



**International Alliance of  
Patients' Organizations**

Company registration number (England and Wales): 08495711  
Charity registration number (England and Wales): 1155577



# **International Alliance of Patients' Organizations**

(Incorporated as a Company Limited by Guarantee  
and not having a Share Capital)

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Annual Report and Financial Statements  
for the year ended 31 December 2023



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## Reference and Administrative Details of the Charity, its Trustees and Advisers

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<b>Company number</b>	08495711 (England and Wales)
<b>Charity number</b>	1155577 (England and Wales)
<b>Registered office</b>	International Alliance of Patients' Organizations Hounslow House, 7 Bath Road, Hounslow TW3 3EB, UK
<b>Governing Board members (Board of Trustees)</b>	Professor Lara Claire Bloom Adebisi Omolola Bright Orajitt Bumrungskulswat Anthony John Holland Flavia Kyomukama (appointed 6 Dec 2023) Ellos Ellard Lodzeni (Chair from 6 Dec 2023) Neda Milevska-Kostova (resigned 6 Dec 2023; Chair until then) Paul Albert Sumat Mendoza Fernanda Souza de Carvalho (appointed 6 Dec 2023) Rosalia Liliana Tieri (resigned 6 Dec 2023)
<b>Chief Executive Interim Chief Executive Chief Executive</b>	Kawaldip Sehmi (to 1 Aug 2023) Daniela Espindula Mothci (4 Aug-31 Nov 2023) Daniela Espindula Mothci (from 1 Dec 2023)
<b>Bankers</b>	NatWest Bank Plc PO Box 12258 1 Princes Street LONDON EC2R 8BP
<b>Independent auditor</b>	Knox Cropper LLP 65 Leadenhall Street London EC3A 2AD
<b>Website</b>	<a href="http://www.iapo.org.uk">www.iapo.org.uk</a>



### Trustees' Report for the Year Ended 31 December 2023

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The directors, who are also the trustees of the charity, are pleased to present their report together with the financial statements of the charity for the year ended 31 December 2023 which are also prepared to meet the requirements for a directors' report and accounts for Companies Act purposes.

Results for the trading subsidiary, IAPO Trading Limited (company number 08863190) are not consolidated on the grounds that it was dormant and not material to the group.

The trustees have complied with the duty to have due regard to guidance issued by the Charity Commission and have adopted the Statement of Recommended Practice for charities (SORP) (FRS 102 second edition effective 1 January 2019).

#### Aims and objectives of the organisation

The objects of the International Alliance of Patients' Organizations (IAPO), as set out in the articles of association, are the promotion of the relief of sickness and preservation and protection of health for the public benefit through fostering patient-centred healthcare worldwide and in particular by developing the capacity of patients' organisations.

IAPO is a unique global alliance representing patients of all nationalities, across all disease areas, and promoting patient-centred healthcare around the world. IAPO brings a global patient voice to healthcare decision-making based on the belief that patients' voices are amplified and heard effectively when patients' organisations are linked, can share best practices and practical strategies, and are connected with resources. Our members are patients' organisations working at the international, regional, national and local levels to represent and support patients, their families and carers. A patient is a person with any chronic disease, illness, syndrome, impairment or disability.

IAPO was first established in 1999 in the Netherlands as a Dutch Stichting and subsequently deregistered, registering in England and Wales as a company limited by guarantee on 19 April 2013 and a charity on 30 January 2014. IAPO has a membership of nearly 300 organisations across 71 countries covering 51 diseases groups. IAPO is a non-State Actor in official relations with the World Health Organization (WHO) and has a memorandum of understanding with the International Council of Nurses (ICN), International Hospital Federation (IHF), International Pharmaceutical Federation (FIP), World Medical Association (WMA), International Society for Quality in Health Care (ISQua), The Professional Society for Health Economics and Outcomes Research (ISPOR) and The Union for International Cancer Control (UICC). and with many other Non-State Actors.

#### IAPO's vision and mission

IAPO's vision is that patients throughout the world are at the centre of healthcare.

IAPO's mission is to help build patient-centred healthcare worldwide by:

- ◆ Realizing active partnerships with patients' organisations, maximizing their impact through capacity building
- ◆ Advocating internationally with a strong patients' voice on relevant aspects of healthcare policy, with the aim of influencing international, regional and national health agendas and policies
- ◆ Building cross-sector alliances and working collaboratively with like-minded medical and health professionals, policy makers, academics, researchers and industry representatives

### Trustees' Report for the Year Ended 31 December 2023

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#### *IAPO's activities include:*

- ◆ Advocacy at global level on relevant aspects of healthcare policy to influence international health agendas and policies
- ◆ Providing membership services, including capacity building and shared learning, to its members, who are patient-led organisations across the world
- ◆ Empowering its members to undertake their own advocacy at regional and national meetings
- ◆ Providing opportunities for stakeholders from across the health sector to meet and work together to advance patient involvement in health services and decision-making
- ◆ Research on emerging areas of interest to patients' organisations and to underpin the evidence base for showing the importance of patient involvement to public health.

#### Structure

The organisation is a charitable company limited by guarantee, incorporated on 19 April 2013 and registered as a charity on 31 January 2014. The company was established articles of association which define the objects and powers of the company and its governance arrangements. In the event of the company being wound up members are required to contribute an amount not exceeding £1.

All assets and liabilities from the International Alliance of Patients Organizations and its predecessor not-for-profit structure registered in the Netherlands, were transferred to the new UK incorporated charity on 1 February 2014. IAPO Netherlands was (voluntarily) dissolved from the Netherlands Trade Register with effect from 31 May 2015, executed on 21 October 2015

#### Appointment and induction of Governing Board

Every member of the IAPO Governing Board is elected by IAPO's members, through a process defined in the [articles of Association](#), [by-laws](#) and [election code of conduct](#). Every year, in advance of the annual general meeting (AGM), the number of vacancies on the Board is notified to all members, who may then nominate someone from their organisations (a Board member or senior staff member) to IAPO's Governing Board. The full list of nominees is sent to all members in advance of the AGM; members may vote by post or proxy or in person at the AGM.

Governing Board members serve for a maximum of two terms subject to the retirement by rotation clause; once their term of service is complete, they or anyone from their organisation cannot be re-elected to the Board for at least a year. All new members of the Board receive induction including core information about the work and history of the organisation, and conversations with the Chief Executive Officer and the Chair.

All Governing Board members sign a code of conduct when they are appointed to the Board. All staff and Governing Board members are required to declare any relevant conflict of interests or conflict of loyalties at every Board meeting, or between meetings if applicable. The Governing Board have no beneficial interest in the charitable company or its trading subsidiary. No Governing Board member receives any remuneration, but some receive reimbursement for essential travel or similar expenses.

## Trustees' Report for the Year Ended 31 December 2023

### Governance

The International Alliance of Patients' Organizations has a Board of Trustees and Directors overseeing its governance and direction, supported by a secretariat headed by the Chief Executive Officer.

Board of Trustees/Directors			
Name	Position	Country	Dates
Dr. Neda Milevska-Kostova	Chair	North Macedonia	Until 6 Dec 2023
Mr. Ellos Ellard Lodzeni	Vice Chair, then Chair	Malawi	
Mrs. Orajitt Bumrunskulswat	Secretary	Thailand	
Professor Lara Claire Bloom	Treasurer	United Kingdom	
Mrs. Adebisi Omolola Bright	Board Member	Nigeria	
Dr. Anthony John Holland	Board Member	United Kingdom	
Ms. Flavia Kyomukama	Board Member	Uganda	From 6 Dec 2023
Paul Albert Mendoza	Board Member	Philippines	
Fernanda Souza de Carvalho	Board Member	Brazil	From 6 Dec 2023
Mrs. Rosalia Liliana Tieri	Board Member	Argentina	Until 6 Dec 2023



## Trustees' Report for the Year Ended 31 December 2023

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### Public benefit

The Governing Board confirms that they have considered the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the charity's aims and objectives. They consider that the activities carried out, summarised in the Achievements and Performance section of this report, provide benefit to the public.

IAPO's objects are the promotion of the relief of sickness and the preservation and protection of health for the public benefit. IAPO pursues this through fostering patient-centred healthcare worldwide and, in particular, by developing the capacity of patients' organisations.

In setting our objectives and planning our activities trustees have given consideration to the Charity Commission's general guidance on public benefit (PB1, PB2 and PB3) and have taken these into account in making all decisions. We have not departed from the guidance in 2023.

IAPO's services are open to all people and our membership reflects a diverse group of patients' organisations representing patients with communicable and non-communicable diseases, including patients with diseases that are stigmatised in many societies.

IAPO had 278 members comprising umbrella groups and single organisations in 2023 who directly represented views of over 1 million patients in 72 countries across 54 disease areas. The services the charity provides are designed to build the capacity of patients' organisations, allowing them to better assist the needs of patients and carers (and their own member patient organisations in some cases) from across the world.

Access to IAPO's website is freely available to the public. Currently it is in English, with some sections in Spanish. The website contains a wide range of information on IAPO's activities and on patient-centred healthcare, which is of benefit to the public, particularly those who wish to set up local patients' organisations.

By improving access to information, training and other capacity building programmes for patients and their representative organisations, IAPO improves access to healthcare itself. By raising awareness and through capacity building and education, we increase access to acceptable services that respect patients' preferences, values, rights and needs.

IAPO has a wealth of evidence, gained from patients' organisations worldwide, which demonstrates that patient involvement in patients' care leads to better health outcomes and lower costs for the whole of society. The charity works with patients' organisations that are not for profit and non-governmental organisations who demonstrate commitment to improving patient-centred healthcare which is reflected in the charity's membership criteria.

## Trustees' Report for the Year Ended 31 December 2023

### Chair's Report for the Financial Year 1st January to 31st December 2023

2023 was a year of significant achievements for IAPO, as well as a time for realignment with new leadership approaches, sustainable engagement strategies, and strengthened partnerships.

We navigated difficult times after the unexpected passing of our dear colleague and IAPO's CEO Kawaldip Sehmi in August 2023. Dani Mothci, who has brilliantly led the membership role at IAPO since 2016, transitioning to partnership engagement director at the end of 2022, became IAPO's CEO. This leadership change brought new ideas, enthusiasm and commitment, while ensuring IAPO's sustainability and reliability.

The tireless efforts of the new CEO together with IAPO board members and staff were instrumental in steering IAPO in 2023. I am incredibly proud of our accomplishments and how we served our community towards a healthier future for all with patients at the centre.

We are deeply grateful to our almost 300 member organisations, our partners and collaborators for their generous support in 2023, which enabled us to achieve our objectives and stay aligned with our strategic goals. A special thank you to our industry partners who have supported IAPO through sponsorship, educational grants, and research projects. Without this, we could not have achieved the impact we had.

In 2023, we were proud to hold our flagship Global Patient Congress in May in Geneva, Switzerland marking its 10<sup>th</sup> anniversary. We also held several online and in-person events on different topics, drove research, and led advocacy initiatives aimed at supporting the global patient community to advance patient-centred, safe, affordable and accessible healthcare worldwide. We also made significant investments in the core of the organisation - its governance, staff, operations, and communication - to enhance its effectiveness, innovation, and sustainability.

I believe that our collective efforts this year created an even greater and stronger organisation which is bringing exciting possibilities ahead based on four pillars: building a stronger organisation, fostering effective and sustainable relationships, having a stronger regional presence, and supporting IAPO member patient organisations. This is to ensure that we continue our mission and deliver better and more outcomes to our members and all patients around the world.

In 2024, IAPO is celebrating a silver jubilee having attained twenty five (25) years working with and mobilizing patients' organisations from all regions of the world, representing all disease areas. 25 years on and our mission to help build patient-centred healthcare worldwide continues as solid as it can be, and central to all we do at IAPO.

In closing, I must pay tribute to Dani Mothci, my predecessor as chair (until 6 December 2023) Neda Milevska-Kostova, and all Board and Secretariat members who in their shock and grief, still kept IAPO functioning and are making it stronger.



**Ellos Lodzeni**  
Chair of the Board IAPO



## Trustees' Report for the Year Ended 31 December 2023

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### Achievements and Performance

In 2023, IAPO embarked on a journey of collaboration, advocacy and innovation to advance patient-centred healthcare globally organised according to the three goals of IAPO Strategic Plan 2022-2024:

#### Goal 1: EMPOWER

Empower members with cutting-edge knowledge and advocacy skills to enhance the reach, efficacy, and impact of our membership in bringing about a Patient-Centred (PC) and Pandemic Prepared (PP) Universal Health Coverage (UHC).

- ◆ We hosted our [10th Global Patients Congress](#) at the Maison Internationale des Associations in Geneva, Switzerland, as a hybrid event during the weekend before the [76th World Health Assembly \(WHA76\)](#) with the theme "Innovative patient partnerships at the heart of global health advancement".



### GPC 2023 brought together

**1206** delegates from

**111** countries,



including IAPO's global membership

**42**

speakers discussing and sharing their experiences to promote global health through innovative, collaborative and meaningful relationships in

**8** capacity-building sessions

## Trustees' Report for the Year Ended 31 December 2023

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- ◆ We launched the [African Patients Village](#), a patient-led multi-stakeholder arena that explores the power of togetherness to address current health challenges and promote patient-centred sustainable and resilient health systems in Africa. The first edition of the village was held on the sidelines of the [73rd session of the World Health Organization \(WHO\) Regional Committee for Africa](#) in Gaborone, Botswana, and it focused on two topics:

- > E-health solutions co-designed through public-private-patient organisations collaborations
- > The multistakeholder engagement in support of the efforts to ensure access to safe medical products is institutionalized through the recently established [African Medicines Agency Treaty Alliance \(AMATA\)](#).

- ◆ As part of our ongoing activities related to the [African Medicines Agency Treaty Alliance \(AMATA\)](#), we held the [3rd webinar of the AMATA webinar series with Chimwemwe Chamdim](#), the African Medicines Regulation Harmonization Programme Head.

The webinar highlighted significant progress in operationalizing the agency and shared insights on the African Medicines Agency's (AMA) role in harmonizing medicine regulations across Africa.

- ◆ In collaboration with [BETTEReHEALTH](#), we held the webinar "[eHealth: Assuring better health services, healthcare access and health literacy for the benefit of patient safety and health](#)", where we discussed the use and implementation of eHealth-related solutions for patient health and safety.

The webinar emphasized the importance of eHealth solutions in empowering patients with comprehensive and readily available information about their medication, enabling informed decision-making and improved self-management. Participants acknowledged the potential of eHealth platforms to enhance medication adherence by providing reminders, educational resources, and personalized support to patients, thereby promoting better health outcomes.

- ◆ We advanced the [Patient Academy website](#) by collaborating on additional modules, involving patients in creating videos, and fostering engagement through social media awareness posts.

The vision of the Patient Academy is to create communities of empowered patients who take ownership of the management of their medical condition through customized health information.

- ◆ IAPO joined [GS1](#), [IHF](#), [EAHP](#) and [ISQUA](#) on an awareness and celebration campaign spanning over 6 days on social media to mark [World Patient Safety Day 2023](#), where each organisation shared their views on the best way to engage with patients to advance patient safety globally.

## Trustees' Report for the Year Ended 31 December 2023

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As part of the commemoration, IAPO participated as one of the speakers at the [WHO Global Conference](#) entitled "[Engaging Patients for Patient Safety](#)", which was instrumental in amplifying the patient voice and advocating for patient-centred approaches to healthcare safety.

We remain committed to collaborating with stakeholders worldwide to ensure that patient safety remains a top priority in healthcare systems globally.

- ◆ We joined other health stakeholders from all over the world to celebrate [Patient Solidarity Day \(PSD\) 2023](#) under the theme "[Expert patients - the indispensable voice](#)". On PSD 2023, we celebrated the strength, resilience, and knowledge of expert patients who have taken control of their health journeys and contributed to health systems strengthening in various ways.

IAPO's PSD 2023 also included a tribute to the remarkable life and contributions of our departed Kawaldip Sehmi, the former IAPO CEO.

- ◆ To mark [World Antimicrobial Awareness Week \(WAAW\)](#), IAPO and IAPO Patients for Patient Safety Observatory and its AMR Patient Alliance released [a call for cross-sectoral collaboration](#) to address the growing threat of Antimicrobial Resistance (AMR) ahead of the 2024 High-Level Political Declaration.

- ◆ We had the privilege of joining a hybrid session titled "[Confronting Antimicrobial Resistance in Healthcare](#)" and "[Cancer and Cardiovascular Disease Advocacy – The Power of Changing Complex Scenarios in Favour of Health Care](#)" at the [Global Forum Frontiers of Health 2023](#).

Hosted by the [Side by Side Brazilian Institute](#), the event brought together key stakeholders, including IAPO member Fernanda de Carvalho, and representatives from the Observatory and the AMR Patient Alliance. These sessions discussed the far-reaching implications of AMR for patient care, treatment outcomes, and healthcare systems worldwide, and the vital role of advocacy in the fight against cancer and cardiovascular diseases (CVD) in driving positive change and improving healthcare outcomes for individuals affected by these diseases.

- ◆ We were honoured to participate in the [Global Self-Care Federation Event](#) alongside our esteemed partners from the [United for Self-Care Coalition](#).

At the WHA76 Side Event titled "[Self-Care: A Foundational Component of Health System Sustainability](#)," IAPO had the opportunity to highlight the crucial role of self-care practices in primary healthcare. We emphasized how these practices not only enhance patient safety but also contribute significantly to the achievement of Universal Health Coverage.

## Trustees' Report for the Year Ended 31 December 2023

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- ◆ We were also honoured to join the [Global Patient Think Tank \(GPTT\)](#), a multinational group of patient and community representatives calling for the inclusion of the patient voice in both global UHC policy decision-making and national-level UHC design, implementation and governance. IAPO's participation in this initiative underscores our commitment to further integrate the patient perspective in UHC initiatives.
- ◆ We integrated the advisory committee of the [International Experience Exchange with Patient Organisations \(IEEPO\)](#), a global platform of engagement for the patient community and other healthcare stakeholders, to co-create and collaborate, and to be strong partners with an equal voice in the dialogue to transform the future of healthcare together.

### Goal 2: DRIVE RESEARCH

Co-create evidence in support of healthcare that is PC, PP and a UHC that strengthens patient involvement in clinical research and global health institutes.

- ◆ As part of our strategy to drive research, IAPO commissioned the Swedish Institute of Health Economics (IHE) to develop the research project [Improving Breast Cancer Care in the Middle East and Africa](#), by working on a comparative assessment of the disease burden and the economic burden of breast cancer, as well as of early detection and treatment of the disease. The Policy Report and an Advocacy Toolkit will be launched in 2024.
- ◆ We continued our support as part of the [Advisory Group](#) and as a patient representative of the international research project [EOLinPlace](#). This project is hosted by the University of Coimbra and is the largest study of international time trends in place of death and the first showing a rise of home deaths in the COVID-19 pandemic across countries.
- ◆ IAPO also continued to participate as a member of the [BMJ Patient Advisory Panel](#), advising within the different working groups, including the ones on Patient Safety and Healthcare Sustainability.

### Goal 3: SHAPE LAW, POLICY, STANDARDS

Apply the empowered patient community and evidence created to shape the institutional, law, policy, practice, and standards framework for healthcare that is PC, PP and a UHC at global, regional, and national levels.

- ◆ Following on the important statements put forward in previous years, IAPO delivered two statements at the [76th World Health Assembly \(WHA76\)](#): one on [Agenda Item 13.1 - Universal Health Coverage](#) and the other on [Agenda Item 13.2 - Political declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases, and mental health](#).

## Trustees' Report for the Year Ended 31 December 2023

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- ◆ [The Personalised Cancer Care Alliance \(PCCA\)](#), set up by IAPO in 2022, held the [WHA76 Side Event "Amana upon our shoulders – Call to adoption and integration of personalised cancer care in the WHO Eastern Mediterranean Region"](#), which addressed the care and suffering of cancer patients in the region through advocating for personalised cancer care

- ◆ We also released a [Call to Action](#) for the adoption and integration of personalised cancer care in the WHO Eastern Mediterranean Region.

- ◆ The PCCA also held the [Roundtable "Uniting Voices for Participatory Patient-Centred Healthcare - The 5 Ps Framework"](#) on the sidelines of the [70th Session of the WHO Regional Committee for the Eastern Mediterranean](#) in Cairo, Egypt.

The roundtable brought together key health stakeholders (patients, WHO, academia, healthcare providers, and industry) to discuss ways of including the patient's voice within the healthcare system and continuum of care towards better outcomes and true patient-centred healthcare.

- ◆ We joined the [United for Self-Care Coalition at the WHA76](#) in advocating for the integration of self-care in health systems. Together, we developed an [open letter](#) urging Member States to prioritize self-care as a critical component of the healthcare continuum, particularly in the context of managing the burden of NCDs and realizing Universal Health Coverage.

- ◆ IAPO endorsed the [Statement on substandard and falsified medical products \(Agenda item 152.7\)](#) delivered by the International Pharmaceutical Students' Federation (IPSF), on behalf of the [African Medicines Agency Treaty Alliance \(AMATA\)](#), at the 152nd session of the Executive Board at the World Health Organization in Geneva.

The statement emphasized the critical importance of combating substandard and falsified medical products.

IAPO fully supports the draft list of prioritized activities outlined in the statement, particularly the objective to strengthen the capacity of national/regional regulatory authorities for the prevention, detection, and response to substandard and falsified medical products.

- ◆ As part of our activities within the [Global Coalition for Circulatory Health \(GCCH\)](#), we collaborated on the [76th World Health Assembly](#) statements as well as on the [GCCH white paper for circulatory health and UHC](#).

The GCCH is an alliance that brings together international, regional and national stakeholders in circulatory health to drive the urgent action needed to combat heart disease and stroke.

## Trustees' Report for the Year Ended 31 December 2023

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- ◆ As a founding member of the [Fight the Fakes \(FTF\) Alliance](#), we continued to be a partner in marking eight years since it was first set up as a grassroots advocacy campaign. In 2023 we were part of the Executive Board together with seven other Non-State Actors in official relations with the WHO.

We joined the [Fight the Fakes week campaign](#) where we raised awareness of the dangers of substandard and falsified medicines for patient safety under the theme 'Africa Together Against Substandard and Falsified Medicines' and the Call to Action 'Africa – Speak Up – Stand Up'.

- ◆ We collaborated with the [Africa Civil Society Organizations Working Group on Pandemic Preparedness and Response \(ACSOWGPR\)](#) to elevate the patient voice in pandemic planning and response efforts.

Co-convened by Pandemic Action Network and PATH, [ACSOWGPR](#) aims to strengthen collective civil society advocacy to shape decision-making and implementation in response to COVID-19 and future health threats.

Together, we work towards a more inclusive and effective pandemic response.

- ◆ IAPO participated in the [UN High-level Meeting on Universal Health Coverage at UNGA78](#), held in New York. The meeting focused on expanding the ambition for health and well-being in a post-COVID world, aiming to review the implementation of the 2019 Political Declaration and identify solutions to accelerate progress towards Universal Health Coverage by 2030.

Our participation underscored the importance of a primary healthcare approach in engaging and empowering patients and communities. We also highlighted primary health care as essential for ensuring holistic and integrated health care, contributing to social justice and yielding long-lasting impact on population health and socioeconomic growth



### IAPO's Annual General Meeting

We held our Annual General Meeting in December 2023 where we announced the newly elected and re-elected [Governing Board Members](#) and presented further updates on [IAPO's new leadership and strategic direction for 2024 and beyond](#).

## Trustees' Report for the Year Ended 31 December 2023

### Communications

#### *Newsletter*

We doubled our newsletter subscription number from 5900 to 12070 subscribers who receive our monthly newsletter which covers all IAPO's news and updates on initiatives such as our congresses, member activities, patient-centred advocacy news and information. We continue to encourage more patient organisations to submit articles for publication.

#### *Twitter*

[@IAPOvoice](#) , [@PatientSolidarityDay](#), [@AfricanAmata](#), [@PCCAlliance](#)

#### *Facebook*

We operate [IAPOvoice](#), [International Alliance of Patients' Organizations](#), [African page](#), [Patient Solidarity Day](#), [Personalised Cancer Care Alliance](#)

#### *LinkedIn*

[International Alliance of Patients' Organizations](#), [Metrodora Awards](#), [Personalised Cancer Care Alliance](#).

#### *Website*



[www.iapo.org.uk](http://www.iapo.org.uk)

IAPO's website continues to be the main source of information for all IAPO's activities and its dissemination. We have seen an increase in the number of page views: with over 105,000 page views in 2023 compared to 82,100 in 2022.

## Trustees' Report for the Year Ended 31 December 2023

### Membership

IAPO continued to strengthen its member network in 2023 supporting its 278 members. IAPO is currently implementing software to streamline the entire membership management, from outreach to invoicing and engagement. As of 31st December 2023, IAPO members were:

Region	
African members	43
Eastern Mediterranean members	10
European members	96
Latin American members	67
North American members	24
South East Asian member	14
Western Pacific members	24
<b>TOTAL</b>	<b>278</b>

Membership Type	
Full	99
Associate	37
Network	142
Affiliate	0
<b>TOTAL</b>	<b>278</b>

### Risk Management

A risk register is prepared by the CEO and presented annually to the Board to discuss ensuring that there are effective and adequate risk management and internal control systems in place to manage the major risks to which the Charity is exposed. IAPO prepares the risk register by understanding the risk environment and its operations and then identifies the key risks. The CEO and the Treasurer then undertake a thorough analysis and evaluation of the risks identified before coming up with a treatment for the risks.

Risks are identified under headings of Financial, Funding, Governance, Operational and Personnel, and mitigation actions detailed.

Discussions are underway regarding IAPO's fundraising strategy where we aim to reduce reliance upon the pharmaceutical companies. IAPO aims to diversify its funding by approaching international trust funds, international development agencies and large programmes to raise non-industry partner funding.



## Trustees' Report for the Year Ended 31 December 2023

### Financial Review

#### *Financial position at the end of the period*

Incoming resources for the year amounted to £620,727 (2022: £582,642), which was higher than the previous year due to a strategic increase in research and special projects funded by our partners.

Expenditure in 2023 was £608,257 (2022: £399,126). Expenditure is also higher than the previous year, in line with the fact that we increased our output in research and Special Projects.

#### *Reserves Policy*

The IAPO Board approved a reserves policy in September 2014, with a target level of free reserves of 6-12 months' running costs for 6 months. 6 months running cost is c.£76,139. This policy was set with due regard to guidance from Charity Commission (CC19 – Charity Reserves) and is reviewed annually.

The level of unrestricted reserves, as at 31<sup>st</sup> December 2023 is £231,149. This is within the target in the reserves policy, and will be monitored by the Board of Trustees.

#### *Going Concern*

The trustees consider that there are no material uncertainties about the Charity's ability to continue as a going concern. Despite the unfortunate passing of IAPO's chief executive generating a change in management the board took time to contact all funders and commit to fulfilling and meeting current projects, events and current collaborative works. Our current partners and funders have been very receptive to new proposals and wish to continue working with IAPO until the foreseeable future.

#### *IAPO funding transparency*

The Governing Board members declare relevant conflicts of interests and conflicts of loyalty at each Board meeting and between meetings. A register of interests is maintained.

Reference to IAPO's code of conduct and policy regulating IAPO's relationship with, and independence from, sponsors can be found at [www.iapo.org.uk/consensus-framework-ethical-collaboration](http://www.iapo.org.uk/consensus-framework-ethical-collaboration) and [www.iapo.org.uk/healthcare-industry-partners](http://www.iapo.org.uk/healthcare-industry-partners).

The overall proportion of industry to non-industry income for the year was approximately 98%.

#### *Pension arrangements*

IAPO operates an occupational pension scheme, and also operates a policy of contributions directly into staff members' chosen personal pension schemes, with no obligation for staff to make personal contributions. The issue of pension deficit, which would apply to an occupational scheme, does not therefore arise.

## Trustees' Report for the Year Ended 31 December 2023

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### Future Plans

IAPO's Strategy for 2022-2024 is listed at:

<https://www.iapo.org.uk/sites/default/files/files/IAPO%20Strategy%202023-2024%20Draft.pdf>

Our vision, mission and tactical plans are adapted to build back better a patient-centred, pandemic prepared universal health coverage by 2030.

#### *Vision 2022-2024*

To ensure through global solidarity and national action that every patient enjoys healthcare that is:

- ◆ Patient-centred (PC) (broader definition)
- ◆ Pandemic prepared (PP)
- ◆ A Universal Health Coverage (UHC)

#### *Mission 2022-2024*

- ◆ Empower our members with cutting edge knowledge and advocacy skills in bringing about PC & PP UHC 2030.
- ◆ Work with our membership, alliances, partners, and other stakeholders to drive research and policy development activity that establishes the evidence base needed in support of PC & PP UHC 2030 and strengthen patient involvement and co-creation in research.
- ◆ Motivate the empowered patient community into using the evidence base created to shape the institutional, law, policy, practice, and standards framework needed for PC & PP UHC 2030 at global, regional (APEC, AU and EU etc) and national levels.

#### *Tactical Plan 2022-2024*

To attain PC (Broader Definition) and PP UHC 2030 it is important that IAPO advocates the delivery of:

- ◆ Safe Healthcare
- ◆ Quality Healthcare
- ◆ Accessible Healthcare. Access is across four areas.
- ◆ Non-Discriminatory Healthcare
- ◆ Physically Accessible Healthcare
- ◆ Information Accessibility
- ◆ Affordable Healthcare
- ◆ Acceptable Healthcare: Culturally Competent and Patient-Centred (Broader Definition)

In addition to the above, IAPO is collaborating closely with the WHO Work Plan 13 and ensuring that the WHO flagship Global Patient Safety Action Plan 2022-2030 is translated and implemented into national patient safety institutional, legislative, policy, practice and standards through patient and family engagement and co-creation/coproduction.

## Trustees' Report for the Year Ended 31 December 2023

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### Statement of Trustees' Responsibilities

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

Company law requires the trustees to prepare financial statements for each financial period which 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 income and expenditure, of the charitable company for that period.

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

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

The trustees are responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time, the financial position of the 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.

The trustees are responsible for the maintenance and integrity of the corporate and 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.

### Statement as to disclosure to our auditors

In so far as the trustees are aware at the date of approving this report:

- ◆ there is no relevant audit information, being information needed by the auditor in connection with preparing their report, of which the charity's auditor is unaware; and
- ◆ the trustees having made enquiries of fellow directors and the group's auditor that they ought to have individually taken, have each taken all steps that he/she is obliged to take as a director in order to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

## Trustees' Report for the Year Ended 31 December 2023

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### Reappointment of auditors

A proposal to reappoint Knox Cropper LLP as the charity's statutory auditors will be put to members at our forthcoming annual general meeting.

Approved and authorised for issue by the Governing Board on 24 September 2024 and signed on their behalf by:



**Ellos Elland Lodzeni,**  
Chair of the Board, IAPO



## Independent Auditor's Report to the Members of International Alliance of Patients' Organizations for the Year Ended 31<sup>st</sup> December 2023

### Opinion

We have audited the financial statements of International Alliance of Patients' Organization for the year ended 31 December 2023 which comprise the Statement of Financial Activities (including the Income and Expenditure Account), the Balance Sheet and the notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'.

In our opinion the financial statements:

- ◆ Give a true and fair view of the state of the charitable company's affairs as at 31 December 2023 and of its income and expenditure, for the period then ended;
- ◆ Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'; and
- ◆ Have been prepared in accordance with the requirements of the Companies Act 2006.

### 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 other information comprises the information included in the Trustees' Report, other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information.

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.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If

## Independent Auditor's Report to the Members of International Alliance of Patients' Organizations for the Year Ended 31<sup>st</sup> December 2023

we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

### Opinion 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 includes the directors' report prepared for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- ◆ The directors' report, included within the Trustees' 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.

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; or
- ◆ The trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies exemption from the requirement to prepare a Strategic Report or in preparing the Trustees' Report.

### Responsibilities of Trustees

As explained more fully in the Statement of Trustees' Responsibilities, 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 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 company or to cease operations, or have no realistic alternative but to do so.

## Independent Auditor's Report to the Members of International Alliance of Patients' Organizations for the Year Ended 31<sup>st</sup> December 2023

### 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 Charitable Company is required to comply with both company law and charity law and, based
- ◆ The Charitable Company is required to comply with both company law and charity law and, based on our knowledge of its activities, we identified that the legal requirement to accurately account for restricted funds was of key significance.
- ◆ We gained an understanding of how the charitable company complied with its legal and regulatory framework, including the requirement to properly account for restricted funds, through discussions with management and a review of the documented policies, procedures and controls.
- ◆ The audit team, which is experienced in the audit of charities, considered the charitable company's susceptibility to material misstatement and how fraud may occur. Our considerations included the risk of management override.
- ◆ Our approach was to check that all restricted income was properly identified and separately accounted for and to ensure that only valid and appropriate expenditure was charged to restricted funds. This included reviewing journal adjustments and unusual transactions.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: <https://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 trustees, 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 trustees those matters we are required to state to them in an auditors' 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 trustees as a body, for our audit work, for this report, or for the opinions we have formed.

*Knox Cropper LLP*

25 September 2024

Simon Goodridge (Senior Statutory Auditor)  
For and on behalf of Knox Cropper LLP (Statutory Auditor)  
65 Leadenhall Street  
London  
EC3A 2AD

**Statement of Financial Activities (incorporating an income and expenditure account) for the Year Ended 31 December 2023**

	Notes	Unrestricted	Designated	Restricted	Total 2023 (year)	Total 2022 (year)
		£	£	£	£	£
<b>Income from charitable activities:</b>						
Membership		2,767	-	-	2,767	4,092
Healthcare Industry Partners		83,938	-	-	83,938	234,401
APPC congress		-	32,309	-	32,309	59,065
GPC congress		-	82,145	-	82,145	-
Africa congress		-	-	-	-	-
Latin congress		-	-	-	-	23,909
Special Projects		-	-	410,197	410,197	257,863
Other charitable activities		9,371	-	-	9,371	3,312
<b>Total</b>	<b>2</b>	<b>96,076</b>	<b>114,454</b>	<b>410,197</b>	<b>620,727</b>	<b>582,642</b>
<b>Expenditure on charitable Activities:</b>						
Charitable activities:-						
· Capacity building, advocacy and collaboration		(152,278)	-	-	(152,278)	(187,933)
· Asia Pacific Patients Congress		-	(698)	-	(698)	(64,785)
· Global Patients Congress		-	(96,995)	-	(96,995)	(1,355)
· Africa Patients Congress		-	-	-	-	-
· LatAm Patients Congress		-	-	-	-	(47,379)
· Special projects		-	-	(358,286)	(358,286)	(97,674)
<b>Total</b>	<b>4</b>	<b>(152,278)</b>	<b>(97,693)</b>	<b>(358,286)</b>	<b>(608,257)</b>	<b>(399,126)</b>
<b>Net income/(expenditure)</b>		<b>(56,202)</b>	<b>16,761</b>	<b>51,911</b>	<b>12,470</b>	<b>183,516</b>
Transfers		-	-	-	-	-
<b>Net movement in funds</b>		<b>(56,202)</b>	<b>16,791</b>	<b>51,911</b>	<b>12,470</b>	<b>183,516</b>
<b>Reconciliation of funds:</b>						
Funds brought forward		287,351	(38,112)	283,533	532,772	349,257
<b>Total funds carried forward</b>		<b>231,149</b>	<b>(21,351)</b>	<b>335,444</b>	<b>545,242</b>	<b>532,772</b>

All transactions are derived from continuing activities.

All recognised gains and losses are included in the Statement of Financial Activities.



Balance Sheet as at 31 December 2023

	Notes	2023 £	2022 £
<b>Fixed assets</b>	8	-	-
<b>Current assets</b>			
Debtors	9	6,868	8,115
Cash in hand and in bank		690,597	625,567
		<u>697,465</u>	<u>633,682</u>
<b>Creditors: amounts falling due within one year</b>	10	(152,223)	(100,910)
		<u>545,242</u>	<u>532,772</u>
<b>Net current assets</b>			
<b>Net assets</b>	11	<u>545,242</u>	<u>532,772</u>
<b>Funds</b>			
Unrestricted Funds		231,149	287,351
Designated Funds		(21,351)	(38,112)
Restricted Funds		335,444	283,533
		<u>545,242</u>	<u>532,772</u>
<b>Total Funds</b>	13	<u>545,242</u>	<u>532,772</u>

These financial statements have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small charitable companies.

These financial statements were approved and authorised for issue by the Governing Board on 24 September 2024 and signed on their behalf by:

**Ellos Ellard Lodzeni**  
Chair

**Dr Anthony John Holland**  
Treasurer

Registered company number: 08495711 (England and Wales)

The notes on pages 27 to 37 form part of these financial statements.

Cash flow statement for the year ended 31 December 2023

	2023	2022	
<b>Cashflows from operating activities</b>			
Surplus/(deficit) for the financial year	12,470	183,516	
Adjustments for:			
Depreciation Charge	-	134	
(Increase)/Decrease in debtors	1,247	1,157	
Increase/(Decrease) in creditors	<u>51,313</u>	<u>7,785</u>	
	65,030	190,277	
<b>Net increase/(decrease) in cash and cash equivalents</b>	65,030	190,277	
Cash at 1 January 2023	<u>625,567</u>	<u>435,290</u>	
Cash at 31 December 2023	<b>A</b> <u><u>690,597</u></u>	<u><u>625,567</u></u>	
<b>A) Components of cash and cash equivalents</b>			
Cash at bank and in hand	<u>690,597</u>	<u>625,567</u>	
<b>B) Analysis of changes in net debt</b>			
	<b>At 1 January 2023</b>	<b>Cashflows</b>	<b>At 31 December 2023</b>
Cash and cash equivalents	<u>625,567</u>	65,030	<u>690,597</u>
	<u><u>625,567</u></u>	<u><u>65,030</u></u>	<u><u>690,597</u></u>

## Notes to the Financial Statements for the Year Ended 31 December 2023

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### 1. Accounting Policies

#### 1.1 Accounting convention

The financial statements of the charitable company, which is a public benefit entity under FRS102, have been prepared in accordance with the 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (SORP) (FRS102 second edition - effective 1 January 2019)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Ireland' and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

The financial statements are presented in Sterling (£).

Results for the trading subsidiary, IAPO Trading Limited (Company Number 08863190) are not consolidated on the grounds that it was dormant and not material to the group.

#### Statement on going concern

After reviewing the charity's forecasts and projections, the directors have reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. The charity therefore continues to adopt the going concern basis in preparing its financial statements.

#### 1.2 Company status

The parent charity is a company limited by guarantee. The directors of the company are the trustees named on page 1. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

#### 1.3 Incoming resources

All incoming resources are included in the Statement of Financial Activities when the charity is legally entitled to the income and the amount can be quantified with reasonable certainty.

#### 1.4 Expenditure

All expenditure is included on an accruals basis and is inclusive of all VAT, which cannot be reclaimed, and is reported as part of the expenditure to which it relates:

- ◆ Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them.
- ◆ Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity and include the audit fees and costs linked to the strategic management of the charity.
- ◆ All costs are allocated between expenditure categories of the SOFA on a basis designed to reflect the use of the resource. Costs relating to a particular activity are allocated directly, other costs are apportioned on the basis staff time incurred.

## Notes to the Financial Statements for the Year Ended 31 December 2023

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The core elements of charitable expenditure are as follows:

**Capacity Building:** Realising active partnerships with patients' organisations, maximising their impact through capacity building.

**Advocacy:** Advocating internationally with a strong patients' voice on the relevant aspects of healthcare policy, with the aim of influencing international, regional and national health agendas and policies.

**Collaboration:** Building cross-sector alliance and working collaboratively with like-minded medical and health professionals, policy makers, academics, researchers and industry representatives.

### *1.5 Funds*

General funds are unrestricted funds which are available for use at the discretion of the Trustees in furtherance of the general objectives of the charity and which have not been designated for other purposes.

Designated funds are funds which are 'ring-fenced' to be used for the specific purpose of the congress.

Restricted funds are funds, which are to be used in accordance with specific restrictions imposed by the donor. The aim and use of the restricted fund is set out in the notes of the financial statements.

### *1.6 Tangible fixed assets and depreciation*

Capital expenditure on items costing £1,000 or higher are recorded as tangible fixed assets. Tangible fixed assets are stated at historical cost less depreciation.

Depreciation is provided to reflect the useful estimated economic life of computer equipment assets at a rate of 33% per annum (reducing balance method).

Notes to the Financial Statements for the Year Ended 31 December 2023

2. Incoming resources

	OTHER	Healthcare Industry Partners	Projects	Total
	£	£	£	£
GSK	-	39,584	-	39,584
IFPMA	-	44,354	-	44,354
Projects	-	-	410,197	410,197
Other income	126,592	-	-	126,592
	<u>126,592</u>	<u>83,938</u>	<u>410,197</u>	<u>620,727</u>

*Income Resources comparative*

	OTHER	Healthcare Industry Partners	Projects	Total
	£	£	£	£
Merck	-	48,332	-	48,332
MYLAN PHARMACEUTICALS PVT LTD	-	44,151	-	44,151
IFPMA	-	40,245	-	40,245
Pfizer Inc	-	25,946	-	25,946
GSK IHC	-	42,815	-	42,815
P4PS OBSERVATORY	-	5,769	-	5,769
MSD INTERNATIONAL	-	27,155	-	27,155
Congress Sponsorship	-	82,973	-	82,973
Projects	-	-	257,863	257,863
Other income	7,404	(11)	-	7,393
	<u>7,404</u>	<u>317,375</u>	<u>257,863</u>	<u>582,642</u>

Notes to the Financial Statements for the Year Ended 31 December 2023

3. Congress Support Income 2023

	APPC congress	GPC congress	Total
	£	£	£
ROCHE PHARMA HOLDING	32,309	39,220	71,529
NOVARTIS	-	11,679	11,679
BIOMARIN PHARMACEUTICAL	-	31,246	31,246
	<u>32,309</u>	<u>82,145</u>	<u>114,454</u>

*Congress Support income comparative 2022*

	Asia Pacific Congress	Latin America Patients Congress	Total 2022
	£	£	£
BOEHRINGER INGEL	59,065	-	59,065
Merck	-	23,909	23,909
	<u>59,065</u>	<u>23,909</u>	<u>82,973</u>

Notes to the Financial Statements for the Year Ended 31 December 2023

4. Expenditure on Charitable Activities

	Staff Costs	Other Costs	Support Costs	Total
Capacity Building, advocacy and collaboration	86,326	-	65,952	152,278
Congress	7,008	86,288	4,397	97,693
Special Projects	63,071	277,628	17,587	358,286
<b>Total</b>	<b>156,405</b>	<b>363,916</b>	<b>87,936</b>	<b>608,257</b>

*Expenditure on Charitable Activities comparative*

	Staff Costs	Other Costs	Support Costs	Total 2022
Capacity Building, advocacy and collaboration	88,131	32,668	67,134	187,933
Congress	-	112,661	858	113,519
Special Projects	53,597	40,558	3,519	97,674
<b>Total</b>	<b>141,728</b>	<b>185,887</b>	<b>71,511</b>	<b>399,126</b>

5. Analysis of support costs

	Capacity Building, advocacy and collaboration	Congress	Special Projects	Total
Rent and Rates	5,321	355	1,419	7,095
Other Office Costs	38,300	2,553	10,213	51,066
Legal and Professional Fees	17,750	1,184	4,733	23,667
Audit Fees	4,581	305	1,222	6,108
<b>Total</b>	<b>65,952</b>	<b>4,397</b>	<b>17,587</b>	<b>87,936</b>

Notes to the Financial Statements for the Year Ended 31 December 2023

*Analysis of support costs comparative*

	Capacity Building, advocacy and collaboration	Congress	Special Projects	Total 2022
Rent and Rates	5,710	72	300	6,082
Other Office Costs	40,446	517	2,120	43,083
Legal and Professional Fees	15,768	202	826	16,796
Audit Fees	5,210	67	273	5,550
<b>Total</b>	<b>67,134</b>	<b>858</b>	<b>3,519</b>	<b>71,511</b>

**6. Trustees and staff remuneration**

The trustees received no remuneration, but 6 Trustee received reimbursements of £22,056 (2022: £3,455) for travel and subsistence expenses incurred on behalf of the charity.

*Staff remuneration and numbers*

	Total 2023 £	Total 2022 £
Wages and salaries	125,376	127,094
Social Security	13,167	14,390
Pension costs	660	244
	<b>139,203</b>	<b>141,728</b>

The average number of full and part-time employees during the year was 3. No individual employee received emoluments in excess of £60,000 (2022: 1 in the band £70,001 to £80,000). Key management personnel costs amounted to £74,315 (2022: £71,544).



Notes to the Financial Statements for the Year Ended 31 December 2023

**7. Operating Surplus**

Operating surplus is stated after charging.

	Total 2023	Total 2022
	£	£
Auditors Remuneration	5,550	5,550
Depreciation of Assets	-	134
Operating Lease Charges (office rental)	7,095	5,633

**8. Fixed Assets**

	Computer equipment £
<b>Cost</b>	
Brought forward	4,169
Carried forward	<u>4,169</u>
<b>Depreciation</b>	
Brought forward	4,169
Charge for the year	-
Carried forward	<u>4,169</u>
<b>Net book value</b>	
At 31 December 2023	<u>-</u>
At 31 December 2022	<u>-</u>

There are no charges or securities held over any fixed assets. All fixed assets are held in the charity and none in the trading subsidiary. Depreciation was nil was in the previous period.

Notes to the Financial Statements for the Year Ended 31 December 2023

9. Debtors

	2023 £	2022 £
Debtors	-	1,235
Prepayments	6,868	6,880
	<u>6,868</u>	<u>8,115</u>

10. Creditors: amount falling due within one year

	2023 £	2022 £
Deferred income	113,590	73,423
Accruals	38,633	27,487
	<u>152,223</u>	<u>100,910</u>

11. Analysis of net assets between funds

	Unrestricted Fund £	Designated Funds £	Restricted Funds £	Total Funds £
Current assets	231,149	-	466,316	697,465
Current liabilities	-	(21,351)	(130,872)	(152,223)
As at 31 December 2023	<u>231,149</u>	<u>(21,351)</u>	<u>335,444</u>	<u>545,242</u>

Notes to the Financial Statements for the Year Ended 31 December 2023

**12. Analysis of net assets between funds comparative**

	Unrestricted Fund £	Designated Funds £	Restricted Funds £	Total Funds £
Current assets	287,351	-	346,331	633,682
Current liabilities	-	(38,112)	(62,798)	(100,910)
As at 31 December 2022	287,351	(38,112)	283,533	532,772

The deficit in the designated fund is due to timing difference between the time we held the event and the time we received the income.

**13. Movement in funds 2023**

	At 31 December 2022 £	Incoming Resources £	Resources Expended £	Transfers £	At 31 December 2023 £
<u>Unrestricted fund</u>	287,351	96,076	(152,278)	-	231,149
<u>Designated Funds: -</u>					
APPC congress	2,367	32,309	(698)	-	33,978
GPC congress	5,233	82,145	(96,995)	-	(9,617)
Africa congress	(22,241)	-	-	-	(22,241)
Latin Congress	(23,471)	-	-	-	(23,471)
<u>Restricted funds: -</u>					
PREFER	29,296	-	-	(29,296)	-
Special projects *	254,237	410,197	(358,286)	29,296	335,444
	532,772	620,727	(608,257)	-	545,242

Notes to the Financial Statements for the Year Ended 31 December 2023

14. Movements in funds comparative

	At 31 December 2021	Incoming Resources	Resources Expended	Transfers	At 31 December 2022
	£	£	£	£	£
<u>Unrestricted fund</u>	264,025	241,805	(187,933)	(30,546)	287,351
<u>Designated Funds: -</u>					
APPC congress	(22,459)	59,065	(64,785)	30,546	2,367
GPC congress	6,589		(1,355)		5,233
Africa congress	(22,241)				(22,241)
Latin Congress		23,909	(47,379)		(23,471)
<u>Restricted funds: -</u>					
PREFER	38,352		(9,056)	-	29,296
Special projects*	65,761	257,863	(69,387)	-	254,237
Other projects - Get Real	19,231		(19,231)	-	-
	<u>349,257</u>	<u>582,642</u>	<u>(418,432)</u>	<u>-</u>	<u>532,772</u>

## Notes to the Financial Statements for the Year Ended 31 December 2023

## 15. SOFA Comparative

	N o t e s	Unrestricted	Designated	Restricted	Total 2022  (year)
		£	£	£	£
<b>Income from charitable activities:</b>					
Membership		4,092	-	-	4,092
Healthcare Industry Partners		234,401	-	-	234,401
APPC congress		-	59,065	-	59,065
GPC congress		-	-	-	-
Africa congress		-	-	-	-
Latin congress		-	23,909	-	23,909
Special Projects		-	-	257,863	257,863
Other charitable activities		3,312	-	-	3,312
<b>Total</b>	<b>2</b>	<b>241,805</b>	<b>82,973</b>	<b>257,863</b>	<b>582,642</b>
<b>Expenditure on charitable Activities:</b>					
Charitable activities:-					
· Capacity building, advocacy and collaboration		187,933	-	-	187,933
· Asia Pacific Patients Congress		-	64,785	-	64,785
· Global Patients Congress		-	1,355	-	1,355
· Africa Patients Congress		-	-	-	-
· LatAm Patients Congress		-	47,379	-	47,379
· Special projects		-	-	97,674	97,674
<b>Total</b>	<b>4</b>	<b>187,933</b>	<b>113,519</b>	<b>97,674</b>	<b>399,126</b>
<b>Net income/(expenditure)</b>		<b>53,872</b>	<b>(30,546)</b>	<b>160,189</b>	<b>183,516</b>
Transfers		(30,546)	30,546	-	-
<b>Net movement in funds</b>		<b>23,326</b>	<b>-</b>	<b>160,189</b>	<b>183,516</b>
<b>Reconciliation of funds:</b>					
Funds brought forward		264,025	(38,112)	123,344	349,257
<b>Total funds carried forward</b>		<b>287,351</b>	<b>(38,112)</b>	<b>283,533</b>	<b>532,772</b>

# Thank You

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The International Alliance of Patients' Organizations is registered in England and Wales as charity n° 1155577 and company limited by guarantee n° 08495711.

 Address

Registered office: Hounslow House, 7 Bath Road, Hounslow TW3 3EB, UK.

 Website

[www.iapo.org.uk](http://www.iapo.org.uk)

