

**Report of the Trustees and
Unaudited Financial Statements for the Period 6 November 2014 to 31 March 2016
for
British Paediatric Neurology Association**

	Page
Report of the Trustees	1 to 13
Independent Examiner's Report	14
Statement of Financial Activities	15
Balance Sheet	16
Notes to the Financial Statements	17 to 21
Detailed Statement of Financial Activities	22 to 23

British Paediatric Neurology Association

Report of the Trustees for the Period 6 November 2014 to 31 March 2016

The trustees present their report with the financial statements of the charity for the period 6 November 2014 to 31 March 2016. The trustees have adopted the provisions of the Statement of Recommended Practice (SORP) 'Accounting and Reporting by Charities' issued in March 2005.

REFERENCE AND ADMINISTRATIVE DETAILS

Registered Charity number

1159115

Principal address

The Coach House
Rear of 22 Chorley Road
Bolton
Lancashire
BL1 4AP

Trustees

Dr A L Lux	- appointed 6/11/2014
Professor J H Cross	- appointed 6/11/2014
Dr J H Livingston	- appointed 6/11/2014
Dr A Parker	- appointed 6/11/2014
Dr M R Smith	- appointed 6/11/2014
Dr F O'Callaghan	- appointed 6/11/2014
Dr J Lin	- appointed 27/1/2015
Dr F Gibbon	- appointed 27/1/2016
Dr M Kirkpatrick	- appointed 27/1/2016
Dr V Ramesh	- appointed 6/11/2014
	- resigned 27/1/2015

Independent examiner

Jonathan Ward ACA FCCA
ICAEW and ACCA
HSA & Co
Chartered Accountants and Statutory Auditors
Lewis House
Great Chesterford Court
Great Chesterford
Essex
CB10 1PF

Executive Director

Philippa Rodie

Bankers

Barclays Bank PLC
Cambridge Benet Street
Leicester
LE87 2BB

COMMENCEMENT OF ACTIVITIES

The charitable incorporated organisation was incorporated on 6 November 2014 and commenced trading on the same date.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing document

The BPNA is governed by its constitution, approved at an extraordinary general meeting on 3 December 2014.

**Report of the Trustees
for the Period 6 November 2014 to 31 March 2016**

STRUCTURE, GOVERNANCE AND MANAGEMENT

Method of appointment of trustees

Trustees are elected from within the membership by members, in accordance with terms of the Constitution. Terms of office for 3-years, with the exception of the President who serves 1-year as President Elect, 2-years as President and 1-year as Past president.

Induction training is provided to newly appointed trustees by the Executive Director and Secretary.

Organisational structure and decision-making

The management of the Association is ultimately the responsibility of the Trustees, who form an Executive Committee, of which the Executive Director is a co-opted member. The Executive Committee meet in person 4-times per year (January, April, June, October) and monthly by telephone conference. Day-to-day management of activities is led by the Executive Director and Secretariat management team.

Council is a larger body that meets twice per year (January and June), consisting of regional paediatric neurology representatives from around the UK and co-opted members from all related disciplines. The Deanery Advisers are responsible for supporting the education and training of doctors in this speciality in their own areas. Co-opted members ensure that there is an exchange of information and ideas with key organisations related to the care of children and young people with neurological conditions.

MEMBERS OF BPNA COUNCIL SERVING DURING 2015-16

EXECUTIVE	NAME	TERM EXPIRES
President	Jean-Pierre Lin	January 2018
Past President	John Livingston	January 2017
Secretary	Martin Smith	January 2019
Professional Support Officer	Frances Gibbon	January 2019
National Training Advisor	Alasdair Parker	January 2018
Treasurer	Andrew Lux (2nd term)	April 2017
Chair, Education Quality & Standards	Martin Kirkpatrick	January 2018
Chair, Distance Learning	Finbar O'Callaghan	January 2017
Chair, Research	Helen Cross	January 2019
Executive Director	Philippa Rodie	Co-opted
DEANERY ADVISERS		
East Anglia	Gautam Ambegaonkar	December 2018
Mersey	Ram Kumar	December 2017
London (North)	Cheryl Hemingway	December 2017
London (South)	Ming Lim	December 2017
North East	Robert McFarland	December 2017
Northern Ireland	Sandya Tirupathi	December 2017
North West	Gary McCullagh	December 2017
Oxford	Saleel Chandratre	December 2017
Scotland	Mary O'Regan (2nd term)	December 2017
South West	Anirban Majumdar	December 2017
Trent	Gabby Chow	December 2017
Wales	Cathy White	December 2017
Wessex	Katharine Forrest	December 2017
West Midlands	Shakti Agrawal	December 2017
Yorkshire	Helen McCullagh	December 2017

British Paediatric Neurology Association

Report of the Trustees for the Period 6 November 2014 to 31 March 2016

STRUCTURE, GOVERNANCE AND MANAGEMENT

CO-OPTED MEMBERS

Chair, British Paediatric Epilepsy Group	Ailsa McLellan	Co-opted
Clinical Effectiveness Co-ordinator	Gayatri Vadlamani	Co-opted
BPNSU Lead	Richard Chin	Co-opted
Editor DMCN	Bernard Dan	Co-opted
British Myology Society Representative	Helen Roper	Co-opted
British Paediatric Neurosurgical Group Rep	Dominic Thompson	Co-opted
Chair, Disability CSAC	Charlie Fairhurst	Co-opted
Neuropsychiatry Representative	Isobel Heyman	Co-opted
Chair, BPNA Scientific Meetings Committee	Evangeline Wassmer	Co-opted
PET Course Development Manager	Colin Dunkley	Co-opted
BPNA 2017 Annual Conference organiser	Alasdair Parker	January 2017
Trainee Representative, Paediatric Neurology	Sam Amin	January 2017
Trainee Representative, Disability	Vacant	Co-opted

Risk management

The trustees have assessed the major strategic, business and operational risks to which the Association is exposed, and are satisfied that systems and procedures are in place to monitor and control those risks in order to mitigate any impact they might have on the Association.

Main risks identified by the charity trustees

The trustees maintain a risk register which is updated at every Executive meeting. We have currently identified the following factors as being the main financial risks to the BPNA.

Because of the high demand for BPNA courses, and in particular for the PET courses, we have reached a point where we are currently delivering as many of these courses abroad as in the UK, and we have been approached about delivering courses in other countries also. There are significant logistical challenges with delivering these courses abroad and we believe that such further growth would not be sustainable without the development of effective partnerships with other organisations that would be able to provide resources and share any risks relating to this growth.

We have also identified as a risk the increasing challenges presented to consultant paediatricians working in neurology and neurodisability to find time to provide the time and support that is required to lecture, tutor and mentor on the short courses, distance-learning course, and mentoring scheme for new consultants. Our consultant members have remained robust and enthusiastic in this support and we hope that this will remain the case, but it is clear that the BPNA would be unable to continue in delivering these courses without this generously donated time.

OBJECTIVES AND ACTIVITIES

Purpose

The British Paediatric Neurology Association is charitable incorporated organisation (number 1159115) whose objectives are to promote the health and well-being of children with neurological disorders through:

- o The training and education of professionals working in the field of paediatric neurosciences
- o The promotion of research into the causes, effects and treatments of neurological disorders affecting children and young people
- o The improvement of knowledge of professionals, the public and patients and their families through scientific and educational meetings
- o The provision of professional support to members to facilitate the delivery of the above objectives and work with health service planners and providers to achieve this aim.

The public benefit

The trustees have had regard to the Charity Commission's guidance on public benefit in considering activities during 2015-16. They sought to meet the public benefit of promoting the health and wellbeing of children with neurological disorders in the UK and globally through the initiatives and projects listed in the section 'Main activities undertaken in relation to the purpose'.

Main activities undertaken in relation to the purpose during the period

The BPNA undertakes the following activities to achieve its charitable objectives:
Please see full details of each activity provided in 'Achievements and performance'.

1. Training the next generation of paediatric neurologists in the UK
 2. Developing and delivering 1 and 2-day short-courses, to paediatricians and other professionals, with the aim of improving the diagnosis and management of:
 - o epilepsy, through provision of Paediatric Epilepsy Training (PET) and Expert to Expert: Epilepsy courses;
 - o movement disorders, through provision of Expert to Expert: Movement Disorders;
 - o headaches, through provision of Children's Headache Training (CHaT) courses;
 - o neonatal neurology (NeoNATE) courses;
 - o children with any type of neurological condition through its comprehensive online distance learning course.Short-courses are provided through the voluntary contribution of time and expertise of 289 BPNA members.
 3. Developing and providing a comprehensive online distance learning in paediatric neurology for paediatricians and other professionals worldwide, with the aim of improving the diagnosis and management of children with any type of neurological condition.
 4. Provision of an annual scientific meeting to improve knowledge
 5. Promotion of research through:
 - o Provision of the British Paediatric Neurology Surveillance Unit (BPNSU) to enable doctors and researchers to find out how many children in the UK and Republic of Ireland are affected by particular rare diseases or conditions each year
 - o Provide seed-corn grants to support initial small scale research projects, which will provide preliminary data to support an application for external research grant funding
 - o Provide support through external research grant applications and clinical trial set-up through access to a Research Project Manager
 - o Provision of a paediatric neurology research training fellowship
 6. Support doctors who care for children with neurological disorders by providing:
 - o Mentoring (provided by 30 BPNA members voluntarily)
 - o Team support (provided by BPNA members voluntarily)
 - o Special interest groups to share expertise (organised and led by BPNA members voluntarily)
-

ACHIEVEMENT AND PERFORMANCE

Summary of the main achievements of the BPNA

1. Training

Paediatric Neurology Sub-specialty Training

The BPNA continues formal responsibility for training paediatric neurologists in the UK in collaboration with the Royal College of Paediatrics and Child Health (RCPCH) College Specialist Advisory Committee (CSAC).

Recruitment to paediatric neurology specialist training

This has been a year of highs and lows regarding training. High points included interviews for entry to paediatric neurology specialist training in December 2015, when we had a group of highly motivated applicants jousting for top position. This matched on-going examples of extremely strong performance from current trainees in terms of academic, research and training activities.

In previous reports we have alluded to problems recruiting to paediatric neurology specialist training. We have acted assertively in this area, both to ensure the application process is clear and easily accessible to trainees across the UK, in particular identifying and addressing issues that have handicapped previous applicants. We have also worked extensively in those deaneries where there has been a track record of problems advertising grid posts. We had high expectations that this would yield both a great number of applicants, and a higher number of appointees.

Despite larger numbers of posts being available across the UK, and in particular trebling the number of posts advertised in London, once more we were short of applicants shortlisted for interview. Only two posts were filled outside London - although all the posts in the capital were filled. We continued to have only 60% of the appointments that we estimated to be needed, and training of accredited consultant paediatric neurologists is further handicapped by the excellent predisposition for neurology trainees to undergo further research and academic opportunities, delaying their training completion dates.

There has been discussion around this and we will continue to work both across the UK with individual deaneries, highlighting the application process with trainees and assisting them in the process. However, it is likely that a significant contribution to the problem comes from poor recruitment to Paediatrics as a speciality.

Paediatric Neurology Syllabus Update

The Paediatric Neurology Subspecialty Syllabus has been updated during this period. This has outlined more specific competencies for the paediatric neurologist in training, and the updated syllabus will contribute to the evolution and improvement of training programmes. We expect the new programme to be adopted by the Royal College of Paediatrics and Child Health (RCPCH) in early 2017.

The CSAC has reviewed job descriptions for new posts in paediatric neurology to ensure that there is adequate provision of time for the care of children and young people with neurological conditions, and to ensure that there is adequate time for teaching and supervision.

Trainees are a highly motivated inspiring group of young doctors. They are ably represented by Dr Sam Amin, Paediatric Neurology Trainee Representative. There is current work on possible end-of-training assessments.

2. Education

The number of BPNA members who have contributed directly to the development and delivery of these courses during the period of this report was 289, which is more than half of registered members. This demonstrates the strong motivation and engagement of members, and the trustees wholeheartedly appreciate this commitment to teaching and training.

Paediatric Epilepsy Training (PET)

In September 2015, we quietly celebrated 10 years of PET courses in the UK. Since 2005, 7,375 clinicians have attended a PET course (815 in 2015-16), contributing to raising the standards of diagnosis and management of children with epilepsy in the UK.

ACHIEVEMENT AND PERFORMANCE

Summary of the main achievements of the BPNA

Children's Headache Training (CHaT)

This is a one-day course delivered by paediatric neurologists and paediatricians with an expertise in the management of headache. The purpose of the course is to improve knowledge and skills amongst health professionals who care for children and young people with headache. Since its launch in 2012, 471 clinicians have attended courses (128 in 2015-16). Four CHaT courses run per year around the UK and they have been extremely well received. The delivery of course material is updated on the basis of feedback, and the course has a revised syllabus and format for 2016-18.

Neonatal Neurology Assessment and Treatment Education (NeoNATE)

Infants born at term or prematurely are susceptible to neurological conditions whose long-term outcomes can be much improved by effective early recognition and intervention. This practical two-day course was introduced in 2014 and runs twice per year. It provides training for paediatricians and neonatologists caring for newborn infants in district general hospitals. It is delivered by paediatric neurologists and neonatologists, and this unique course gives a complementary perspective on a wide range of neurological conditions. Since its launch, 144 delegates have attended NeoNATE (74 in 2015-16). The course has been well received by delegates, with some flying from Australia, Brazil, UAE, South Africa, and New Zealand. There is increasing demand to deliver the course in other areas of the world.

Expert to Expert

International keynote speakers and UK faculty deliver an annual 2-day course, providing continuing professional development for Consultant Paediatric Neurologists from the UK and globally. On alternate years, the course focuses on Epilepsy or Movement Disorders. In 2015-16, 32 people attended Expert to Expert: Epilepsy, giving good feedback. Dr Andrea Whitney will take over as lead for the next epilepsy course which will take place in Bristol on 9-10 November 2017. The next Expert to Expert: Movement Disorders course will take place in Bristol, 20-21 October 2016.

Distance Learning Course

Distance Learning provides a comprehensive course in child neurology for trainees and paediatricians, and continuing professional development for established specialists. 2015-16 saw the continued revision and renewal of course materials, the development of terms of reference for the steering group, and the continued successful provision of face-to-face study days that provide an element of blended learning that greatly enhances the course.

Course fees are differentiated by country according to the World Bank economic classification to enable doctors from all countries to access paediatric neurology training, in line with BPNA charitable aims. For 2015-16 the steering committee amalgamated low and middle income countries (LMIC) into one low fee rate, to more fairly reflect doctors' incomes in middle income countries.

Course materials are under continual review and renewal. £25,000 is currently allocated from BPNA reserves to fund updating distance learning course materials over the next few years, of which £5,900 has been used during this financial year. Dr Louise Hartley (Consultant Paediatric Neurologist, Cardiff) is employed for 4 hours per week to direct and oversee the revision and rewriting process.

We are indebted to the 81 Consultant Paediatric Neurologist volunteer tutors globally, who give their time to tutor trainees through the course; the 8 volunteer members of the steering committee; together with all those Consultants of varying subspecialties who have so generously contributed by speaking at study days.

The course continues to have increasing enrolments from ever more countries: since 2010-11 we have had enrolments from doctors in >60 countries. Students may enrol for the whole course, or register for individual units. In 2015-16, a total of 49 doctors enrolled for the whole course. Individual unit enrolments have so far increased year on year. Enrolments continue to be mainly for Unit 6 Epilepsy 57 (44%) with increasing enrolments for Unit 2 Neonatal Neurology 25 (19%), Unit 9 Metabolic 18 (14%) and Unit 3 Neurodevelopment 13 (10%).

ACHIEVEMENT AND PERFORMANCE

Summary of the main achievements of the BPNA

Trainees

The annual paediatric neurology trainees' study days were held in Birmingham, October 2015, on the theme of neurometabolic, nutritional and systemic disease, at the request of the trainees. Thirty-seven trainees attended. We are grateful to Dr Evangeline Wassmer (Birmingham) and Dr Santosh Mordekar (Sheffield) for leading these excellent days, and to the speakers.

International Short-Courses

Middle East

PET courses continue to be delivered by committed faculty members in the Middle East. PET1 and 2 were held in Abu Dhabi (Course Director Dr Hadi Al-Malik) with a total of 77 delegates. We appreciate the funding from Tawam Hospital, Al-Ain.

Nepal

Year 2 of 5 of the BPNA funded project. It was not possible to deliver the planned courses in Kathmandu due to the terrible earthquake. It is hoped it will be possible to reinstate the programme in 2016-17.

Myanmar

Year 2 of 5 of the BPNA funded project. Dr Cheryl Hemingway (London) led a team to co-deliver with local trained faculty members, courses in Yangon and Mandalay in March 2016. Forty-two delegates travelled to attend these iPET courses, bringing to 120 the number of delegates in Myanmar since launch.

India

Courses in India are only possible thanks to paediatric neurologists volunteering to become PET faculty members. In November 2014, we launched PET in north India, for new faculties from Ahmedabad, Mumbai, Delhi and Jaipur. A 3-day launch programme trained 30 new faculty members. During 2015-16 they have provided 15 PET1 courses and trained 634 paediatricians and trainees in and around their home cities. Feedback has been excellent and demand outstrips course places. This has been thanks to the continuing dedication of Dr Pradnya Gadgil, Dr Rakesh Jain, Dr Vivek Jain, Dr Nitish Vora and Dr Siddharth Shah, leading the northeast Indian centres, and the commitment of faculty members.

In March 2016, the 3-day launch programme was delivered in Bengaluru, India. 31 new faculty members from Kolkata, Chennai, Hyderabad, Cochin and Bengaluru were trained. All new centres have courses planned for 2016-17.

Sudan

Year 2 of 5, funded by Sadagaat, a Sudanese charity funded by members of the Sudanese diaspora. The course planned for 2015-16 could not go ahead due to US visa restrictions for those who have travelled to Sudan. However, training of additional faculty members in Khartoum has enabled courses to be delivered by local faculty with support from others with Sudanese heritage, during 2016-17.

South Africa

In February 2016 we launched PET1 Cape Town in a 3-day programme. Thirty-six new faculty members from South Africa, Ghana, Kenya, Malawi, Nigeria, Tanzania, Uganda and Zimbabwe attended Train the Trainer courses and they then delivered PET1 to 46 Cape Town paediatricians and trainees. The new faculty members will deliver courses in Johannesburg and Nairobi during 2016-17.

Links

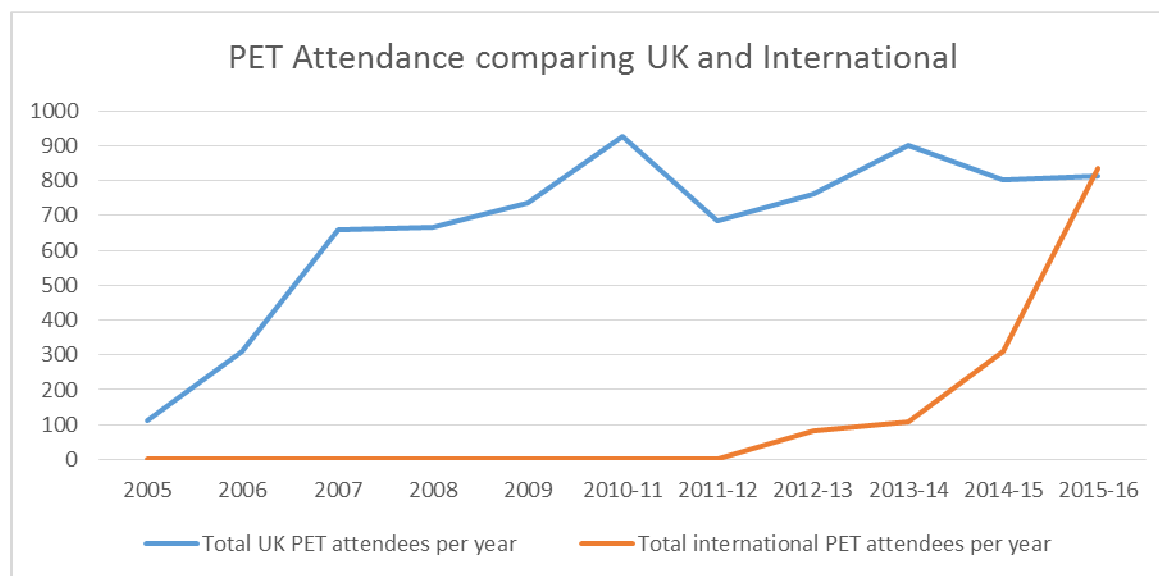
We continue to forge links with the International League Against Epilepsy (ILAE). They are equally enthusiastic about these courses and indeed contributed to setup costs for Bengaluru and Cape Town.

ACHIEVEMENT AND PERFORMANCE

Summary of the main achievements of the BPNA

Future developments

The graph below illustrates the exponential rise in number of delegates on international courses. By March 2016 PET attendee numbers overseas overtook those in the UK.



PET attendance comparing UK and International, at 31 March 2016

The trustees are aware of the need to ensure that the launch and delivery of courses abroad is sustainable and maintains our quality standards. In order to mitigate the financial and reputational risks associated with this expansion, the trustees are working on a long-term strategy. The trustees are also aware of the arguments relating to the need to measure the outcomes from these courses in order to demonstrate the objective improvements that we hope they will bring for children and young people with epilepsy.

3. Annual Scientific Conference

In the immediate future, oversight of the scientific content of the annual meeting, including abstract scoring and awarding of the MacKeith Prize, rests with the Research Committee.

The 2016 annual scientific meeting was held in Sheffield, providing the opportunity to learn from the MacKeith Guest Lecturer, Professor Yanick Crow (Paris), 8 keynote lectures, 36 platform and 145 poster presentations selected from abstracts submitted. Prizes were awarded to:

Dr Amy McTague

Dr Victoria Nesbitt
Dr Magdalena Schreglemann
Miss Sara Tho-Calvi

The Ronnie MacKeith Prize. Awarded to the person who has made the most significant contribution to paediatric neurology as judged by published work and who is <40 years old or within 5 years of obtaining CCT
Best oral presentation by a trainee
Best poster presentation by a trainee
Best medical student presentation

The BPNA indirectly facilitates the dissemination of information to children and young people with neurological conditions, their families and their carers, through its members, regionally and locally. The trustees are considering opportunities to develop teaching to be delivered directly to children and young people with neurological conditions, their families and their carers.

ACHIEVEMENT AND PERFORMANCE

Summary of the main achievements of the BPNA

4. Research

With the change of the BPNA to charitable status and incorporation of The United Kingdom Children's Neurological Research Campaign (Charity number 1124250; also known as Child Brain Research), a restructuring of some of the committees was undertaken. The BPNA Research Committee was formed to incorporate the previous BPNA Scientific Committee with oversight of meetings, to oversee the British Paediatric Neurology Surveillance Unit (BPNSU) and to incorporate the role of Child Brain Research, with a strategy to advocate for and support research within the context of paediatric neurology in the UK.

British Paediatric Neurology Surveillance Unit (BPNSU)

The BPNSU is reviewing current and potential activities in order to expand its role.

Funding of Pilot Studies

Funds of £7,500 were awarded to Dr Hannah Nash at the School of Psychology, University of Leeds for pilot work on a study entitled 'Using a portable, objective measure of sleep to investigate the relationship between sleep, cognition and psychosocial well-being in paediatric narcolepsy.' The trustees are discussing ways of maintaining support for the awarding of grants for pilot studies.

Paediatric Neurology Fellowship

A partnership with Action Medical Research will see the first co-funded BPNA-AMR paediatric neurology research fellowship to be awarded in 2016-17. Many thanks to the 319 BPNA members who made donations in 2015-16 to help fund this fellowship, raising £15,300.

5. Professional Support

Mentoring and Team Support

The trustees have identified a need for members to have access to mentoring services, and it was agreed that the BPNA should contribute to fulfilling this need. This initiative will be developed over 2016-17.

Special Interest Groups (SIG)

Cerebrovascular

Cerebrovascular SIG meetings are an opportunity to discuss complex cases, research opportunities, service developments and collaborative audit. The group met in April 2015 and January 2016.

Epilepsy

BPEG held four meetings: Nottingham (during RCPCH annual conference), London (prior to ILAE annual meeting), Sheffield, and Newcastle (at BPNA annual meeting). The meetings are an opportunity to discuss complex cases, research, PET courses, service developments and collaborative audit.

Inherited white matter diseases (IWMD)

The inherited white matter diseases (IWMD) interest group/network has now been in existence for 2-years and continues to evolve. We have met 3 times in the past year with two standalone meetings and a joint meeting with the neurogenetics club held in Manchester. The initial focus of the group has been on diagnosis of suspected IWMD. Increasing availability of NGS diagnostics has made diagnosis possible for many previously uncharacterised disorders. This was reflected at our June meeting in Leeds where many of the cases presented had a molecular diagnosis several of which were novel or were surprising given the phenotype. This emphasizes not only the challenges which NGS bring but also the need for systematic data collection, dissemination of findings and research.

Negotiating national commissioning for IWMD services with NHSE continues to progress slowly and it may not. In this context we need to press forward with national collaborative working.

In 2017 we are hoping to launch a surveillance study and establish a disease register. We would also like to formalize our association with international colleagues through the GLIA (Global Leukodystrophy Initiative) consortium.

British Paediatric Neurology Association

Report of the Trustees for the Period 6 November 2014 to 31 March 2016

ACHIEVEMENT AND PERFORMANCE

Summary of the main achievements of the BPNA

Muscle Interest Group

The Muscle SIG holds two meetings each year: one is a stand-alone meeting that rotates around a number of centres, and the other meeting is a session that is held at the annual meeting of the British Myology Society. Members of the group present and discuss challenging and educational clinical cases. An anonymous summary of the cases is circulated after the meetings. The meetings are also used as an opportunity to discuss issues from the NorthStar and SMArtNet National Neuromuscular databases networks.

FINANCIAL REVIEW

Financial review

How we raised money

The BPNA raises funds mainly through the membership subscriptions of its members and the payments received for the delivery of its educational activities, which include an annual conference, short courses, and a modular distance-learning course that is predominantly delivered online with the support of tutors and occasional face-to-face meetings. We have also raised money through the voluntary contributions of members.

The figure for Total funds carried forward is £240,596, and because we became incorporated as a charity during this period and this forms a starting point for these accounts, that is the same figure as the Net incoming resources. This figure also included membership subscriptions for the period 1 April 2015 to 31 March 2016. In this report, Voluntary income includes funds already held by the BPNA, and our membership subscriptions. There are also additional voluntary contributions that are discretionarily added at the time of subscription payment and which are given by many members of the BPNA under the Gift Aid scheme. In 2015-16, the voluntary contributions made by members towards the educational and research fellowship was £15,300.

The sum of Total incoming resources (turnover) for this 17-month period was £974,191. This sum is larger than turnover in previous years because the reserves held by BPNA unincorporated have been included as an incoming resource to the BPNA charity, this figure being £269,290. Also, it covers a longer period than usual. Future financial reports are likely to cover a 12-month period.

According to BPNA policy, the costs associated with running the conferences and courses was approximately that of the income obtained from course enrolment fees. The Support costs include the employment of staff at the Secretariat, printing and postage, rent and upkeep of the secretariat building, accountancy and bank fees, and web development. For this accounting period, there were bad debts of £11,841. These were mainly due to candidates enrolling for the Distance Learning Course but failing to pay for and start study on later sections of the course.

Significant events during this financial year

Although the figure of £303,558 for Cash at bank and in hand at 31 March 2016 is similar to that of the previous financial year, the Total funds appear smaller because the Creditors category includes membership subscriptions that have been paid in February 2016 for the 2016-17 year of membership. The Creditors category also includes payment for courses that have not yet been delivered. For membership subscriptions this amounted to £67,002 and for courses paid in advance this amounted to £49,428.

From August 2016, the BPNA has taken on responsibility for providing pensions for staff at the Secretariat. During this accounting period, the BPNA has employed 9 staff at the Secretariat and the equivalent of 5.6 full-time staff.

There has been a significant increase in the delivery of short courses overseas, and this accounting period has witnessed more delegates at Paediatric Epilepsy Training (PET) overseas than in the UK.

Investment policy and objectives

The policy of the BPNA is to invest its reserves in the further development of its charitable aims. In particular, it has committed a total of £90,000 over a 3-year period to the support of an educational and research fellowship that is funded in part by Action Medical Research. The BPNA has also committed reserves to the sustainability and further development of the BPNA Distance Learning Course.

FINANCIAL REVIEW

The BPNA has a policy of maintaining a contingency reserve that is equivalent to the cost of running the BPNA Secretariat for a period of at least 6 months should there be any contingency that might lead to a significant reduction in BPNA operational activities. This policy will remain under review and it might be considered necessary to hold a longer duration of reserve for this purpose if there is further development and diversification of the demands put upon the Secretariat.

Financial position at the end of March 2016

The financial report takes the form of unaudited financial statements prepared by trustees for the 17-month month period from 6 November 2014 (the date of registration as a charitable incorporated organisation) to 31 March 2016.

How we raised money

Factors likely to affect the financial position in future

The future financial position of the BPNA depends upon the continued support of its members, and the continued enthusiasm of healthcare professionals in the UK and overseas for attending the BPNA annual conference and studying on BPNA courses. Although members of the BPNA pay a membership subscription and many make additional voluntary contributory payments, the trustees appreciate that there is in many ways a greater contribution made by members by the time that they commit, without remuneration, to training, teaching and tutoring on the BPNA courses, and the time committed to academic and administrative aspects of the annual conferences. During this financial period, there were 289 members - more than half of all BPNA members - who made direct contributions of this nature. Given the pressures on time for all NHS consultants, and that these pressures are similar on colleagues who are resident abroad; and given that the BPNA would be unable to continue to provide these courses at their current modest prices, it is clear that the financial position of the BPNA rests heavily on the good will and generously devoted time of its members.

Plans for future periods

1. Training the next generation of paediatric neurologists in the UK

- 1.1. We will continue to work at increasing the number of fully trained paediatric neurologists during 2016-17
- 1.2. We hope to launch the updated syllabus in 2017 and that this will further strengthen the training and recruitment into paediatric neurology

2. Education

- 2.1. Quality & Standards
 - 2.1.1. Implement quality and standards framework for all course types
 - 2.1.2. Establish outcomes project (longer term aim)

2.2. Paediatric Epilepsy Training (PET)

- 2.2.1. Run the following courses:
 - 12 X PET1 courses
 - 6 x PET2 & 3 in parallel
 - 1 x PET week - to be run simply as a series of courses, not a flagship event. Reduce secretariat time by cutting unnecessary arrangements
- 2.2.2. PET EEG unsustainable. Review at steering group & Education. Consider adapting into an existing course
- 2.2.3. Audit attendance at PET since 2005 by region and job title
- 2.2.4. Establish laptops synchronizing with cloud for automatic updates to improve efficiency
- 2.2.5. Replace old data projectors > reduce hire and shipping costs
- 2.2.6. Reduce cost of roleplay
- 2.2.7. Establish programme/resources for medical student education (longer term aim)

2.3. Movement disorders

- 2.3.1. Run course Bristol, 20-21 October 2016. Particularly welcome paediatricians seeking further experience of childhood movement disorders
 - 2.3.2. Analysis of attendance and feedback may indicate the need to stratify the Movement Disorders course into levels that suit the varying needs of clinicians
-

FINANCIAL REVIEW

2.4. Headache (CHaT)

- 2.4.1. Finalize materials and print for delivery summer 2016
- 2.4.2. Upload final files to One Drive to sync with laptops
- 2.4.3. Run 4 courses in 2016-17
- 2.4.4. Encourage take up of distance learning headache unit

2.5. Neonatal Neurology (NeoNATE)

- 2.5.1. Finalize materials for 3 years to make a process course
- 2.5.2. Finalize files to cloud to allow syncing to laptops
- 2.5.3. Run 2 x courses in 2016/17
- 2.5.4. Establish experienced faculty who can deliver all sessions, not rely on any of the original developers
- 2.5.5. Encourage take up of neonatal neurology unit at courses. Monitor enrolments
- 2.5.6. Encourage interest in neonatal neurology. Promote conference and monitor abstracts submitted re neonatal neurology
- 2.5.7. Attract sponsorship (not infant formula companies)
- 2.5.8. Increase number of courses > attendees (longer term aim)
- 2.5.9. Expand overseas (longer term aim subject to resources)
- 2.5.10. Improve links between paediatric neurology and neonatology (long term aim)

2.6. Distance Learning

- 2.6.1. Survey prospective students, current students and alumni between November 2016 and April 2017 to determine what changes the course needs to make to meet the requirements of students and potential students
- 2.6.2. Re-explore introduction of a formal qualification and a partnership with a UK University

2.7. Trainees

- 2.7.1. Run study days Birmingham, October 2016 on theme of neuromuscular
- 2.7.2. Maintain attendance numbers

2.8. International

- 2.8.1. Complete required modifications to BPNA CMS system to enable easy scalability
- 2.8.2. Complete and implement Duty of Care for faculty travelling overseas
- 2.8.3. Implement Quality & Standards framework
- 2.8.4. Run scheduled courses
- 2.8.5. Develop long term strategy

3. Improvement of knowledge of professionals through the annual scientific meeting

- 3.1. The next annual scientific meeting will take place in Cambridge on 11-13 January 2017

4. Improvement of knowledge of the public and patients and their families

- 4.1. Development of Paediatric Epilepsy Training resources for lay people
- 4.2. Continue membership of the Neurological Alliance
- 4.3. Scope session for neurological patients and families, possibly as a parallel session at the conference
- 4.4. Develop links with family support charities
- 4.5. Scope creating a webpage for families signposting to specific family support charities

5. Promotion of research

- 5.1. Appoint first BPNA AMR paediatric neurology research fellow
- 5.2. Review British Paediatric Neurology Surveillance Unit
- 5.3. Provide one grant for seed corn funding research projects
- 5.4. Take forward the function of the NIHR CRN (paediatrics) neurosciences study group to avoid duplication of work
- 5.5. Look into the logistics of a priority setting exercise within the James Lind Alliance methodology (Ming Lim to lead). It is hoped this will provide leverage for funds in the future

6. Provision of professional support through:

- 6.1. Mentoring - further develop provision of service
 - 6.2. Team support - advertise provision of service
-

TRUSTEES RESPONSIBILITY STATEMENT

The trustees 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).

The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed 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 charity and of the incoming resources and application of resources, including the income and expenditure, of the charity 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 charity will continue in business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Approved by order of the board of trustees on and signed on its behalf by:

.....
Dr A L Lux - Trustee

**Independent Examiner's Report to the Trustees of
British Paediatric Neurology Association**

I report on the accounts for the period 6 November 2014 to 31 March 2016 set out on pages fifteen to twenty one.

Respective responsibilities of trustees and examiner

The charity's trustees are responsible for the preparation of the accounts. The charity's trustees consider that an audit is not required for this period (under Section 144(2) of the Charities Act 2011 (the 2011 Act)) and that an independent examination is required. The charity's gross income exceeded £250,000 and I am qualified to undertake the examination by being a qualified member of ICAEW and ACCA.

It is my responsibility to:

- examine the accounts under Section 145 of the 2011 Act
- to follow the procedures laid down in the General Directions given by the Charity Commission (under Section 145(5)(b) of the 2011 Act); and
- to state whether particular matters have come to my attention.

Basis of the 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 charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, 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 accounts present a 'true and fair view' and the report is limited to those matters set out in the statements below.

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 130 of the 2011 Act; and
 - to prepare accounts which accord with the accounting records and to comply with the accounting requirements of the 2011 Act

have not been met; or

- (2) to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

Jonathan Ward ACA FCCA
ICAEW and ACCA
HSA & Co
Lewis House
Great Chesterford Court
Great Chesterford
Essex
CB10 1PF

Date:

British Paediatric Neurology Association

**Statement of Financial Activities
for the Period 6 November 2014 to 31 March 2016**

	Notes	Unrestricted funds £
INCOMING RESOURCES		
Incoming resources from generated funds		
Voluntary income		431,294
Investment income	2	149
Incoming resources from charitable activities 3		
Conferences, courses and recharges		<u>542,748</u>
Total incoming resources		974,191
RESOURCES EXPENDED		
Costs of generating funds		
Costs of generating voluntary income		8,317
Charitable activities 4		
Conferences, courses and recharges		459,744
Support Costs		228,349
Research		19,881
Grants		7,500
Governance costs 6		<u>9,804</u>
Total resources expended		733,595
NET INCOMING RESOURCES		<u>240,596</u>
TOTAL FUNDS CARRIED FORWARD		<u><u>240,596</u></u>

The notes form part of these financial statements

British Paediatric Neurology Association

**Balance Sheet
At 31 March 2016**

	Notes	£	Unrestricted funds £
FIXED ASSETS			
Tangible assets	9		13,845
CURRENT ASSETS			
Debtors	10		104,447
Cash at bank and in hand			<u>303,558</u>
			408,005
CREDITORS			
Amounts falling due within one year	11		(181,254)
			<u>226,751</u>
NET CURRENT ASSETS			
			<u>240,596</u>
TOTAL ASSETS LESS CURRENT LIABILITIES			
			<u>240,596</u>
NET ASSETS			<u>240,596</u>
FUNDS	13		
Unrestricted funds			<u>240,596</u>
TOTAL FUNDS			<u>240,596</u>

The financial statements were approved by the Board of Trustees on and were signed on its behalf by:

.....
Dr A L Lux -Trustee

The notes form part of these financial statements

1. ACCOUNTING POLICIES

Accounting convention

The financial statements have been prepared under the historical cost convention, and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008), the Charities Act 2011 and the requirements of the Statement of Recommended Practice, Accounting and Reporting by Charities.

Incoming resources

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

Donations are recognised at the date of receipt. Donations in the accounts for the period ended 31 March 2016 include a one off donation from BPNA unincorporated charity of £269,290.

Membership subscriptions are recognised in the period to which they relate. Membership subscriptions included in the accounts for the year ended 31 March 2016 cover the period 1 April 2015 to 31 March 2016.

Income in relation to conferences and courses is recognised in the period in which the conference or course is run.

Resources expended

Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources.

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that settlement will be required and the amount of the obligation can be measured reliably.

Grants offered subject to conditions which have not been met at the balance sheet date are noted as a commitment but not accrued as expenditure.

Tangible fixed assets

Depreciation is provided at the following annual rates in order to write off the cost less estimated residual value of each asset over its estimated useful life.

Plant and machinery	- 25% - 50% on reducing balance
Fixtures and fittings	- 25% - 50% on reducing balance

The tangible fixed assets of the charity are reviewed by the charity's executive director and the trustees for impairment on a regular basis and during the preparation of the financial statements.

Taxation

The charity is exempt from tax on its charitable activities.

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 within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

British Paediatric Neurology Association

Notes to the Financial Statements - continued for the Period 6 November 2014 to 31 March 2016

1. ACCOUNTING POLICIES - continued

Foreign currencies

Assets and liabilities in foreign currencies are translated into sterling at the rates of exchange ruling at the balance sheet date. Transactions in foreign currencies are translated into sterling at the rate of exchange ruling at the date of transaction. Exchange differences are taken into account in arriving at the operating result.

2. INVESTMENT INCOME

Deposit account interest	£ <u>149</u>
--------------------------	-----------------

3. INCOMING RESOURCES FROM CHARITABLE ACTIVITIES

	Conferences, courses and recharges £
Conferences	107,037
Short Courses	308,255
International Short Courses	11,710
Distance Learning	87,356
EPNS Recharges	<u>28,390</u>
	<u>542,748</u>

4. CHARITABLE ACTIVITIES COSTS

	Direct costs	Grant funding of activities (See note 5)	Support costs (See note)	Totals
	£	£	£	£
Conferences, courses and recharges	459,744	-	-	459,744
Research	19,881	-	-	19,881
Grants	-	7,500	-	7,500
Support Costs	<u>-</u>	<u>-</u>	<u>228,349</u>	<u>228,349</u>
	<u>479,625</u>	<u>7,500</u>	<u>228,349</u>	<u>715,474</u>

5. GRANTS PAYABLE

Grants	£ <u>7,500</u>
--------	-------------------

The total grants paid to individuals during the period was as follows:

Individuals	£ <u>7,500</u>
-------------	-------------------

During the period funds of £7,500 were awarded to Dr Hannah Nash at the School of Psychology, University of Leeds for pilot work on a study entitled 'Using a portable, objective measure of sleep to investigate the relationship between sleep, cognition and psychosocial well-being in paediatric narcolepsy.'

British Paediatric Neurology Association

**Notes to the Financial Statements - continued
for the Period 6 November 2014 to 31 March 2016**

6. GOVERNANCE COSTS

	£
Independent examination costs	2,400
Independent examiner's fees for other accounting services	<u>7,404</u>
	<u>9,804</u>

7. TRUSTEES' REMUNERATION AND BENEFITS

There were no trustees' remuneration or other benefits for the period ended 31 March 2016.

Trustees' expenses

Trustees have been reimbursed for the costs of travel and accommodation expenses incurred in attending various meetings and for teaching at BPNA courses.

Expenses totalling £5,875 were reimbursed to 7 Trustees in the period.

	No	2016
		£
Travel and subsistence	7	5,875

8. STAFF COSTS

	£
Wages and salaries	187,128
Social security costs	13,223
	<hr/>
Total	<u>200,351</u>

The average monthly number of employees during the period was as follows:

Support staff	11
---------------	----

No employees received emoluments in excess of £60,000.

Notes to the Financial Statements - continued
for the Period 6 November 2014 to 31 March 2016

9. TANGIBLE FIXED ASSETS

	Plant and machinery £	Fixtures and fittings £	Totals £
COST			
Additions	18,608	3,171	21,779
Disposals	<u>(483)</u>	<u>-</u>	<u>(483)</u>
At 31 March 2016	<u>18,125</u>	<u>3,171</u>	<u>21,296</u>
DEPRECIATION			
Charge for year	<u>6,367</u>	<u>1,084</u>	<u>7,451</u>
NET BOOK VALUE			
At 31 March 2016	<u>11,758</u>	<u>2,087</u>	<u>13,845</u>

10. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

Trade debtors	£ 83,500
Prepayments and accrued income	<u>20,947</u>
	<u>104,447</u>

11. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

Trade creditors	£ 56,595
Social security and other taxes	4,829
Payments in advance	116,430
Accruals and deferred income	2,400
Accrued expenses	<u>1,000</u>
	<u>181,254</u>

Other creditors include amounts totalling £67,002 relating to membership subscriptions received in advance for the period 1 April 2016 to 31 March 2017.

Amounts totalling £49,428 are also included in relation to payments in advance for courses.

12. OPERATING LEASE COMMITMENTS

The following operating lease payments are committed to be paid within one year:

Expiring:	£
Between one and five years	<u>7,000</u>

13. MOVEMENT IN FUNDS

	Net movement in funds £	Transfers between funds £	At 31/3/16 £
Unrestricted funds			
General fund	6,750	(3,994)	2,756
iPET Myanmar	19,370	-	19,370
iPET India	(3,994)	3,994	-
DL Development	19,100	-	19,100
Contingency	120,000	-	120,000
Research Training Fellowship	60,000	-	60,000
iPET Nepal	19,370	-	19,370
	<u>240,596</u>	<u>-</u>	<u>240,596</u>
TOTAL FUNDS	<u>240,596</u>	<u>-</u>	<u>240,596</u>

Net movement in funds, included in the above are as follows:

	Incoming resources £	Resources expended £	Movement in funds £
Unrestricted funds			
General fund	713,381	(706,631)	6,750
iPET Myanmar	24,440	(5,070)	19,370
iPET India	12,000	(15,994)	(3,994)
DL Development	25,000	(5,900)	19,100
Contingency	120,000	-	120,000
Research Training Fellowship	60,000	-	60,000
iPET Nepal	19,370	-	19,370
	<u>974,191</u>	<u>(733,595)</u>	<u>240,596</u>
TOTAL FUNDS	<u>974,191</u>	<u>(733,595)</u>	<u>240,596</u>

iPET and DL Development funds are held to support the provision of courses overseas and the distance learning programme. Funds are disclosed separately to monitor income and costs allocated to each course. There was a transfer of £3,994 between the general fund and iPET India fund in the period to cover additional costs in relation to the provision of the iPET India course.

The Contingency fund is held to support the cost of running the BPNA Secretariat for a period of at least 6 months should there be any contingency that might lead to a significant reduction in BPNA operational activities.

There are no restrictions imposed on each type of fund which is why they are held in unrestricted funds.

14. ULTIMATE CONTROLLING PARTY

The trustees deem the board of trustees to be the controlling party of the British Paediatric Neurological Association throughout the period.

British Paediatric Neurology Association

**Detailed Statement of Financial Activities
for the Period 6 November 2014 to 31 March 2016**

£

INCOMING RESOURCES

Voluntary income

Donation from BPNA unincorporated to BPNA charity	269,290
Donations	3,470
Donations - Research	43,941
BPNA Members Subscriptions	68,593
Sponsorships received	<u>46,000</u>
	431,294

Investment income

Deposit account interest	149
--------------------------	-----

Incoming resources from charitable activities

Conferences	107,037
Short Courses	308,255
International Short Courses	11,710
Distance Learning	87,356
EPNS Recharges	<u>28,390</u>
	<u>542,748</u>

Total incoming resources	974,191
---------------------------------	---------

RESOURCES EXPENDED

Costs of generating voluntary income

BPNA Membership expenses	7,557
Research	<u>760</u>
	8,317

Charitable activities

Research	19,881
BPNA Membership expenses	50,810
Annual conference	98,928
Short courses	221,173
International short courses	43,297
Distance learning	17,152
EPNS recharges	28,384
Grants to individuals	<u>7,500</u>
	487,125

Governance costs

Independent examination costs	2,400
Carried forward	2,400

This page does not form part of the statutory financial statements

British Paediatric Neurology Association

**Detailed Statement of Financial Activities
for the Period 6 November 2014 to 31 March 2016**

	£
Governance costs	
Brought forward	2,400
Independent examiner's fees for other accounting services	<u>7,404</u>
	9,804
Support costs	
Human resources	
Employment costs	151,468
Other	
Bad Debts	11,841
Bank charges	5,737
Bookkeeping	663
Computer expenses	2,583
Copyright licence	659
Electricity and gas	2,086
Legal and professional fees	620
Printing, postage and phone	11,993
Insurance	731
Rates and water	1,064
Recruitment costs	920
Refuse and cleaning	1,202
Rent	7,050
Repairs	4,051
Staff training and welfare	789
Web development	11,114
Depreciation	7,451
Loss on disposal	483
Marketing	<u>5,844</u>
	<u>76,881</u>
Total resources expended	733,595
	<hr/>
Net income	<u><u>240,596</u></u>

This page does not form part of the statutory financial statements
