

## LIFEBOX FOUNDATION

# TRUSTEES' REPORT AND FINANCIAL STATEMENTS FOR THE PERIOD 1 APRIL 2016 TO 31 MARCH 2017

**Charity Registration No 1143018** 

Company Registration No 7612518 (England & Wales)

# LIFEBOX FOUNDATION ADMINISTRATIVE INFORMATION FOR THE YEAR ENDED 31 MARCH 2017

#### Trustees

Dr Angela Enright
Dr Atul Gawande
Professor Alan Merry
Mrs Pauline Philip
Dr lain H Wilson
Dr Isabeau Walker

#### Secretary

Kristine Stave

Registered Charity Number 1143018

Registered Company Number 7612518

#### Registered office

21 Portland Place London W1B 1PY

#### **Auditors**

Cansdales Bourbon Court, Nightingales Corner Little Chalfont HP7 9QS

#### **Bankers**

HSBC Plc. 117 Great Portland Street London W1A 4UY

#### Solicitors

Kirkland & Ellis International LLP 30 St Mary Axe London EC3A 8AF

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The Trustees, who are also the directors of Lifebox Foundation (the 'Charity') for the purposes of company law, submit their annual report and the audited financial statements of the Charity for the period 1 April 2016 to 31 March 2017.

The Trustees confirm that the annual report and financial statements of the Charity have been prepared in accordance with the accounting policies set out in note 1 and comply with the Charity's Memorandum and Articles of Association, the Companies Act 2006

and the Accounting and Reporting by Charities: Statement of Recommended Practice (SORP) issued on 16 July 2014 (as updated through Update Bulletin 1 published on 2 February 2016).

The information regarding the Charity, its Trustees, Officers, Legal and Administrative information forms part of this report. The Trustees' report is also the directors' report required by s.471 of the Companies Act 2006.

## ----- STRUCTURE, GOVERNANCE AND MANAGEMENT

#### Management of the Charity

The Board of Trustees is the body responsible for the management of the Charity. The Board meets face-to-face twice annually and through formal teleconferences at regular intervals throughout the year. Pauline Philip is the Chief Executive of the Charity, a position for which she receives no remuneration. She is supported in the day-to-day management of the Charity's activities by Kristine Stave (Secretary and Executive Director). All major decisions regarding the Charity are approved by the Board of Trustees.

#### **Governing document**

The Charity is a charitable company limited by guarantee and governed by its Memorandum and Articles of Association, as amended by special resolutions dated 15 July 2011, 15 May 2012 and 21 November 2015.

The Memorandum and Articles restrict the liability of members on winding up to £5. In the case of winding up none of the accumulated funds are distributable to the members, but will be applied for charitable causes as decided by a majority of the Trustees.

#### Appointment and election of Trustees

The Charity has two classes of Trustees: A Directors, of which there are four, who are members and B Directors who shall be appointed by resolution of the members for a three year term. B Directors are eligible for reappointment at the first Board meeting of the year in which their term expires. None of the Trustees has any beneficial interest in the Charity.

The Trustees, who are also the directors for the purpose of company law, and who served during the year were:

Dr Atul Gawande A Director (Chairman)

Mrs Pauline Philip

A Director

Dr Iain H Wilson A Director

Dr Angela Enright

A Director

Professor Alan Merry

**B** Director

Dr Isabeau Walker

**B** Director

#### Induction and training of Trustees

New Trustees undergo an orientation to brief them on their legal obligations under charity and company law, the content of the Memorandum and Articles of Association, the decision-making process within the Charity, risk register, annual targets and financial performance. Trustees are also introduced to the Charity's employees and briefed on their areas of work. Trustees are encouraged to attend appropriate external training events where these will facilitate the undertaking of their role.

#### Risk management

The Trustees are committed to a policy of identifying, monitoring and managing the risks that might adversely affect the activities of the Charity. In this context, risk is defined as the potential to fail to achieve the Charity's objectives and for loss, financial and/or reputational. An ongoing process is in place for identifying, evaluating and managing any significant risks faced by the Charity and identified by the Trustees. Appropriate actions have been put in place

to mitigate the exposure to and possible consequences of, these risks.

#### **Employees**

During 2016/17 the Charity had seven employees.

#### ------ CHARITABLE OBJECTS AND ACTIVITIES -----

As stated in the Articles of Association, the objects of the Charity are:

- To preserve and protect the health of patients worldwide by providing and assisting in the provision of equipment and support services in lowresource, lower-middle income and upper-middle income countries, as assessed by the World Bank and United Nations, at no or reduced cost; and
- To advance the education in healthcare of the general public and especially those in the medical or similar professions by the provision of education and training worldwide.

The Trustees have paid due regard to the guidance on public benefit issued by the Charity Commission in deciding what activities the Charity should undertake and believe that, in reading the Trustees' report in totality, any reader would be satisfied that the objectives of the Charity have been achieved through the activities completed during this year.

#### Area of focus

As set out in the charitable objects, Lifebox Foundation was established to improve the safety of healthcare around the world through the provision of essential equipment and training, and by implementing proven tools that foster a culture of teamwork and safety in healthcare environments.

Our current focus continues to be on surgery, often referred to as the 'neglected stepchild of global health', but with a larger burden of disease than HIV/Aids and malaria put together. During 2016/17 surgery continued to gain prominence within the global health community, following the previous year's World Health Organization Resolution affirming its importance as part of Universal Health Coverage.

#### The Lifebox intervention for safer surgery

We improve surgical safety in low- and middle-income countries by facilitating universal access to essential monitoring with a pulse oximeter in the operating theatre, alongside introduction of the basic safety checks included in the WHO Surgical Safety Checklist and training in the use of both. Tens of thousands of operating theatres around the world are still performing surgeries without access to lifesaving oximeters and we work to change this.

The pulse oximeter which Lifebox provides is based on WHO specifications for the ideal monitor for use in low-resource settings and was chosen after a competitive global tender run under the auspices of the World Federation of Societies of Anaesthesiologists (WFSA), one of our founding organizations.

This oximeter is robust and intuitive, uses rechargeable batteries and generic probes, and requires no calibration. It comes with a two-year warranty and education materials in six languages. Most importantly, while high-quality, we estimate that it costs substantially less than other operating theatre monitors available on the commercial market.



Lifebox oximeter being used postoperatively in Mongolia

The combination of the WHO Surgical Safety Checklist – containing 19 essential checks for safe surgery - and pulse oximetry has been consistently proven to reduce surgical mortality by more than 30% in all settings. <sup>1</sup>

<sup>&</sup>lt;sup>1</sup> A surgical safety checklist to reduce morbidity and mortality in a global population. Haynes AB, Weiser TG, Berry WR, Lipsitz SR, Breizat AH, Dellinger EP, Herbosa T, Joseph S, Kibatala PL, Lapitan MC, Merry AF, Moorthy K, Reznick RK, Taylor B, Gawande AA; Safe Surgery Saves Lives Study Group. N Engl J Med. 2009 Jan 29;360(5):491-9

----- ACTIVITIES -----

#### Pulse oximeter distribution

This remains our flagship programme: A yellow box beeping out the sound of safer anaesthesia on a global scale, an education framework that integrates safer practices and a commitment to longer-term relationships that result in long-term sustainable change.

During the 2016/17 financial year Lifebox helped healthcare professionals in 60 countries provide safer anaesthesia to over three million surgical patients. We did so by facilitating the distribution of 3,650 pulse oximeters to hospitals and healthcare facilities in need. Thanks to our efforts, there are now over 15,000 additional pulse oximeters available in hospitals and healthcare facilities around the world compared to 2011.

Significant projects took place this year in Bangladesh, Dominican Republic, Ethiopia, Haiti, India, Kenya, Malawi, Namibia, South Sudan, Tanzania, Ukraine, Zambia and Zimbabwe.

Tanzania has just 13 specialist anaesthetists for an entire country. Lifebox has worked with colleagues at Kilimanjaro Christian Medical Centre (KCMC) in Moshi and with the Society of Anaesthesiologists of Tanzania to integrate pulse oximetry and surgical checklist into the nurse anaesthesia training curriculum and to provide oximeters for the region's anaesthetists.

Thanks to funding from the THET Africa Grants
Programme we have been able to deploy at Fellow to
KCMC and provide intensive training support to the
team there and at six other facilities in Moshi. The
results have been astounding, both for the local staff
who are now using the WHO Checklist to improve the
efficiency and safety of their surgical and anaesthetic
services, and for the Fellow: "I feel so incredibly
privileged," she explained. "Thank you to Lifebox, for an
experience I will never forget, and which will be part of
my career in global anaesthesia for the rest of my life."



Distribution of oximeters in Northern Tanzania

In India we have this year focused on Assam State where we supported training workshops and distributed oximeters for use postoperatively by recovery room nurses. This has already had a significant impact locally.



Postoperative monitoring with Lifebox in Assam, India

According to Dr Surajit Giri, consultant anaesthetist in Assam: 'My trainee anaesthetist was scared for post op but I assured him. The patient was sent directly to the recovery ward with a Lifebox pulse oximeter for monitoring. This gave my trainee a sense of security and at the same time improved the patient's safety.'

In the Dominican Republic we worked in collaboration with Lifebox USA, the non-profit Physicians for Peace and the Dominican National Health Service to deliver training and distribute oximeters to 220 anaesthesia providers around the country. Local leadership meant that in-country trainers supported by US colleagues were able to deliver an ambitious number of workshops in the most cost-effective way.



Lifebox workshop in Dominican Republic

We have also continued our work across the parts of Eastern Europe where highly qualified medical anaesthetists often have to practice without vital equipment. Kiev Clinical Hospital in the Ukraine was the site of our latest European workshop and distribution in December 2016.



Lifebox workshop in Kiev, Ukraine, December 2016

This was delivered in partnership between Lifebox, Bogomolets National Medical University, the Kiev City Hospital 1 administration, and the National Society of Anaesthesiologists. This workshop was open to a broad range of training levels: anaesthesiology and intensive care providers, to general surgery and gynaecology practitioners. 'The workshop was highly important for our personnel and for national anaesthesia efforts,' explained Dr Kateryna Bielka, from the national society's educational committee.

We continue to follow up the equipment distributed in previous years so that any issues or concerns can be addressed as soon as they arise.

#### Delivery of training and education

We remain committed to delivering training alongside every oximeter we distribute, and to working with local

professional organizations to ensure ongoing, education, support and development.

Our impact is immediate – and sustainable. 20 Lifebox workshops were delivered in 2016/17, adding another 940 healthcare workers to the roster of those who have gone through our education process. As part of this another 52 anaesthesia providers have been trained to themselves deliver the Lifebox workshop in their local hospitals and across their countries. We estimate 700 people have been given a workshop-based introduction to the WHO Surgical Safety Checklist thanks to our efforts this year.

In August 2016 we wrapped up a review of our educational materials with a view to streamlining these and making them easier to integrate into complementary training programmes delivered by other anaesthesia organizations. Work to design the materials to enhance their look and feel started in late 2016 and is expected to be finished early in the next financial year. The new modular approach will support even better integration into existing curricula and training formats, thereby ensuring we can spread education and knowledge to even more colleagues. All materials remain available to download and use, free of charge and without registering first, through our website

(http://www.lifebox.org/education).

## Optimising the pulse oximeter for children (oximetry research & development)

The work to design an upgraded Lifebox pulse oximeter and a new probe specifically for children 0-59 months old funded by the Bill & Melinda Gates Foundation continued in 2016/17. We have finalized the design of the new probe and tested through focus groups with health care workers in Bangladesh and Malawi. Testing will take place at Great Ormond Street Hospital in London early in the next financial year. Led by Lifebox Trustees Dr Isabeau Walker and Dr Iain Wilson, the project will conclude in July 2017 with prototypes available for a new probe and an upgraded oximeter box.

Reducing surgical site infections (SSIs)
We have continued to work with our US sister

organization to develop a programme to tackle SSIs through activity at a pilot site in Jimma, southwest Ethiopia. Entitled 'Clean Cut', the focus of the initial work has been on baseline data collection completed by local data collectors and "process mapping" for the six perioperative standards defined through a series of hospital walkthroughs, shadowing, and pointed questions regarding standard operating procedures and associated rationale. Data was fed back to the local implementation team monthly, and solutions were developed based on short- and long-term implementation strategies that were contextually relevant.

Implementation of this dual approach of data collection with associated quality improvement feedback loop has resulted in a dramatic increase in compliance with perioperative processes at the facility. Planning is now underway to package the intervention into a toolkit, with the goal of implementing it in two additional facilities in Addis Ababa within the next 6 months.

#### Monitoring & evaluation

During 2016/17 we worked with our US sister organization to develop a holistic and robust monitoring & evaluation (M&E) framework to be applied across all projects managed from both organizations. This process involved completing an inventory of data collection processes and tools, followed by an assessment of the quality and usefulness of current M&E activities. The Lifebox needs assessment, all training workshop-related tools, and follow-up tools were redesigned into a cyclical protocol. Staff were trained on the protocol which is currently being implemented and evaluated.

Engaging the healthcare leaders of the future In April 2016 we partnered with the UK medical student organization Medsin and the Royal Society of Medicine Students Section to host, *Beyond Borders:* The Future of Global Surgery.



This national conference was aimed specifically at medical students and trainees, to increase their awareness of global surgery and anaesthesia. The event attracted over 300 attendees, including from Belgium, Granada and Morocco. Through keynote lectures, interactive workshops and networking opportunities, attendees were able to start thinking about how to build their medical careers in a global world, develop new routes for advocacy, and learn about educational tools to reach a larger audience.

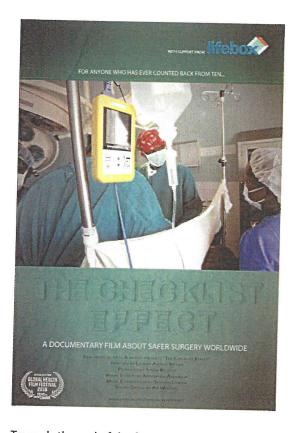
Feedback from the event was very good, and it led to the creation of a student-driven Global Surgery Day to be celebrated annually in May.

Following on from this we have launched the Lifebox Medsin Rep Scheme, aiming to eventually have a Representative at each medical school in the UK responsible for overseeing global surgery advocacy, fundraising, research links and education. Lifebox and Medsin are working together to offer support and educational resources for the Reps to deliver on an ambitious programme which includes informational events and outreach at their universities.

#### Advocacy, outreach and partnerships

The lynchpin of our advocacy and outreach work this year has been the short documentary *The Checklist Effect*, produced with Lifebox support and focusing on the challenges of delivering safe surgery in seven countries around the world.

The film is not focused on Lifebox as such, but rather highlights the importance of training, equipment and teamwork across the surgical process. It takes its name from our Chair's famous book, The Checklist Manifesto, and has been shown in eight countries across the past five months; premiering at the Global Health Film Festival in London in November 2016 and winning a number of awards.



Towards the end of the financial year we also benefitted greatly in terms of awareness-raising, by a piece on our work in Mongolia and India published by Mosaic Science in collaboration with Wellcome Trust and supported by the Bill & Melinda Gates Foundation. Entitled 'The little yellow box that's made thousands of operations safer' the piece has been reproduced in The Atlantic and was listed by The New York Times as one of 15 great stories in February 2017. Lifebox has had a significant presence at a number of

major medical conferences and events this year, using the opportunity to engage with attendees to help inform their next five-year plan.

In Europe we attended the Euroanaesthesia conference held in London at the end of May. The Lifebox name was on the wall, our oximeter was on skates - and generous contributions to our safe surgery and anaesthesia mission followed. Thanks to the European Society of Anaesthesiology, we are strengthening our links to anaesthesia providers across the European region; bringing oximeters to the Eastern European operating theatres still working without, alongside training and education.



Promotion at Euroanaesthesia in London

The World Congress of Anaesthesiologists took place in Hong Kong in August 2016. This quadrennial event is the biggest global gathering of anaesthesia providers and Lifebox was honoured to play a significant part in it with our Chair, Atul Gawande, delivering the joint opening keynote.



Lifebox stand at WCA 2016

This being our fifth anniversary year, Lifebox and the World Federation of Societies of Anaesthesiologists jointly hosted a reception to thank all those who have supported us since 2011, as well as running a formal consultation to gather input as we develop the strategy for our next five years.

Lifebox also attended the American Society of Anesthesiologists (ASA) conference in Chicago in October where we had a presence in the ASA Resource Center.



Masterclass delivered by Ethiopian colleague at ASA Our daily masterclasses in issues relevant to delivery of training, global surgery and anaesthesia proved incredibly popular and will be made part of the formal conference programme in 2017/18.

This year we also expanded our engagement with the global surgical and obstetric communities; attended the annual meetings of the College of Surgeons of Eastern, Central & Southern Africa and the West African College of Surgeons, and the Royal College of Obstetrics & Gynaecology World Congress. At the latter we held a formal consultation meeting to ensure we

capture input from those responsible for one of the most common surgical procedures in the world, namely Caesarean Sections.



Namibia Medical Doctors and Dentists Forum event

During 2016/17 we had very successful collaborations with a number of organizations which delivered Lifebox training in the field. This included Citizens of the World Foundation in Haiti, the AAGBI/WFSA SAFE programme in Bangladesh and Zambia, International Medical Corps in South Sudan and the Medical Doctors and Dentists Forum in Namibia.

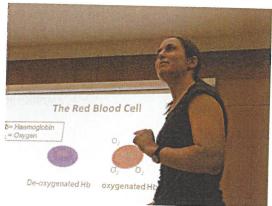
Last year we launched a partnership with the Australia & New Zealand College of Anaesthetists, the Australian Society of Anaesthetists, Interplast Australia & New Zealand and the New Zealand Society of Anaesthetists. Called 'Lifebox: Australia & New Zealand', this has enabled us to continue to support anaesthesia providers across the Western Pacific region with equipment and training, including in Micronesia and Myanmar.

#### Lifebox Fellowships

Lifebox Fellows, funded by UK anaesthesia organizations as well as through THET's Africa Grants Programme, have spent time in Ethiopia, Tanzania and Uganda during 2016/17. Their purpose has been to support the delivery of safer surgery and anaesthesia in the host institutions and work with local training programmes to support inclusion of the Lifebox educational modules into these.

The Fellowships have been immensely successful, with significant benefits arising both to those appointed, the receiving hospital and the NHS: The Fellows develop problem-solving skills and the ability to think creatively,

improving their awareness and understanding of developing health systems.



Dr Lara Herbert, 2016 Lifebox Fellow in Uganda

Their quality improvement skills are enhanced through planning, executing and evaluating a quality improvement project with guidance from an expert in the field. They further develop communication and team working skills, in addition to the rich cultural and personal experience of travel and awareness of the challenges of delivering anaesthesia in a resource-poor environment.

The NHS ultimately benefits from a more experienced workforce with greater appreciation of the sustainable use of finite healthcare resources, able to practice more resourcefully and with a deeper understanding of the global nature of healthcare.

#### ------ FINANCIAL REVIEW -----

This year we have been greatly aided by the continuing generosity of the Association of Anaesthetists of Great Britain & Ireland in providing us with free office accommodation in central London, as well as ongoing funding from the Brigham & Women's Hospital, a small number of major individual donors and the World Federation of Societies of Anaesthesiologists. Further work was done this year on a major grant received for research and development from the Bill & Melinda Gates Foundation. This year we also received a restricted grant from the Tropical Health and Education Trust for delivery of a project in Tanzania.

#### Support from professional organizations

During 2016/17 our work received generous support from professional societies from around the world making donations to us and organising their own fundraising campaigns for Lifebox. This includes the Australian Society of Anaesthetists and the American Society of Anesthesiologists. Individual hospital departments of anaesthesia, such as that in Bern University Hospital, have also been generous supporters this year. We have continued to use these funds in areas such as training and distribution of equipment.

Of note is the AAGBI fundraising initiative 'Lifeboxes for Rio' which aimed to raise enough funds for 600 pulse oximeters for distribution in low- and middle-income

countries (one for each of the British athletes taking part in the Rio de Janeiro Olympics in August 2016). The campaign reached its goal in December 2016. The total income for this year was £828,869 of which £620,275 was restricted and £208,594 was unrestricted. Our total expenditure for the year was £807,225 of which £688,759 was restricted and £118,465 was unrestricted. We had a full year of the research and development programme working on more efficient probes for use with children. Spend in this area was £474,978 for the year compared to three months of spend on this programme in the previous year (£105,042).

Our operational surplus of income over expenditure during the period was £21,644 consisting of a deficit of £62,544 on restricted funds and a surplus of £84,188 on unrestricted funds. Other gains meant that we carry forward £151,282 in restricted funds and £607,335 in unrestricted funds to support our plans for the coming year, as described below. Our principal asset at the end of the period were bank balances of £600,824 and stock worth £116,936 held with Acare Technology Co., Ltd in Taiwan. We did not own any investments.

#### Reserves policy

At the close of the period under review we retained general unrestricted funds of £513,301. The trustees consider this to be a prudent reserve at this stage of

the charity's development, having regard to our current plans staffing and other commitments for 2017/18. In 2014/15 Trustees approved a policy to maintain free reserves of £50k, at that time sufficient to cover three

months' operations. It remains policy to maintain sufficient reserves to cover three months' operations.

----- PLANS FOR THE COMING YEAR -----

During 2017/18 Lifebox will continue to work closely with Lifebox USA, with whom we share a mission of improving the safety of surgery and anaesthesia in low-resource countries. This will be facilitated by the December 2016 signing of a collaboration agreement and the setting up of a joint Global Governance Council consisting of the trustees of both entities, as well as by the global role played by the charity's Chief Operating Officer and the Chief Executive Officer of Lifebox USA.

We have already developed plans for joint delivery of education and training in Latin America - including delivering train-the-trainers workshops — and will build on this during 2017/18 in countries such as Colombia. We will also collaborate closely on the continued development and rollout of the Clean Cut surgical site infection reduction programme.

Furthermore, Lifebox plans to extend its safer anaesthesia work to additional regions of India. In this we will work closely with local colleagues and other NGOs active in the region. In addition to India we will continue to deliver oximetry distribution and training projects across Africa — with DR Congo, Ethiopia, Guinea and Zimbabwe

being particular targets for 2017/18; Asia – focusing on Bangladesh and Papua New Guinea; and Eastern Europe in collaboration with the European Society of Anaesthesiology.

As part of work to develop a multi-year global strategy for Lifebox's future work, in 2017/18 we will consult partners on needs and consider developing new investments in technology and training. Next year we will also look to go back to the market to ensure the contract for manufacture of the Lifebox pulse oximeter remains best value for money in light of possible new developments in this field of medical devices.

Through our website, blog and other social media outlets we will continue to inform and engage our supporters and colleagues worldwide, with regular updates from Lifebox programmes around the world. As always, we will continue to monitor and evaluate the ongoing utility and impact of our work, ensuring that the improvements we help local colleagues make to their surgical and anaesthesia practice are sustainable and benefit their patients long-term.

# LIFEBOX FOUNDATION STATEMENT OF TRUSTEES' RESPONSIBILITIES FOR THE YEAR ENDED 31 MARCH 2017

The Trustees (who are also the directors of Lifebox Foundation for the purposes of company law), are responsible for preparing the Report of the Trustees and the 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 year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the 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 Charity SORP
- Make judgements and estimates that are reasonable and prudent
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company 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 to 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.

## STATEMENT AS TO DISCLOSURE OF INFORMATION TO AUDITORS

So far as the Trustees are aware, there is no relevant audit information (as defined by s.418 of the Companies Act 2006) of which the charitable company's auditors are unaware; and each Trustee has taken all steps that they ought to have taken as a Trustee to make themselves aware of any audit information, and to establish that the auditors are aware of that information.

#### **AUDITORS**

The auditors will be proposed for re-appointment at a forthcoming Trustee meeting.

This report has been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

ON BEHALF OF THE BOARD

K Stave, Secretary

8.09.17

#### LIFEBOX FOUNDATION INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS FOR THE YEAR ENDED 31 MARCH 2017

We have audited the financial statements of Lifebox Foundation for the year ended 31 March 2017 which comprise the Statement of Financial Activities, the Balance Sheet and the related notes numbered 1 to 17. 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 FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland".

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

## Respective responsibilities of trustees and auditor

As explained more fully in the Trustees' Responsibilities Statement set out on page 11, 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.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

## Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or

This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the Trustees' Annual Report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

#### Opinion on financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2017, and of its
- incoming resources and application of resources, including its income and expenditure, for the year then
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice;
- and have been prepared in accordance with the requirements of the Companies Act 2006.

#### LIFEBOX FOUNDATION INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2017

## Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Trustees' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

## Matters on which we are required to report by exception

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

Dated: 18 September 2017.

James Foskett BSc(Hons) FCA DChA

Cansdales Chartered Accountants & Business Advisers **Bourbon Court** Nightingales Corner Little Chalfont **Bucks HP7 9QS** 

# LIFEBOX FOUNDATION STATEMENT OF FINANCIAL ACTIVITIES (Incorporating an Income and Expenditure Account) FOR THE YEAR ENDED 31 MARCH 2017

Income from: Donations and legacies	Note	Unrestricted £	Restricted £		2016 Total £
Charitable activities: Oximetry Distribution & Training	3	208,594	19,179	227,773	235,025
Oximetry Research & Development		-	246,498	246,498	131,402
Surgical Quality Improvement Projects		~	350,943	350,943	306,819
Total income	_	-	3,655	3,655	4,290
		208,594	620,275	828,869	677,536
Expenditure on: Raising funds	5				
Charitable activities: Oximetry Distribution & Training	5	51,079	-	51,079	49,422
Oximetry Research & Development		64,938	199,185	264,123	300,074
Surgical Quality Improvement Projects		-	474,978	474,978	105,042
Other Charitable Activities		2,449	5,424	7,873	3,367
			9,172	9,172	5,304
Total expenditure					
		118,465	688,759	807,225	463,209
Net income / (expenditure) for the year					
Transfers between funds		90,128	(68,484)	21,644	214,327
		(5,940)	5,940	-	
Net income / (expenditure) before other recognised gains and losses		84,188	(62,544)	21,644	214,327
Other gains / (losses)		74,110	-	74,110	_
Net movement in funds	13	158,298	(62,544)	95,754	214,327
Reconciliation of funds:			•		~±+,J&/
otal funds brought forward otal funds carried forward		449,037		662,863	448,536
		607,335		758,617	662,863

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

The attached notes form part of the financial statements

Note	2017 £	2017 £	2016 £	2016 £
9 10	116,936 110,470 600,824		76,618 65,098	
11	828,230		736,646	
_	-	758,617	73,763	662,863
		758,617		662,863
	_	758,617		662,863
	=	758,617	_	662,863
13		151,282	=	213,826
13	94,034		19 924	- 10,020
_	513,301	607,335	429,113	449,037
	_	758,617	_	662,863
	9 10 — 11 —	9 116,936 10 110,470 600,824 828,230 11 69,613	Note £ £  9 116,936 10 110,470 600,824 828,230 11 69,613  758,617 758,617 758,617 758,617 13 151,282 13 94,034 513,301 607,335	Note £ £ £ £  9 116,936 76,618 10 110,470 65,098 600,824 594,930 736,646 11 69,613 73,783

The financial statements have been prepared in accordance with the special provisions for small companies under Part15 of the Companies Act 2006.

Approved by the trustees on ....! and signed on their behalf by:

Name Trustee

Name Treasurer

Company registration no. 7612518

The attached notes form part of the financial statements.

#### LIFBOX FOUNDATION CASHFLOW STATEMENT FOR THE YEAR ENDED 31 MARCH 2017

Net movement in funds Adjustments for:	2017 £ 95,754	2016 £ 214,327
Decrease/(increase) in stock Decrease/(increase) in trade and other receivables Increase/(decrease) in trade and other payables	(40,318) (45,372) (4,170)	70,700 (36,835) 67,963
Net cash from operating activities	5,894	316,155
Investing activities Purchase of fixed assets Investment income	-	-
Cash flow from investing activities		
Financing activities	-	
Increase/(decrease) in borrowings  Cash flow from financing activities	-	-
Net change in cash and cash equivalents Cash and cash equivalents at start of year Cash and cash equivalents at the end of the year	5,894 594,930 600,824	316,155 278,775 594,930

#### LIFBOX FOUNDATION NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

#### 1. Accounting policies

#### a) Basis of preparation

The Lifebox Foundation is a charitable company incorporated in England & Wales. The address of the registered office is given in the charity information page of these financial statements. The nature of the charity's operations and principal activities are the preservation of health of patients worldwide by provision of equipment and support in many countries and the advancement of education in healthcare of general public, particularly those working in medical settings by provision of training.

The charity constitutes a public benefit entity as defined by FRS 102. 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) issued on 16 July 2014 (as updated through Update Bulletin 1 published on 2 February 2016), the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), the Companies Act 2006 and UK Generally Accepted Practice as it applies from 1 January 2015.

The financial statements are prepared on a going concern basis under the historical cost convention, modified to include certain items at fair value. The financial statements are presented in sterling which is the functional currency of the charity and rounded to the nearest £1.

#### b) Going concern

The trustees consider that there are no material uncertainties about the charitable company's ability to continue as a going concern. The trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

#### c) Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is more likely than not that the income will be received and that the amount can be measured reliably.

#### d) Donations of goods, services and facilities

Donations of goods and services "in kind" are included in income to the extent that they represent goods or services that would otherwise have been purchased.

#### e) Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes with the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes

#### f) Expenditure and irrecoverable VAT

Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all expenditure directly to the category. Expenditure includes any VAT which cannot be recovered and is reported as part of the expenditure to which it relates.

#### g) Allocation of support costs

Where expenditure cannot be directly attributed to particular headings, it has been allocated to activities on a basis consistent with the use of resources.

# LIFBOX FOUNDATION NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2017

## 1. Accounting policies (continued)

#### h) Staff Time

Staff costs are allocated to different areas of expenditure on the basis of time spent working in that area of activity.

#### i) Stocks

Stocks of oximeters and probes are valued at the lower of cost and their estimated net realisable value. However, they are included in the financial statements at their cost to the charity as oximeters and probes are donated to beneficiaries at no cost to the beneficiaries. Any costs incurred in the donation of these items are included within the expenditure of Lifebox Foundation.

## 2. Detailed comparatives for the Statement of Financial Activities

I prostricted December 1	2016
f c	
£	otal
	£
Donations and legacies	
Charitable activities: 234,682 343 235	.025
Oximetry Distribution & Training	.025
Oximetry Research & Development - 131,402 131	402
Surgical Quality Improvement Projects - 306,819 306	
Since dealing High Overlient Projects	290
Total income	250
234,682 442,854 677,	536
Expenditure on:	
Raising funds	
Charitable activities: 49,422 - 49,	122
	+22
Oximetry Distribution & Training Oximetry Research & Development  177,298 122,776 300,	174
Oximetry Research & Development 177,298 122,776 300, Safer Surgery 3,483 101,559 105,	
2.047	367
o their	04
Total expenditure	10-4
233,150 230,059 463,2	00
	.03
Net income / expenditure before gains / (losses) on 1,532 212,795 214,3	27
macotinents 214,5	41
Net gains / (losses) on investments	
Net income / expenditure	_
1,532 212,795 214,3	27
Transfers between funds	41
(1,031) 1,031	_
Net income / (expenditure) before other recognised 501 213,826 214,3.	7
54113 dild 105562	. /
Net movement in funds	
501 213,826 214,33	7
Total funds brought forward	. /
Total funds carried forward 448,536 - 448,53	6
449,037 213,826 662,86	-
002,00	_

#### LIFBOX FOUNDATION NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2017

## 3. Income from donations and legacies

				2017	201
				Total	Tot
	Donations	£ 155,936	£	£	
	Donated services		19,179	175,115	202,55
	AAGBI Foundation	12,260		12,260	12,26
	WFSA	40,398	-	-	4,04
		208,594	10.470	40,398	16,16
		200,334	19,179	227,773	235,02
4.	ncome from charitable activities				
		Unrestricted		2017	2016
	Oximetry Distribution & Training		Restricted	Total	Tota
	a running	£	£	£	1
	ASA Charitable Foundation				
	AAGBI Foundation	-		-	32,978
-	THET	-	55,840	55,840	30,000
	European Society of Anaesthesiology	-	27,061	27,061	
/	Anonymous	=	2,500	2,500	•
	Anonymous		34,892	34,892	17,308
	Other Donors	-	436.004	-	32,000
7	otal for Oximetry Distribution &		126,204	126,204	19,117
7	raining	-	246,498	246,498	131,403
C B	ximetry Research & Development ill & Melinda Gates Foundation				
		-	350,943	350,943	306,819
D	otal Oximetry Research & evelopment	181	350,943	350,943	306,819
Su	Irgical Quality Improvement Projects				
Br	itish Medical Association				
	oyal College of Surgeons	-	3,000	2.000	4,290
	ther Donors	-	655	3,000	-
To	tal Surgical Quality Improvement	-	3,655	655	-
Pr	Djects		3,033	3,655	4,290
То	tal income from charitable activities		601,096	601,096	142 545
	_			001,030	442,512

# Analysis of expenditure

Of the total expenditure, £118,645 was unrestricted (2016: £233,150) and £688.759 was restricted (2016: £233,150).	. Com experimente 201/	Total expenditure 201		Governance costs	2dppoir costs			Governance costs	Governance costs	support costs	Support costs	Direct costs	Staff costs			
e, £118,645 was	"	ı						Direct	Staff time		Staff time	Direct	Direct		allocation	
unrestricted (20	51,079	- Land	ī		6,503	44,576						1,037	15 E30	Ħ		Cost of raising funds
)16: £233,150) ar	264,123		15,276		36,434	212,412						83,490 128,922		ŀħ	Oximetry Distribution & Training	Charitable
ld £688.759 was r	474,978		ı		68,035	406,943						35,561 371,382		Η'n	Oximetry Research & Development	Charitable activities
estricted (2016, can			r	-, -	2.449	5,424						5,424		ťħ	Surgical Quality Improvement Projects	
	9,172		,	1		9,172						9,172			Other Charitable Activities	
				(113,421)		113,421			67,147	46,274	ī		н	h	Support	
			(15,276)			15,276	5,431	9,845					H	<b>.</b>	Governance costs	
	807,225		ı			807,225	5,431	9.845	67,147	46,274	515,937	162,590	m		2017 Total	
	463,211			ı	.00)	463 211	16,915	л 1012	23,805	26 125 -	262,446	128,106	Η'n		2016 Total	

 $\mid$  (2016: £233,150) and £688,759 was restricted (2016: £230,059).

## 6. Net income/(expenditure) for the year

This is stated after charging:

	2017	2016
Auditor's remuneration:	£	£
Audit fees	4,353	2 152
Other services	1,065	3,153 585

## 7. Analysis of staff costs, trustee remuneration and expenses and the cost of key management personnel Staff costs were as follows:

	2017	2016
Salaries and wages	£	£
Social security costs	201,463	146,692
,	17,247	13,351
	218,709	160,043

1 (2015/16: 1) member of staff, who is considered key management, received remuneration during the year that totalled £64,022 (2015/16 £28,597). No other members of staff are considered key management. No other employee received remuneration in excess of £60,000 (2015/16: 0).

One trustee received remuneration of £15,842 for professional services on a research project during the year ended 31 March 2017 (2015/16: Nil) which is permitted by Lifebox Foundation's constitution.

#### Staff numbers

The average number of employees (head count based on number of staff employed) during the year was as follows:

Raising funds	2017 No.	2016 No.
Charitable activities	1	1
Governance	4	3
Covernance	0	0
	5	4

#### 8. Taxation

The charitable company is exempt from corporation tax as all its income is charitable and is applied for charitable purposes.

#### 9. Stock

	2017	2016
Oximeters	£	£
Probes	108,454 8,482	68,093 8,525
	116,936	76,618

#### LIFEBOX FOUNDATION NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

#### 10. Debtors

11.	Trade debtors Other debtors  Creditors: amounts falling due within one year		2017 f 47,995 62,475 110,470	2016 £ 56,377 8,720 65,097
12.	Taxation and social security Accruals  Analysis of net assets between funds		2017 £ 4,103 65,510 69,613	2016 £ 4,260 69,523 73,783
	Net current assets  Net assets at the end of the year	General unrestricted £ 607,335	Restricted £ 151,282	Total funds £ 758,617
	•	607,335	151,282	758,617

#### Movement in funds

Restricted funds: Oximetry Distribution & Training Oximetry Research & Development Surgical Quality Improvement Projects Other Charitable Activities Total restricted funds	At the start of the year £ - 205,259	Income & gains  £ 264,677 350,943	Expenditure & losses £ (199,185) (474,978)	Transfers & other gains/losses £	At the end of the year £ 66,537 81,224	
	3,870	4,655	(5,424)	420	3,521	
	4,697 <b>213,826</b>	620,275	(9,172) (688, <b>759)</b>	4,475 5,940	151,282	
General funds Currency Reserve	429,113 19,924	208,594 -	(118,465)	(5,940) 74,110	513,301 94,034	
Total unrestricted funds	449,037	208,594	(118,465)	68,170	607,335	
Total funds	662,863	828,869	(807,225)	74,110	758,617	
Purnococ of wants						

#### Purposes of restricted funds

Oximetry Distribution & Training - the purpose of this fund is to facilitate access to essential monitoring during surgery via the provision of pulse oximeters to healthcare workers in low resource countries. This is done by raising funds, donating oximeters and providing training to healthcare workers.

Oximetry Research & Development - the purpose of this fund is to design an upgraded Lifebox pulse oximeter and a new probe specifically for children 0-59 months old, suitable for use in community, clinic and hospital wards in low resource countries.

Surgical Quality Improvement Projects - the purpose of this fund is to introduce basic safety checks and other procedures to surgery to improve quality of surgery and survival rates following surgery in low resource

Other charitable activities - the purpose of this fund is restricted activities which are not suitable to be categorised with the above for example a thank you celebration for our supporters and beneficiaries during our five-year anniversary year in April 2016.

Currency Reserve - the purpose of this fund is to hold and manage unrealised gains or losses arising from temporary holdings of US dollars which can be subject to fluctuation in value. These funds are held for operational purposes and are not investments.

## 14. Operating lease commitments

There were no operating lease commitments at 31 March 2017 (2016: Nil).

## 15. Capital commitments and contingent liabilities

There were no capital commitments or contingent liabilities at 31 March 2017 (2016:Nil).

#### LIFEBOX FOUNDATION NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

#### 16. Legal status of the charity

The charity is a company limited by guarantee and without share capital. There were six members at 31 March 2017 (2016: Six). If the company is wound up, the members are liable to contribute a maximum of £5 towards the costs of winding up the company and liabilities incurred whilst the contributor was a company member and for one year after ceasing to be a member.

## 17. Related party transactions

During the year two trustees (2015/16:0) received expenses totalling £1,273 in connection with their professional work on a Lifebox programme (2015/16: £0).

During the year four trustees (2015/16:3) made unrestricted donations totalling £4,473 (2015/16: £480).