	204771	271,853	205,661
Central African Republic	IRC	204214	473,713	473,348
Ethiopia	UNFPA	204569	601,698	601,698
Ethiopia	UNFPA	204837	193,717	193,717
Ethiopia	UNHCR	204585	137,745	339,539
Ethiopia	UNHCR	204823	103,462	69,083
Global	UNFPA	204612	122,992	122,992
Iraq	UNOCHA	204012	(2,164)	(2,164)
Jordan	UNICEF	204580	(114,490)	-
Jordan	WFP	204508	204,022	204,022
Lebanon	French MOFA	204666	6,322	659,608
Lebanon	Plan Int. Australia	204357	(4,423)	-
Lebanon	Plan Int. Australia	204684	440,072	439,534
Lebanon	UNOCHA	204322	(38,980)	-
Mali	GAC	204353	2,566,663	2,340,663
Nigeria	MINBUZA	204069	(10,115)	-
Nigeria	UNICEF	204477	9,056	9,056
Nigeria	UNICEF	204876	52,167	23,224
Nigeria	UNOCHA	204539	(12,430)	83,147
Nigeria	WFP	204440	(43,779)	(4,414)
Pakistan	IOM	204760	88,035	88,035
Pakistan	IOM	204902	13,003	13,003
South Sudan	FCDO	203190	914,967	914,374
South Sudan	UNFPA	204575	929,935	930,548
South Sudan	UNFPA	204807	752,455	751,868
South Sudan	UNICEF	204260	(141,443)	-
South Sudan	UNICEF	204845	175,885	175,885
South Sudan	UNOCHA	204072	(2,872)	(2,872)
South Sudan	UNOCHA	204536	(8,795)	1,072
Total Women and Children's Health			10,954,522	11,873,425

PROJECTS CATEGORISED UNDER NUTRITION AND FOOD SECURITY

Country	Donor	IMC UK Project Number	Total Charitable Income & Gift in Kind Donations	Total Charitable Expenditure
Afghanistan	ACF Canada	204550	59,968	59,968
Cameroon	UNHCR	204324	(8,249)	8,324
Cameroon	WFP	204881	38,280	38,280
Ethiopia	LDS	204709	800,000	683,089
Ethiopia	The Power of Nutrition	204681	52,000	51,345
Ethiopia	UNICEF	204886	104,032	77,969
Ethiopia	WFP	204030	3,593,712	3,526,614
Ethiopia	WFP	204616	572,693	572,693
Ethiopia	WFP	204704	9,655,993	9,122,463
Ethiopia	WFP	204851	900,865	875,438
Ethiopia	WFP	204519	490,458	490,458
Global	ACF Canada	204550	80,401	80,401
Jordan	UNICEF	204579	624,893	624,893
Nigeria	WFP	204307	(16,387)	-
Nigeria	WFP	204615	220,311	220,311
Nigeria	WFP	204627	494,264	494,264
Nigeria	WFP	204638	16,471	16,471
Nigeria	WFP	204648	317,275	317,275
Nigeria	WFP	204665	76,232	76,232
Nigeria	WFP	204840	166,188	166,188
Nigeria	WFP	204841	44,511	44,511
Somalia	ACF Canada	204550	46,522	46,522
Somalia	GDS International	204521	(0)	44,918
Somalia	UNICEF	204491	780,392	691,109
Somalia	WFP	204655	766,019	766,019
Somalia	WFP	204872	119,059	119,059
South Sudan	UNICEF	204562	2,220,142	2,225,595
South Sudan	WFP	204576	1,381,738	1,487,563
South Sudan	WFP	204810	987,221	987,221
Venezuela	WFP	204611	738,913	738,913
Venezuela	WFP	204767	1,308,874	1,308,874
Yemen	LDS	204630	-	689,782
Yemen	LDS Charities Australia	204905	750,000	1,544
Yemen	UNOCHA	204906	360,000	11,149
Total Nutrition and Food Security			27,742,788	26,665,453

IMAGE CREDITS

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