

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP

*(a company limited by guarantee and
not having share capital)*

DIRECTORS' REPORT AND ACCOUNTS

31 DECEMBER 2004

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP

*(a company limited by guarantee
and not having a share capital)*

(Company number: SC256268)

(Charity Number: SCO035056)

DIRECTORS' REPORT AND ACCOUNTS

31 DECEMBER 2004

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
DIRECTORS' REPORT AND ACCOUNTS FOR
THE PERIOD ENDED 31 DECEMBER 2004

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INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
LEGAL AND ADMINISTRATIVE INFORMATION

CONSTITUTION

International Primary Care Respiratory Group is a company limited by guarantee (company number SC256268) and recognised as a charity by the Inland Revenue (charity number: SCO 035056). The charitable company is governed by its Memorandum and Articles of Association.

DIRECTORS AND TRUSTEES

The directors of the charitable company (“the charity”) are its trustees for the purposes of charity law. The directors are:

	Date of appointment
Dr Anders Ostrem (President)	22 March 2004
Dr Hugh J Fardy	19 February 2004
Dr Monsur Habib	10 May 2004
Dr Alan Kaplan	19 February 2004
Dr Bruno F Noveletto	9 April 2004
Dr Marianne Ostergaard	27 September 2004
Dr James J Reid	19 February 2004
Dr Miguel R Rodriguez	1 April 2004
Dr Dermot Ryan	19 February 2004
Dr Ivo Smeele	9 August 2004
Dr Reggie Spelman	22 March 2004
Dr Bjorn Stallberg	19 February 2004
Dr Ron Tomlins	19 February 2004
Dr Mohammad O Yusuf	2 May 2004
Dr Theodora Zachariadou	26 March 2004

ORGANISATION

The company is managed by the Board of Directors.

SECRETARY

Dr Ron Tomlins

REGISTERED OFFICE

Department of General Practice & Primary Care
Foresterhill Health Centre
Westburn Road
Aberdeen
AB25 2AY

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
LEGAL AND ADMINISTRATIVE INFORMATION (continued)

AUDITORS

Anderson Anderson & Brown
6 Carden Place
Aberdeen
AB10 1UR

BANKERS

Bank of Scotland
Princes House
50 West Campbell Street
Glasgow

SOLICITORS

Shepherd & Wedderburn
Saltire Court
20 Castle Terrace
Edinburgh

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP DIRECTORS' REPORT

The directors submit their report and the audited accounts of the charitable company for the period from date of incorporation on 18 September 2003 to 31 December 2004.

Legal and administrative information set out on page 1 forms part of this report. The accounts comply with current statutory requirements, the Memorandum and Articles of Association and the Statement of Recommended Practice – Accounting and Reporting by Charities.

OBJECTS AND PRINCIPAL ACTIVITIES

The primary objects of the charity are to improve public health by carrying out funding and organising research into the care, treatment and prevention of respiratory illnesses, diseases and problems in a community setting, and to make available the results of such research for the benefit of the public and healthcare professionals.

RESULTS

The net incoming resources for the period, amounting to £59,854, have been dealt with as shown in the Statement of Financial Activities.

REVIEW OF ACTIVITIES AND FUTURE DEVELOPMENTS

The company was recognised by the Inland Revenue as a charity with effect from 18 September 2003.

Over the last 15 months, the charity's objectives have been to:

- Increase the number and spread of associate member countries and invited international organisations. When the charity was launched it represented 21 countries. It now represents 15 full members and a further 17 associated member countries. The European Federation of Allergy & Airways Diseases Patients' Associations ("EFA") joined us in the last quarter of 2004 as an international associate member.
- Improve communication with our current members through e-mail, and engage them in our sub-committee work. We now have a regular e-mail alert system, and an increasing number of volunteers to join our work.
- Develop our website as our primary means of communicating with members and a wider professional and lay respiratory audience. The number of monthly visits to the website increased from 379 in September 2003 to 4,179 in December 2004 and the number of monthly hits from 2,780 to 10,518.

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP

DIRECTORS' REPORT (continued)

- Formulate and consult on our first statement of primary care respiratory research needs. A major consultation meeting was held in September 2004 at the European Respiratory Society meeting in Glasgow.
- Organise and run a scientifically and financially successful biennial conference in Melbourne in February 2004. This meeting attracted over 400 international delegates and created a small surplus, split between the host organiser, National Asthma Council Australia, and the IPCRG; this was in spite of the risk of a potential SARS outbreak.
- Enhance the value of our Primary Care Respiratory Journal, jointly badged with the General Practice Airways Group, by encouraging high quality international contributions. The number of submissions rises monthly.
- Increase in our international presence. In October 2004 the Wonca World Council elected us as an Organisation in Collaborative Relations. A number of IPCRG members participated in respiratory workshops during both the European Regional Wonca meeting in Amsterdam in June and the World Council meeting in Orlando in October.
- Formalise our policies on sponsorship and endorsement. These policies were approved at the turn of the year and are now available on the IPCRG website.

In 2005, our key priorities are to:

- Increase awareness of the IPCRG. We have accepted an invitation to participate in, and have reciprocal weblinks with, the World Conference Leadership Summit in Las Vegas in June 2005. We are co-badging three respiratory meetings in the first half of the year: the Asthma and Allergic Rhinitis MetaForum with the University of Southampton; the Edinburgh meeting on COPD and the Aberdeen meeting on COPD and asthma with the University of Aberdeen. We can already welcome the National Respiratory Training Centre as a new invited associate international member in 2005.
- Confirm the scientific programme for Third World Conference to be held in Oslo in June 2006 and develop a robust and achievable budget and risk management strategy.
- Further develop our website. We have already piloted searchable registers for current research and recent publications for primary care respiratory practitioners, and will be launching these in the next quarter, together with our statement of research needs. At the end of 2004 we launched the home pages of our Norwegian group, Lunger I Praksis that has driven more visits to the site. In January 2005 the website received 200 more visits than December 2004. We have set a target of adding another four home pages to the website this year.

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP

DIRECTORS' REPORT (continued)

- Publish in a peer-reviewed journal symptom-based guidelines for primary care in the prevention, diagnosis and management of asthma, allergic rhinitis and COPD, using the best available evidence. Members of the IPCRG were involved in producing a guide for practitioners that will be published in Spring 2005. The evidence-based document is planned for publication in October 2005. It will address the different levels of resources available for respiratory disease in developing and more developed countries.
- Convert Associate Members to Ordinary Member status. We have set a target of moving two of our Associates to this level, where we judge their organisations to be sufficiently robust to take on the Board level responsibilities of the IPCRG. We are working with our Associate Corporate Sponsors to develop relationships in Germany, Italy and France.
- Rationalise the distribution of the Primary Care Respiratory Journal. The journal is a popular benefit of membership, and is likely to become more popular if it succeeds, in the second quarter, in gaining Medline listing. However, it is also a major item of our expenditure. We are exploring with the publisher and our members how to ensure fair distribution, given our growing membership.
- Fundraise to address our research needs and to enable us to commence multi-national real-life studies using our unique international network of primary care researchers.
- Initiate education programmes delivered by and for primary care practitioners. We aim to run our first modular accredited courses in late 2005/early 2006.
- Support individuals in our developing country membership through providing research mentorship and travel grants to enable them to attend international respiratory meetings. A small travel fund has been created.

DIRECTORS AND DIRECTORS' INTERESTS

The directors of the company during the period ended 31 December 2004 were as noted on page 1, together with I M C Meiklejohn who was appointed on 18 September 2003 and who resigned on 19 February 2004.

The company has no share capital or debentures.

ORGANISATIONAL STRUCTURE

A board of directors comprising one representative from each ordinary member organisation, administers the charity. There are sub-committees covering Governance; Guidelines; Membership and Research. An Executive Officer is appointed by the directors to manage the day to day operations of the charity with support from a Business Manager.

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
DIRECTORS' REPORT (continued)

METHOD OF APPOINTMENT AND APPROVAL OF DIRECTORS

The powers for appointment and removal of directors are set out in the company's Memorandum and Articles of Association.

RELATED PARTIES

The ordinary members of the charitable company are national and international organisations. Each director of the charitable company is a member of one of the ordinary member associations.

RESERVES

The directors aim to build as quickly as possible a free liquid asset position that would enable the organisation to continue running for several months in the event of a catastrophe or close the organisation with a minimum loss of reputation if this becomes inevitable. As a new organisation we estimate this will take some years to achieve.

RISK MANAGEMENT

The directors have assessed the major risks to which the company is exposed, in particular those related to the operations and finance of the company and are satisfied that systems are in place to mitigate the exposure to major risks.

AUDITORS

Anderson Anderson & Brown were appointed the company's first auditors and have expressed their willingness to continue in office and a resolution proposing their re-appointment will be submitted at the annual general meeting.

By order of the board

.....
R TOMLINS
Director – R Tomlins

.....
3 MAY 2005
Date

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
STATEMENT OF DIRECTORS' RESPONSIBILITIES

Company law requires the directors to prepare accounts for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the net income or expenditure of the charity for that period. In preparing those accounts, the directors are required to:

- a) select suitable accounting policies and then apply them consistently;
- b) make judgements and estimates that are reasonable and prudent;
- c) state whether or not applicable United Kingdom Accounting Standards have been followed, subject to any material departures disclosed and explained in the accounts; and
- d) prepare the accounts on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The directors are responsible for keeping accounting records which disclose with reasonable accuracy at any time the financial position of the charity and which enable them to ensure that the accounts comply with the Companies Act 1985. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP

We have audited the accounts on pages 9 to 14 which have been prepared under the historical cost convention and the accounting policies set out on pages 11 and 12.

This report is made solely to the company's members, as a body, in accordance with Section 235 of the Companies Act 1985. Our audit work has been undertaken so that we might state to the company's members 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 company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of directors and auditors

As described on page 7 the company's directors, who are also the charity trustees for the purposes of charity law, are responsible for the preparation of the Directors' Report and accounts in accordance with applicable law and United Kingdom Accounting Standards.

Our responsibility is to audit the accounts in accordance with relevant legal and regulatory requirements and United Kingdom Auditing Standards.

We report to you our opinion as to whether or not the accounts give a true and fair view and are properly prepared in accordance with the Companies Act 1985. We also report to you if, in our opinion, the Directors' Report is not consistent with the accounts, if the charitable company has not kept proper accounting records, if we have not received all the information and explanations we require for our audit, or if information specified by law regarding directors' remuneration and transactions with the company is not disclosed.

We read the other information contained in the Directors' Report and consider the implications for our report if we become aware of any apparent misstatements within it or material inconsistencies with the accounts. Our responsibilities do not extend to any other information.

Basis of opinion

We conducted our audit in accordance with United Kingdom Auditing Standards issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the accounts. It also includes an assessment of the significant estimates and judgements made by the directors in the preparation of the accounts, and of whether or not the accounting policies are appropriate to the charitable company's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the accounts are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the accounts.

Opinion

In our opinion the accounts give a true and fair view of the state of the charitable company's affairs as at 31 December 2004 and of its incoming resources and application of resources, including income and expenditure for the period then ended and have been properly prepared in accordance with the Companies Act 1985.

ANDERSON ANDERSON & BROWN

Anderson Anderson & Brown
Chartered Accountants
Registered Auditors
Aberdeen
3 MAY 2005

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
STATEMENT OF FINANCIAL ACTIVITIES
(INCLUDING INCOME AND EXPENDITURE ACCOUNT)
FOR THE PERIOD FROM 18 SEPTEMBER 2003 TO 31 DECEMBER 2004

	Note	£
INCOMING RESOURCES		
Donations, legacies and similar incoming resources	2	57,469
Activities in furtherance of charity's objects:		
Subscriptions		106,367
Conference income		216,675
Investment income		788
TOTAL INCOMING RESOURCES		<u>381,299</u>
RESOURCES EXPENDED		
Cost of generating funds		6,009
Charitable expenditure:		
Cost of charitable activities	3	282,253
Management and administration		33,183
TOTAL RESOURCES EXPENDED		<u>321,445</u>
MOVEMENT IN TOTAL FUNDS FOR THE PERIOD, NET INCOME FOR THE PERIOD AND TOTAL FUNDS CARRIED FORWARD	8	<u><u>£ 59,854</u></u>

The company has made no gains or losses other than as reported above.

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
BALANCE SHEET – 31 DECEMBER 2004

	Note	£
CURRENT ASSETS		
Cash at bank and in hand		105,926
CREDITORS: <i>amounts falling due within one year</i>		
Accruals and other creditors	7	<u>46,072</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		<u><u>£ 59,854</u></u>
UNRESTRICTED FUNDS	8	<u><u>£ 59,854</u></u>

Signed on behalf of the board of directors

.....
R TOMLINS
Director – R Tomlins

.....
3 MAY 2005
Date

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
NOTES ON THE ACCOUNTS – 31 DECEMBER 2004

1. ACCOUNTING POLICIES

(a) *Basis of accounts preparation*

The accounts are prepared under the historical cost convention, and in accordance with applicable accounting standards, the Companies Act 1985 and the Statement of Recommended Practice – Accounting and Reporting by Charities, issued in October 2000.

(b) *Incoming resources*

i) Donations

Donations including donations in kind, are included in the Statement of Financial Activities in the year in which they are receivable.

ii) Subscriptions

Annual subscriptions are included in full in the year to which they relate. Subscriptions received in advance are released to the Statement of Financial Activities in the year to which they relate.

iii) Conference income

Conference income, in respect of the biennial conference, is included in the Statement of Financial Activities in the year in which it is receivable.

(c) *Resources expended*

Resources expended are included in the Statement of Financial Activities on an accruals basis, inclusive of any irrecoverable VAT.

Expenditure is directly attributed to the relevant category in the Statement of Financial Activities where practical. Executive officer and business support fees are allocated across activities based on time incurred in each area.

Management and administration comprises costs for the running of the charity itself as an organisation.

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
NOTES ON THE ACCOUNTS – 31 DECEMBER 2004

1. ACCOUNTING POLICIES (continued)

(d) *Taxation*

The company is recognised by the Inland Revenue as a charity and therefore the company is not liable to taxation.

(e) *Foreign currencies*

Assets, liabilities, revenues and costs denominated in foreign currencies are recorded at the rates of exchange ruling at the dates of the transactions; monetary assets and liabilities at the balance sheet date are translated at the year-end rate of exchange. The resulting profits or losses are dealt with in the profit and loss account.

(f) *Funds*

Unrestricted funds include incoming resources receivable or generated for the objects of the charity without further specified purpose and are available as general funds. These funds can be used in accordance with the charitable objects at the discretion of the directors.

2. DONATIONS, LEGACIES AND SIMILAR INCOMING RESOURCES

	£
IPRCG (the Association)	48,875
Other donations	8,594
	<hr/>
	£ 57,469
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The donation received from IPRCG (“the Association”) is a non-recurring item which arises from the transfer of the net funds held by the Association at 17 September 2003. The activities of the Association were transferred to the charitable company which was incorporated on 18 September 2003.

INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
NOTES ON THE ACCOUNTS – 31 DECEMBER 2004

3. CHARITABLE EXPENDITURE

	£
Guideline development	8,343
Biennial conference	206,364
Membership benefits	38,769
Research	8,523
Website	20,254
	<hr/>
	£ 282,253
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4. STAFF COSTS AND NUMBERS

The company had no employees during the period except the directors.

5. DIRECTORS' EMOLUMENTS AND EXPENSES

The directors received no remuneration or expenses from the company during the period except for A Ostrem and R Tomlins who received honoraria totalling £5,536.

6. MOVEMENT IN TOTAL FUNDS FOR THE PERIOD *is stated after charging:*

	£
Auditors' remuneration - audit fees	2,500
- non-audit fees	950
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7. CREDITORS: *amounts falling due within one year*

	£
Accruals and other creditors	3,450
Deferred income	42,622
	<hr/>
	£ 46,072
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INTERNATIONAL PRIMARY CARE RESPIRATORY GROUP
NOTES ON THE ACCOUNTS – 31 DECEMBER 2004

8. MOVEMENT IN FUNDS

	£
Incoming resources for period	294,464
Resources expended for period	(234,610)
	<hr/>
At 31 December 2004	£ 59,854
	<hr/> <hr/>

9. RELATED PARTY TRANSACTIONS

Control

Throughout the period the company was controlled by the directors. Details of the directors' interests in the share capital are set out in the directors' report.

Transactions

The biennial conference which took place in 2004 was run and organised by the National Asthma Council Australia Limited, which is a member organisation of IPCRG.

10. LEGAL STATUS

International Primary Care Respiratory Group is a company limited by guarantee and not having a share capital. The members' liability in the event of winding up is limited by guarantee not exceeding £1 per member.