
UKPIPS
(A company limited by guarantee)

UNAUDITED
TRUSTEES' REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 28 FEBRUARY 2017



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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE COMPANY, ITS TRUSTEES AND ADVISERS
FOR THE YEAR ENDED 28 FEBRUARY 2017**

Trustees

Elizabeth Mary Macartney, Trustee
Geoffrey Oliver Peter Moore, Trustee
Sue Rees (appointed 8 July 2016)

**Company registered
number**

7957558

**Charity registered
number**

1148789

Registered office

De Montfort House
7e Enterprise Way
Vale Business Park
Evesham
Worcestershire
WR11 1GU

Accountants

Brian Cook Associates
Chartered Accountants
Marine House
151 Western Road
Haywards Heath
West Sussex
RH16 3LH

**Scottish charity
registered number**

SC044636

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TRUSTEES' REPORT
FOR THE YEAR ENDED 28 FEBRUARY 2017

The Trustees present their annual report together with the financial statements of UKPIPS for the year 1 March 2016 to 28 February 2017. The Trustees confirm that the Annual Report and financial statements of the company comply with the current statutory requirements, the requirements of the company's governing document and the provisions of the Statement of Recommended Practice (SORP), applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) as amended by Update Bulletin 1 (effective 1 January 2015).

Since the company qualifies as small under section 383, the strategic report required of medium and large companies under The Companies Act 2006 (Strategic Report and Director's Report) Regulations 2013 is not required.

Objectives and Activities

a. POLICIES AND OBJECTIVES

The Charity's objectives are:

- To provide information and support for patients (and their carers, partners and family) with a Primary Antibody Deficiency and other Primary Immune Deficiencies, residing permanently or temporarily in the United Kingdom
- To establish a volunteer medical panel comprising appropriate experts
- To advance the education of the general public and medical community in all areas relating to a Primary Antibody Deficiency and other Primary Immune Deficiencies
- To promote the social and medical welfare of people with a Primary Antibody Deficiency and other Primary Immune Deficiencies
- To encourage research into Primary Antibody Deficiency and other Primary Immune Deficiencies
- To champion recognition and representation
- To expand activities from time to time in any way that may be consistent with the foregoing in order to bring benefit to the community of people in the UK with a Primary Antibody Deficiency and other Primary Immune Deficiencies.

Achievements and performance

a. REVIEW OF ACTIVITIES

Volunteers continue to be a vital component of the UKPIPS workforce and particular thanks must be given to Julian Hill, Di Woodward, Abi Conneally, Ian Arnold. It is with great sadness that the Trustees share the news of the sudden and unforeseen death of Ian Arnold, which was as a direct result of complications due to his Primary Immune Deficiency. Ian contributed enormously to our IT function and to ensuring protection from external threats to our confidential data. Our thoughts go out to his wife Emma and their children Megan and Daniel. Ian was a good friend to all of us and his death was a reminder of how precarious life can be when living with a PID. UKPIPS is a member of several umbrella groups, these include but are not exclusive: Genetic Alliance UK, Rare Disease UK, the Specialised Health Care Alliance, Benefits and Work, Disability UK and BSI Patient Participation Group. Liz Macartney is a Patient and Public Voice member of NHS England's Medicine's Optimisation Clinical Reference Group.

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 28 FEBRUARY 2017

Strategy Development

A Five Year Business Plan has been adopted by the Trustees to reflect the needs of this growing organisation. The need for support coming from our beneficiaries has increased to the point that voluntary workers are unable to fulfil the ever-increasing demands. With this in mind, the business plan reflects the need for paid positions to offer Advocacy, Benefits Advice, Co-ordination for Volunteers and a Business Manager to take over from John Macartney. In order to obtain funding for these positions Liz Macartney, John Macartney and Caroline Middleton will continue to work on the strategy of fundraising from Grant Giving Bodies.

Providing Information and Support to our Beneficiaries

UKPIPS remains an audited member of the Information Standard and our leaflet libraries remain very well received, although our community members continue to report that some of these are not available to them to look through during their appointments at out-patient clinics. The leaflet aimed at GP's "How to Diagnose A Primary Antibody Deficiency Patient" was extremely well received at the RCGP conference and John Macartney and Sue Rees reported many "light bulb moments" from GPs who stated that they would be going to re-look at some of their patients. The issue of attempting to get GPs to realise that PAD is not as rare as they believe it to be continues to be a very difficult nut to crack. World PI Day saw us distributing these leaflets to over 70 GP surgeries, however none of these responded to our invitation to display our posters or to re-visit "revolving door" patients. Several other new leaflets are being worked on, but the main emphasis is to ensure that Carolyn Middleton becomes proficient at managing the system for Information Production.

Patient Days

In July Liz and John Macartney attended the Birmingham Heartlands Patient Day, which gave the opportunity for patients treated in this centre and Birmingham Queen Elizabeth Hospital to meet Members of UKPIPS and to discuss issues that they faced which they asked UKPIPS for help and support. In October Julian Hill and Di Woodward attended the Oxford Patients Day on behalf of UKPIPS, on the same day that Liz and John Macartney ran a UKPIPS patient's day near Scunthorpe. This was very well received and saw patients attending from a very wide area. It re-emphasised the isolation that both patients and carers of PIDs share in coping with a PID experience and the need to provide a safe environment for people to meet and discuss the issues that they face with their peers. The issues that most brought up were

- i) Not being able to access appropriate medical care away from their clinical immunology centre.
- ii) Lack of understanding of how PID affects patients by non-immunology clinicians and the lack of co-ordination between consultant immunologists and other consultants caring for patient with a PID.
- iii) The fear induced by having to attend A&E departments, even in the same hospitals as the patient's clinical immunology team, since the majority of clinicians refuse to even contact the immunologist, let alone liaise with them.
- iv) Benefits. The number of people who have lost benefits or been denied both ESA and PIP was extremely worrying. The booklets from Benefits and Work were very well received.
- v) Lack of understanding of PIDs as a disability as defined under the Equalities Act in both work places and educational institutions.
- vi) The failure of some consultant immunologists to understand the all-encompassing nature of PIDs and how they diminish an entire family's quality of life, this appeared to be linked in the attendee's minds to a lack of understanding about how difficult it is for a patient or carer to insist to non-immunologist medical personnel that it was crucial that the care plan decided upon by their immunology team was followed to the letter.
- vii) Following on from this, GP's who refused to prescribe antibiotics in line with care plans were in the majority of those discussed at the meeting.
- viii) Lack of information about PID's and how they affect people, particularly for newly diagnosed patients and for family and friends of both newly diagnosed and long-term patients.
- ix) The hurtful and ignorant things that people say to patients and their carers. Many people, even family members and long-term friends, make comments such as "you don't look ill", "pull yourself together", "everybody gets ill sometimes" and "have you tried (xyz alternative therapy) that worked for me? I'm certain it would for you as well". People stated that, even when such people were told that the condition was genetic, they

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 28 FEBRUARY 2017

still did not “get” the life-threatening nature of PIDs.

UKPIPS uses information gathered from such meetings to prioritise leaflet generation. A leaflet for family and friends is currently being written.

Website

Our website is very attractive and generates compliments from experts in the field and from other organisations. However, many of our beneficiaries report that they find it extremely difficult to navigate and to locate the information they are seeking. Steve O'Neill continues to provide a remunerated service for managing the uploading of material but Trustees and Members would like to be able to upload items themselves. The Trustees will identify funding for the building of a new website and then put out a tender for its creation.

Facebook

The Membership of the Facebook groups grows weekly and is becoming extremely vibrant. Liz Macartney, Sue Rees and Jackie Murray are moderators for both the England and Scotland closed Facebook Groups. Liz uploads information to the open Facebook Page, which generates up to 800 views for certain posts.

Twitter

Liz Macartney puts certain information on to the UKPIPS twitter feed, but it is not as active as it should be. The Trustees acknowledge the need to recruit a volunteer to operate this for UKPIPS.

Advocacy

The need for advocacy services is increasing, mainly due to the difficulty patients face in obtaining essential medical help in emergency situations. The UKPIPS insurers were contacted in relation to one incident which resulted in a Trustee being accused of libel by a consultant immunologist. It transpired that the “legal advisor” this person had employed to threaten the Trustees of UKPIPS had no legal qualifications. However, UKPIPS had to consult with a leading Barrister to satisfy themselves that there was no case to answer. The patient concerned has reported the doctor concerned to various bodies and the Trustees have now closed this case. However, this situation highlights some extremely worrying trends that patients face when attempting to access appropriate medical care. Another issue about which the Trustees have been extremely concerned, is the alteration, without notification to its user group, of the service offered to Primary Immune Deficient patients by Barts Health NHS Trust. The Clinical Immunology Service, which cares for one of the largest Primary Antibody Deficiency patient cohorts in the UK, offered an in-patient facility which was one of only two that UKPIPS is aware of in the UK. The ability for Consultant Immunologists to admit their patients to Immunology beds lessened the in-patient days for patients and repeat hospitalisation. UKPIPS was made aware that this service had been withdrawn by its community members. Further investigation uncovered that the Clinical Immunology Service had completely disappeared from the Barts Health Organisational Plan and that this service had now become a part of immunopathology. As a result of this, the doctor who had been appointed under transparent employment procedures, had been replaced by another without any employment policies or procedures having been undertaken. The loss of the knowledge and expertise of this Clinical lead was of extreme concern to UKPIPS and the patients receiving the service from Barts Health who became aware of the situation. UKPIPS drew the situation to the notice of NHS England and to the Secretary of State for Health, noting that, if NHS Hospital Trusts cannot show that the employment processes for the crucial Clinical Leads for Specialised Clinical Immunology Services, then patients, who are the end users of the service and NHS England, who are the commissioners of the service, can have no assurance that the most well qualified and appropriate person has been appointed to take the lead. This is an essential service for patients living with the Long Term Conditions that are also Rare Diseases that Specialised Services for Immunology supply. UKPIPS spent many hours and untold amounts of energy liaising with NHS England and Barts health. Whilst we are pleased to be able to state that the Immunology beds are, for the time being, available to the PID patient cohort in the Royal London Hospital, the issue over appointment of clinical lead for the service remains unresolved. Whilst this has been highlighted in this specific hospital trust, it is a situation which must be addressed by the Department of

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 28 FEBRUARY 2017

Health and the NHS organisations in the four home nations. Clinicians caring for people with a Rare Disease, gain their knowledge of such patients through long years of research and practice. Losing such expertise is a tragedy for the patients and a disgrace to the NHS. The Trustees continue to support the work to address this situation with the Department of Health, NHS England and Barts Health.

UKPIPS is working very closely with the Department of Health and NHS England on all of the issues outlined above, and are grateful to the Department of Health, who have stated in writing that UKPIPS has their support. In light of the increasing workload and the stress levels Advocacy imposes on our volunteers, the Trustees intend to identify funding to employ a professional to undertake this work.

Benefits Advice:

UKPIPS is working with the Department of Work and Pensions to ensure that people living with a PID are assessed appropriately by those employed to undertake face to face assessments of claimants. However, many of our community members continue to be denied benefits and UKPIPS has attended two tribunals and has contributed to several appeals. When UKPIPS intervenes at this level, the applicant has always been awarded the benefit applied for. However, even when UKPIPS works with the applicant at the initial stage of completing an application, many people are denied benefit at the initial stage of assessment even if this decision is revised at the stage of mandatory reconsideration. It is extremely worrying that people living with a PID are being discriminated in this way and UKPIPS intends to ensure that the service it offers its community members will continue. To this end the Trustees intend to seek funding for an employee to undertake this work.

Newsletter

The Trustees would like to extend their thanks to Sara Wade for the excellent work she has done for UKPIPS in producing its newsletters. However, the burden of producing content for these falls mainly on the shoulders of John and Liz Macartney and those acting as moderators for the closed Facebook Groups. The Trustees will work on a strategy for producing articles which will lessen this burden on this core group of people in future. The Trustees would also like to extend their very grateful thanks to Mr. Nigel Goode who stepped in as our Volunteer I.T. Manager early in our current financial year, to validate and complete the I.T. work previously set in motion by Ian Arnold prior to his untimely death.

Medical Advisory Panel

The Trustees would like to extend their thanks to those Doctors and Nurses who act as advisors for UKPIPS. Without their support UKPIPS would not be able to provide literature which is appropriate for the target audience at which it is aimed.

UK PIPS Scotland activities from March 2016 to February 2017
Reported by UKPIPS Scotland Trustee – Sue Rees

1. The Scotland closed Facebook group, now has a membership of 45. Not all have given their locations. However, where this is disclosed indicates that most of the membership is located in Scotland's central belt - Glasgow in the west, Edinburgh in the east. Others are nearby in Fife, Lanark and Perth. This gives us an idea of where to locate any events in the future.

Engagement with Genetic Alliance (Scotland). Up until the Scottish parliamentary election held on the 5th May 2016 I was a member of the CPG for Rare Diseases representing UK PIPS in Scotland. The last item to be discussed was the importance of specialist nursing and I organised anonymised opinions from members of our UKPIPS Scotland Facebook group for Genetic Alliance. This topic is to be revisited in the current parliamentary session. I enjoyed attending the Rare Disease Day where the Scottish Government released details of its financial support for Scotland's contribution to the UK Genome project. The hope is that this could lead to faster diagnosis for those with rare diseases and treatments. Making use of the provided display boards, I enlarged our 'Power of Ten' poster to A3 to be displayed at the event.

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The revised CPG on Rare, Genetic and Undiagnosed Conditions has now been set up to run for the current parliamentary term.

2. NPPEAG (Plasma group NHS Scotland). Attending the quarterly Plasma group meetings has put me on a steep learning curve, but I have been involved in agreeing the IgG batch usage practice - i.e. keeping to the same batch number per patient wherever possible. We have also worked to introduce the immunoglobulin usage database which has now been rolled out to all of NHS Scotland. We have had infusion product companies visit us, present their new products and continue to agree the awarding of new IG supply contracts. I liaise with Liz Macartney on the work of this group.

3. Joint attendance at the RCGP AGM Harrogate. Last October I assisted John Macartney with the UK PIPS information display at this event plus I took the opportunity to network with other Charities especially those based in Scotland as well as the DWP in an attempt to make them aware of the challenges of living with PID's in relation to claiming benefits.

4. Carried out an exercise to collect all GP practice addresses in Edinburgh for bulk mailing of UKPIPS information folders.

5. Engaged with my Civil Service Union at local branch level re PID in the Workplace.

6. Wrote articles for my department's Digital newsletter – ROS news, on attending RCGP AGM and Rare Disease day at the Scottish Parliament.

7. Supported members of both closed Facebook groups. Sometimes leading on to advocacy on their behalf with the relevant immunology team.

8. Benefit advice for Members. Working closely with Liz Macartney, this is an area of support that is only going to increase. This is due to the complexity of the benefits system and the routinely poor decisions made by contractor organisations carrying out assessments on behalf of the DWP. The assessors have little or no knowledge about our patient cohort.

In conclusion of my first year as Trustee and Representative for Scotland, our profile is growing slowly. There is a lot of scope for doing much more with the various NHS Scotland immunology teams as well as arranging events for the Scottish members. I also plan to grow my relationship with the Scottish Government as they are developing their own limited benefit system.

International

Trustees are pleased to announce the formal launch of AusPIPS, our sister organisation in Australia. Whilst this organisation is based on the UKPIPS model and we work very closely together, UKPIPS and AusPIPS are legally and physically two completely separate entities. We look forward to a very close working relationship with them and wish them all the best for the future.

Deaths

Whilst it is true that many people diagnosed with a Primary Immune Deficiency go on to live a normal lifespan, the Trustees wish to remember those who have died as a direct result of their PID over this financial year. We cannot name everyone here, but particularly note James, Shelley, Martin, Ian and Rosalind who were all active members of our Facebook groups and many of whom have contributed to the work of UKPIPS. We extend our deepest sympathies to their families and assure them that UKPIPS remains available to them.

It is essential that UKPIPS continues to underline the impact that PIDs have on patient's lives as well as their families. PIDs continue to be incurable diseases and even Primary Antibody Deficiencies can cause significant

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 28 FEBRUARY 2017

morbidity to those living with them, even when their disease is well controlled, and leads to early deaths for some of our community.

Financial review

a. GOING CONCERN

After making appropriate enquiries, the trustees have a reasonable expectation that the company has adequate resources to continue in operational existence for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the Accounting Policies.

b. PRINCIPAL FUNDING

Our funding comes from donations from members of the UKPIPS community and support from pharmaceutical companies. However, the highlight for this year was the Birmingham Zebra run, which was organised and managed, for the benefit of UKPIPS, by staff from Biotest UK. It was a fabulous day which highlighted the work of UKPIPS, enabled several community members to use their talent for marathon running to support us and brought a higher profile to Primary Immune Deficiencies to the general public. The Trustees would like to extend their thanks to Biotest UK, and to the members of their employee body who volunteered their time and expertise in order to make the event such a resounding success.

Structure, governance and management

a. CONSTITUTION

The company is registered as a charitable company limited by guarantee. It is constituted under a Memorandum of Association dated 20/2/2012 and is a registered charity number 1148789 in England and Wales and SC044636 in Scotland.

The principal object of the company is to promote and protect the physical and mental health of sufferers of Primary Antibody Deficiency and other Primary Immune Deficiencies in the United Kingdom through the provision of support, education and practical advice.

b. METHOD OF APPOINTMENT OR ELECTION OF TRUSTEES

The management of the company is the responsibility of the Trustees who are elected and co-opted under the terms of the Articles of Association.

Plans for future periods

a. FUTURE DEVELOPMENTS

Awareness Project Phase 3

- To further develop the work of maintaining contacts with Immunology Centres throughout the UK.
- To continue to raise awareness of UKPIPS and the issues for PAD and PID patients at Governmental level and specifically within the Department of Health and the Department of Work and Pensions.
- To develop a working relationship with the Benefits Agency and those organizations contracted to work on assessing applicants for benefits. To develop a working relationship with the Royal College of General

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TRUSTEES' REPORT (continued)
FOR THE YEAR ENDED 28 FEBRUARY 2017

Practitioners and to build on our relationships with UKPIN, BSI, ABPI, NHS England, Genetic Alliance, Rare Disease UK, the Alliance for Specialist Commissioning and all other not-for-profit organizations working for PID patients in the UK and internationally.

Information Production

- To continue to hold the Information Standard to ensure that our leaflets comply with these rigorous standards.
- UKPIPS plans to complete work on another leaflet aimed at GP's of diagnosed PAD patients, "How to care for your Primary Antibody Deficiency Patient".
- We have five further leaflets aimed at patients and their carers in production and one to inform educational establishments about the needs of PID students. We hope to have all of these ready to be published by the end of 2016. To do this we will continue to comply with the requirements of the Information Standard.
- The Administrator is in training to oversee the process and support the Co-ordinator in this work.

Communications and Media

- Website – To provide a more efficient and effective method of publishing up-to-date information on the website.
- IT Systems – Continue the work to ensure that the UKPIPS IT system is more robust and sustainable.
- Stella Hulott has offered to undertake one PR release for UKPIPS which we may need to use in relation to difficulties people experience in obtaining appropriate levels of state benefits.

Staff Resources

UKPIPS has reached a 'crossroads' in its steady growth since formation in 2012. In order to achieve its objectives over the coming three to five years, it will need to recruit the following salaried personnel while still encouraging participation from its many volunteers. Below is a list of posts the charity needs to fill. Appointments will be made in line with the availability of incoming funds from grant awarding Charities and Trusts in which such funds are consistent with meeting salary, pension and NI requirements for a minimum period of up to three years forwards.

- Fundraising Officer
- Office Manager
- Volunteers Co-ordinator
- Awareness Officer 1
- Awareness Officer 2
- Children and Families Officer
- Information Officer
- Chief Executive Officer

- Early in 2016, UKPIPS recruited a salaried Administration Assistant. This position is currently filled with the post holder working a ten hour week.
- Progressively filling the above posts will allow the further growth of UKPIPS and do much to ensure its future growth and stability in continuing to offer and provide support to patients throughout the UK with a Primary Immune Deficiency.

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TRUSTEES' REPORT (continued)
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MEMBERS' LIABILITY

The Members of the company guarantee to contribute an amount not exceeding £1 to the assets of the charity in the event of winding up.

In preparing this report, the Trustees have taken advantage of the small companies exemptions provided by section 415A of the Companies Act 2006.

This report was approved by the Trustees, on 9 November 2017 and signed on their behalf by:

Elizabeth Mary Macartney, Trustee

Geoffrey Oliver Peter Moore, Trustee

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INDEPENDENT EXAMINER'S REPORT
FOR THE YEAR ENDED 28 FEBRUARY 2017

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF UKPIPS

I report on the financial statements of the company for the year ended 28 February 2017 which are set out on pages 12 to 22.

This report is made solely to the company's Trustees, as a body, in accordance with section 145 of the Charities Act 2011 and regulations made under section 154 of that Act. My work has been undertaken so that I might state to the company's Trustees those matters I am required to state to them in an Independent examiner's report and for no other purpose. To the fullest extent permitted by law, I do not accept or assume responsibility to anyone other than the company and the company's Trustees as a body, for my work or for this report.

RESPECTIVE RESPONSIBILITIES OF TRUSTEES AND EXAMINER

The Trustees, who are also the directors of the company for the purposes of company law, are responsible for the preparation of the financial statements. The Trustees consider that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the Act) and that an independent examination is needed.

Having satisfied myself that the company is not subject to audit under charity or company law and is eligible for independent examination, it is my responsibility to:

- examine the financial statements under section 145 of the Act;
- follow the procedures laid down in the general Directions given by the Charity Commission under section 145(5)(b) of the Act; and
- state whether particular matters have come to my attention.

BASIS OF INDEPENDENT EXAMINER'S REPORT

My examination was carried out in accordance with the general Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the company and a comparison of the financial statements presented with those records. It also includes consideration of any unusual items or disclosures in the financial statements, and seeking explanations from you as Trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently no opinion is given as to whether the financial statements present a 'true and fair view' and the report is limited to those matters set out in the statement below.

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INDEPENDENT EXAMINER'S REPORT (continued)
FOR THE YEAR ENDED 28 FEBRUARY 2017

INDEPENDENT EXAMINER'S STATEMENT

In connection with my examination, no matter has come to my attention:

- (1) which gives me reasonable cause to believe that in any material respect the requirements:
 - to keep accounting records in accordance with section 386 of the Companies Act 2006; and
 - to prepare financial statements which accord with the accounting records, Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard in the UK and Republic of Ireland (FRS 102) and in other respects comply with the accounting requirements of section 396 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities.have not been met; or
- (2) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the financial statements to be reached.

Signed:

Dated: 9 November 2017

Brian T Cook FCA

BRIAN COOK ASSOCIATES

Chartered Accountants

Marine House
151 Western Road
Haywards Heath
West Sussex
RH16 3LH

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**STATEMENT OF FINANCIAL ACTIVITIES INCORPORATING INCOME AND EXPENDITURE ACCOUNT
FOR THE YEAR ENDED 28 FEBRUARY 2017**

	Note	Endowment funds 2017 £	Unrestricted funds 2017 £	Total funds 2017 £	<i>Total funds 2016 £</i>
INCOME AND ENDOWMENTS FROM:					
Donations and legacies	2	-	30,398	30,398	28,887
Other trading activities	3	-	4,003	4,003	5,403
Investments	4	-	9	9	10
TOTAL INCOME AND ENDOWMENTS		-	34,410	34,410	34,300
EXPENDITURE ON:					
Raising funds:					
Voluntary income	5	-	124	124	818
Other charitable activities	6	-	29,942	29,942	28,726
TOTAL EXPENDITURE		-	30,066	30,066	29,544
NET INCOME BEFORE OTHER RECOGNISED GAINS AND LOSSES		-	4,344	4,344	4,756
NET MOVEMENT IN FUNDS		-	4,344	4,344	4,756
RECONCILIATION OF FUNDS:					
Total funds brought forward		4,859	18,615	23,474	18,718
TOTAL FUNDS CARRIED FORWARD		4,859	22,959	27,818	23,474

The notes on pages 14 to 22 form part of these financial statements.

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REGISTERED NUMBER: 7957558

BALANCE SHEET
AS AT 28 FEBRUARY 2017

	Note	£	28 February 2017 £	£	29 February 2016 £
FIXED ASSETS					
Tangible assets	9		1,975		1,877
CURRENT ASSETS					
Stocks		809		156	
Cash at bank and in hand		25,539		21,946	
			<u>26,348</u>		<u>22,102</u>
CREDITORS: amounts falling due within one year	10	(505)		(505)	
NET CURRENT ASSETS			<u>25,843</u>		<u>21,597</u>
NET ASSETS			<u>27,818</u>		<u>23,474</u>
CHARITY FUNDS					
Endowment funds	11		4,859		4,859
Unrestricted funds	11		22,959		18,615
TOTAL FUNDS			<u>27,818</u>		<u>23,474</u>

The company's financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The Trustees consider that the company is entitled to exemption from the requirement to have an audit under the provisions of section 477 of the Companies Act 2006 ("the Act") and members have not required the company to obtain an audit for the year in question in accordance with section 476 of the Act.

The Trustees acknowledge their responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The financial statements were approved and authorised for issue by the Trustees on 9 November 2017 and signed on their behalf, by:

Elizabeth Mary Macartney, Trustee

Geoffrey Oliver Peter Moore, Trustee

The notes on pages 14 to 22 form part of these financial statements.

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 28 FEBRUARY 2017

1. ACCOUNTING POLICIES

1.1 Basis of preparation of 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 accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The financial statements have been prepared to give a 'true and fair' view and have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a 'true and fair' view. This departure has involved following the Charities SORP (FRS 102) published on 16 July 2014 rather than the Accounting and Reporting by Charities: Statement of Recommended Practice effective from 1 April 2005 which has since been withdrawn.

UKPIPS meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

1.2 Reconciliation with previous Generally Accepted Accounting Practice

In preparing these accounts, the Trustees have considered whether in applying the accounting policies required by FRS 102 and the Charities SORP FRS 102 the restatement of comparative items was required.

No restatements were required.

1.3 Company status

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

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 28 FEBRUARY 2017

1. ACCOUNTING POLICIES (continued)

1.4 Income

All income is recognised once the company has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

For legacies, entitlement is taken as the earlier of the date on which either: the company is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the company has been notified of the executor's intention to make a distribution. Where legacies have been notified to the company, or the company is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Donated services or facilities are recognised when the company has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use of the company of the item is probable and that economic benefit can be measured reliably.

On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the company which is the amount the company would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Income tax recoverable in relation to investment income is recognised at the time the investment income is receivable.

1.5 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably.

All expenditure is accounted for on an accruals basis. All expenses including support costs and governance costs are allocated to the applicable expenditure headings.

Support costs are those costs incurred directly in support of expenditure on the objects of the company. Governance costs are those incurred in connection with administration of the company and compliance with constitutional and statutory requirements.

Expenditure on charitable activities include costs incurred on the company's operations, including support costs and governance costs..

1.6 Tangible fixed assets and depreciation

A review for impairment of a fixed asset is carried out if events or changes in circumstances indicate that the carrying value of any fixed asset may not be recoverable. Shortfalls between the carrying value of fixed assets and their recoverable amounts are recognised as impairments. Impairment losses are recognised in the Statement of financial activities incorporating income and expenditure account.

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1. ACCOUNTING POLICIES (continued)

Tangible fixed assets are carried at cost, net of depreciation and any provision for impairment. Depreciation is provided at rates calculated to write off the cost of fixed assets, less their estimated residual value, over their expected useful lives on the following bases:

Office equipment	-	25% reducing balance
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1.7 Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the company; this is normally upon notification of the interest paid or payable by the Bank.

1.8 Cash at Bank and in hand

Cash at bank and in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

1.9 Liabilities and provisions

Liabilities 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. Liabilities are recognised at the amount that the company anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide. Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

1.10 Fund accounting

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

Designated funds comprise unrestricted funds that have been set aside by the Trustees for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statements.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the company for particular purposes. The costs of raising and administering such funds are charged against the specific fund. Restricted funds fall into one of two sub-classes: restricted income funds or endowment funds. The aim and use of each restricted fund is set out in the notes to the financial statements.

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**NOTES TO THE FINANCIAL STATEMENTS
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2. INCOME FROM DONATIONS AND LEGACIES

	Endowment funds 2017 £	Unrestricted funds 2017 £	Total funds 2017 £	Total funds 2016 £
Donations	-	7,806	7,806	5,455
Grants	-	22,592	22,592	23,432
Total donations and legacies	-	30,398	30,398	28,887
<i>Total 2016</i>	<i>-</i>	<i>28,888</i>	<i>28,888</i>	

3. FUNDRAISING INCOME

	Endowment funds 2017 £	Unrestricted funds 2017 £	Total funds 2017 £	Total funds 2016 £
JustGiving	-	3,665	3,665	2,798
Baxalta bike ride	-	-	-	2,605
Sale of Christmas cards, pin badges and scarves	-	338	338	-
Total	-	4,003	4,003	5,403
<i>Total 2016</i>	<i>-</i>	<i>5,403</i>	<i>5,403</i>	

4. INVESTMENT INCOME

	Endowment funds 2017 £	Unrestricted funds 2017 £	Total funds 2017 £	Total funds 2016 £
Interest on cash	-	9	9	10
Total	-	10	10	
<i>Total 2016</i>	<i>-</i>	<i>10</i>	<i>10</i>	

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**NOTES TO THE FINANCIAL STATEMENTS
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5. FUNDRAISING COSTS

	Endowment funds 2017 £	Unrestricted funds 2017 £	Total funds 2017 £	Total funds 2016 £
Cost of Christmas cards, pin badges and scarves	-	124	124	368
Other costs	-	-	-	450
	-	124	124	818
<i>Total 2016</i>	-	818	818	

6. SUPPORT COSTS

	Total 2016 £	Total 2016 £
Office supplies	1,588	895
Communication costs	1,052	958
Computer costs	2,999	1,547
Travel	3,572	7,197
Accommodation and subsistence	1,101	3,875
Postage	909	440
Sundry expenses	262	456
Event cost	4,860	4,880
Patient support	540	98
Volunteer costs	-	17
Insurance	689	424
JustGiving fees	216	216
Publications	481	1,073
Rental	5,560	5,480
Accountancy	504	541
Legal and professional	1,205	-
Bank charges	4	2
Wages and salaries	3,742	-
Depreciation	658	626
Total	29,942	28,725
<i>At 29 February 2016</i>	<i>28,725</i>	

The following Governance Costs are included in Support Costs:

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NOTES TO THE FINANCIAL STATEMENTS
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GOVERNANCE COSTS

	2017	<i>2016</i>
	£	£
Accountancy	504	<i>541</i>

7. NET INCOME/(EXPENDITURE)

This is stated after charging:

	2017	<i>2016</i>
	£	£
Depreciation of tangible fixed assets:		
- owned by the charity	658	<i>626</i>
Accountancy	504	<i>541</i>

During the year, no Trustees received any remuneration (2016 - £NIL).
During the year, no Trustees received any benefits in kind (2016 - £NIL).
During the year, no Trustees received any reimbursement of expenses (2016 - £533).

8. STAFF COSTS

Staff costs were as follows:

	2017	<i>2016</i>
	£	£
Wages and salaries	3,742	<i>-</i>

The average number of persons employed by the company during the year was as follows:

	2017	<i>2016</i>
	No.	No.
Administration	1	<i>0</i>

No employee received remuneration amounting to more than £60,000 in either year.

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**NOTES TO THE FINANCIAL STATEMENTS
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9. TANGIBLE FIXED ASSETS

	Office equipment £
Cost	
At 1 March 2016	3,196
Additions	756
	3,952
At 28 February 2017	3,952
Depreciation	
At 1 March 2016	1,319
Charge for the year	658
	1,977
At 28 February 2017	1,977
Net book value	
At 28 February 2017	1,975
	1,975
At 29 February 2016	1,877
	1,877

10. CREDITORS: Amounts falling due within one year

	28 February 2017 £	<i>29 February 2016 £</i>
Accruals and deferred income	505	505
	505	505

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**NOTES TO THE FINANCIAL STATEMENTS
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11. STATEMENT OF FUNDS

STATEMENT OF FUNDS - CURRENT YEAR

	Balance at 1 March 2016 £	Income £	Expenditure £	Balance at 28 February 2017 £
Unrestricted funds				
General Funds	18,615	34,410	(30,066)	22,959
Endowment funds				
Sherrard prize for medical students	4,859	-	-	4,859
Total of funds	<u>23,474</u>	<u>34,410</u>	<u>(30,066)</u>	<u>27,818</u>

STATEMENT OF FUNDS - PRIOR YEAR

	<i>Balance at 1 March 2015 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 29 February 2016 £</i>
Unrestricted funds					
General Funds	13,492	34,300	(29,177)	-	18,615
	<u>13,492</u>	<u>34,300</u>	<u>(29,177)</u>	<u>-</u>	<u>18,615</u>
Endowment funds					
Sherrard prize for medical students	4,859	-	-	-	4,859
	<u>4,859</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>4,859</u>
Total of funds	<u>18,351</u>	<u>34,300</u>	<u>(29,177)</u>	<u>-</u>	<u>23,474</u>

The Sherrard prize for medical students fund was set up in a prior year and will be used to support research or development of clinical practice in the field of primary immune deficiency.

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**NOTES TO THE FINANCIAL STATEMENTS
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12. ANALYSIS OF NET ASSETS BETWEEN FUNDS

ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT YEAR

	Endowment funds 2017 £	Unrestricted funds 2017 £	Total funds 2017 £
Tangible fixed assets	-	1,975	1,975
Current assets	4,859	21,488	26,347
Creditors due within one year	-	(504)	(504)
	<u>4,859</u>	<u>22,959</u>	<u>27,818</u>

ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR YEAR

	<i>Endowment funds 2016 £</i>	<i>Unrestricted funds 2016 £</i>	<i>Total funds 2016 £</i>
Tangible fixed assets	-	1,877	1,877
Current assets	4,859	17,242	22,101
Creditors due within one year	-	(504)	(504)
	<u>4,859</u>	<u>18,615</u>	<u>23,474</u>

13. SCOTTISH CHARITY REGISTRATION

On 7 February 2014 UKPIPS registered as a charity under the Charities and Trustee Investment (Scotland) Act 2005. It is entered on the Scottish Charity Register under number SC044636. The charity trustees for UKPIPS are jointly responsible for running the charity and complying with Scottish charity regulations.