

Annual Report and Accounts for the year ended 30 April 2017



NCOR Annual Report and Accounts for the year ended 30 April 2017

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NCOR Trustees

Maurice Cheng
Rachel Ives
Martin Pendry
Steve Vogel
Tim Walker (Chair)

NCOR Team

Dawn Carnes (Director)
Carol Fawkes
Austin Plunkett

NCOR stakeholders

British College of Osteopathic Medicine (BCOM)
British School Osteopathy (BSO)
College of Osteopaths (CO)
European School of Osteopathy (ESO)
General Osteopathic Council (GOsC)
Institute of Osteopathy (iO)
London School of Osteopathy (LSO)
Surrey Institute of Osteopathic Medicine (SIOM)
Sutherland Cranial College (SCC)
Swansea University

Trustees Report for the year ended 30 April 2017

The Trustees present their Annual Report together with the financial statements of the National Council for Osteopathic Research (the charity) for the year ended 1 May 2016 to 30 April 2017. The Trustees confirm that the Annual Report and financial statements of the charity comply with the current statutory requirements, the requirements of the charity's governing document, the Charities Act 2011 and the Accounting and Reporting by Charities: Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Report standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2015), as amended by update Bulletin 1 (effective 1 January 2016).

Policies and objectives

In setting objectives and planning for activities, the Trustees have given due consideration to general guidance published by the charity commission relating to public benefit. The role of NCOR is to promote for the public benefit the advancement of education and the promotion of good health in particular but not exclusively by:

1. Leading and facilitating osteopathic research development in the UK, including developing a comprehensive and cohesive research strategy providing both direction and coordination of osteopathic research.
2. Representing the osteopathic profession on matters relating to the osteopathic evidence base and research development. Acting on behalf of the profession, in a research context, to the media, the public and patients, policy-makers, the inter-professional research community, other health professions and healthcare regulators.
3. Providing a forum for osteopathic educational institutions (OElS) through which to forge consistent standards in research governance, to share expertise, achieve economies of scale, and foster undergraduate and postgraduate research collaboration. Promoting research capacity and scholarship.
4. Providing osteopaths, the public and patients, healthcare professionals, and the research and academic community with a recognised, high quality and accessible resource of research-related information concerning the distinctive body of knowledge within osteopathic practice.
5. Improving awareness of osteopathic research development amongst osteopaths and the wider community. Establishing links and building networks within the research fraternity, nationally and internationally, with a view to development through collaboration. Formulating and fostering strategies for attracting funding for osteopathic research development.
6. Providing systems relevant for grants governance and research governance for the benefit of all stakeholders.
7. Fostering and disseminating outputs from osteopathic audit, evaluation, and research activities.

Activity Report

Forward

This year was a particularly challenging one for the osteopathic profession for a number of reasons. External pressure groups and the Advertising Standards Authority have challenged the way osteopaths promote the profession and their practices, and have questioned the veracity of evidence for osteopathy. The new National Institute of Clinical and Health Care Excellence (NICE) guidance for low back pain and sciatica suggested that manual therapy is delivered most effectively as a package of care rather than in isolation. These events focused our attention on reviewing evidence, reflecting on types of evidence, and how we package what we know to disseminate it to the wider health care community and the general public without bias.

We have also reviewed NCOR's future financial security. Over the last four years NCOR has benefitted from the annual contributions from our stakeholders: this year there have been a number of significant changes: the Osteopathic Educational Foundation became integrated within the Institute of Osteopathy to become the Osteopathic Foundation, which may or may not provide annual contributions in the future; the loss of two osteopathic educational institutions; and other financial pressures facing some of our stakeholders. However, we were pleased also to welcome the Sutherland Cranial College as a new NCOR stakeholder.

We have also taken stock this year to review our work and how we represent value for money to the profession and our stakeholders. This culminated with a stakeholder needs assessment and a three year activity priorities plan taking us to 2021. Our work falls into six domains: inter-professional collaboration and input; stakeholder liaison; outreach and education; expert advice and guidance; dissemination; and special projects. NCOR stakeholders have agreed that emphasis will be placed on:

- Gathering evidence and continued promotion of the national database of patient reported outcomes;
- website re-design;
- fundraising projects;
- facilitating specific collaborative research projects including a standardisation data collection focussing on professional scope of practice.

We look forward to developing these new initiatives in partnership with our stakeholders over the coming years.

Professional collaboration and contribution

NCOR has contributed to four professional interest committees during the year: the Osteopathic Development Group (ODG); the General Osteopathic Council's (GOsC) Policy Advisory Committee; the GOsC Osteopathic Practice Standards review working group; and the International Journal of Osteopathic Medicine (IJOM) reference group. In addition NCOR has supported the Early Adopter programme for the new GOsC Continuing Professional Development scheme. The Director of NCOR represents and promotes NCOR internationally by attending the Osteopathic International Alliance meetings and chairing the International Osteopathic Research Network.

Liaison between the Osteopathic Educational Institutions' (OEl's) research teams is generally facilitated through the NCOR council meetings which take place four times per year.

Outreach, education and promotion of research

This year we were to give talks at three OEIs (CO, BSO, ESO) and we presented at three regional group meetings (Northern Counties, Kent and East Sussex, Wessex Osteopaths,) – see Annex 2.

We have four active Research hubs in Exeter, Bristol, Leeds, Haywards Heath: around 85 people are registered with these hubs – see Annex 3 for details of hub activities.

In addition NCOR held a one day conference in January: *How to help chronic pain patients help themselves*. Guest speakers included a clinical psychologist, a neurophysiologist and a member of the NICE guidance panel that developed the low back pain and sciatica guideline recommendations. There were 85 delegates and it raised £6,900 after costs.

In addition the NCOR team has presented at a number of UK and international conferences, details of which can be found at Annex 1.

In collaboration with the GOsC we have conducted webinars for Clinical Audit and Patient reported outcomes as part of the GOsC continuing professional development initiatives for new adopters. NCOR continues to have a presence at the iO conference and this year we also ran a whole day workshop on self-management support.

Table 1 – NCOR Activity Schedule

Activity	2016								2017			
	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr
Articles for Osteopathy Today	●		●		●		●		●		●	
Articles for The Osteopath		●		●		●		●		●		●
News Bulletins	●	●	●	●	●	●	●			●	●	●
NCOR trustee and council meetings		●			●		●				●	
Regional Society presentations	●	●										
Regional Hub Meetings		●	●		●	●	●		●	●		●
OEI presentations	●				●		●					
Conferences presentations	●	●			●						●	●
iO Convention							●					
Osteopathic Development Group	●				●							●
Policy Advisory Committee meetings		●				●					●	
Osteopathic Practice Standards meetings									●			
Webinars											●	●
NCOR conference									●			

Dissemination of research

Website resources

The NCOR website continues to receive an average of 45 visitors per day, a figure which has been consistent for the past three years.

The most popular entry page for the site is the front page. From there, visitors tend to go to <http://www.ncor.org.uk/research/evidence-for-osteopathy/> which is also the second most popular entry page for the site. The PROMS pages attract approximately 9% of visitors. After this, the news is the fourth most frequently-visited page, approximately 6% of users visiting there.

Social media

We continue to gain approximately one new follower per day on Facebook, and one per day on Twitter.

- Twitter: We currently have over 1,560 followers. In a typical month we may get between 4,000 and 10,000 views in total, with each tweet getting around 500-1,000 views.
- Facebook: We have over 1,600 followers. A typical month might garner around 4,000 views, with individual posts reaching between 500 and 2,000 people.
- “Live-tweeting” events such as the NCOR conference in Jan 2017 and ICAOR 11 in April 2017 produced significant peaks in social media traffic.

Professional magazine articles

Articles were written for the Institute of Osteopathy’s *Osteopathy Today* (iO/OT) and the General Osteopathic Council’s *The Osteopath* (GOsC/TO). Each magazine is published six times per year, meaning approximately one article per month in alternating magazines. Articles may be comprised of several small pieces, or may be one single piece. Alongside these pieces, we regularly provide summaries of current research related to each individual article’s topic for *Osteopathy Today*.

Monthly E bulletins

Typically 12 bulletins are produced per year, one per month, although a small number have been skipped during very busy periods (Dec 2016, Jan 2017). The bulletins are posted on the website and in recent months have also been emailed to the OEs for dissemination to students.

Advisory roles

We continue to provide position statements and gather research evidence for the GOsC and the iO (including research for evidence for legal representation for osteopaths under investigation).

We spent considerable time this year compiling and responding to the feedback consultation on behalf of the osteopathic profession about the NICE guidance on low back pain and sciatica.

We get around four requests per week from practitioners and students about research publications, research ideas, research design queries, audit queries, data analysis and evidence for presentations.

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In addition we make ourselves available as External Examiners for OEIs on request (this year BSO and BCOM).

Special projects

Patient Reported Outcomes – PROMs (UK)

The piloting of the PROM app was completed in late 2015, and 2016 to 2017 has been involved with its implementation into clinical practice. A multi-faceted implementation strategy has been used involving occasional article in the osteopathic media, face-to-face meetings involving small groups, using social media for frequent reminders, outreach visits, and third party endorsement through champions and members of the NCOR Council. The inclusion of PROMs in the GOsC’s Continuing Professional Development (CPD) early adopters scheme has increased implementation also.

Currently there are 180 osteopaths with assigned codes to use the PROMs system. A small number of osteopaths remain inactive users. Data returns continue to grow steadily, and continued dialogue with participating osteopaths helps to refine the implementation of the PROMs system. Current patient returns (at 02-05-2017) are:

Baseline	One week	Six weeks	Total
311	117	74	502

Early adopters of the PROMs system are now in a position to receive their individual practice reports, and the aggregate data for the profession is growing in value to describe osteopathic practice to external audiences. The findings from the PROM app development, piloting, and implementation have formed the basis of a range of dissemination strategies.

PROMs (Europe)

A recent presentation by Maurice Cheng (Chair iO) to the European Federation of Osteopaths (EFO) has identified interest from some European osteopaths in the use of PROMs in their countries. As a result NCOR developed a proposal for a PROM pilot study in Europe involving Germany, Switzerland, and Belgium.

PILARS, PREOS learning platforms

The Patient Incident Learning and Reporting System (PILARS) and Patient Reported Experiences of Osteopathic Services (PREOS) are online surveys to collect, respectively, reports from osteopaths of adverse events in clinical practice, and patient-reported experience measures. PILARS additionally functions as a forum-type discussion platform, allowing osteopaths to share advice, broadening reflective opportunities for isolated practitioners in particular.

Since Sept 2016, PILARS has received 15 reported incidents with 35 associated comments and discussions. Analysis revealed recurrent themes pertaining to: misalignment of patient and osteopath expectations (i.e. communication); concerns about misdiagnosis or occult serious pathology; unreasonable behaviour by patients; patient consent and perceived treatment risks and side-effects. PREOS has received 25 reports from patients, the majority of which are very positive.

OsteoMAP evaluation and paper

This project was completed this year and culminated in a paper published in the International Journal of Osteopathic Medicine (IJOM).

Carnes D., Mars T., Plunkett A., Nanke L. and Abbey H. (2017) A mixed methods evaluation of a third wave cognitive behavioural therapy and osteopathic treatment programme for chronic pain in primary care (OsteoMAP), *International Journal of Osteopathic Medicine*.

Paediatric systematic review paper

This has been a significant piece of work culminating in paper titled: *Manual therapy for unsettled, distressed and excessively crying infants: a systematic review*. This has been submitted for consideration for publication. A separate funder report was also circulated.

Centre for reviews and summaries

This initiative supports members of the profession to improve their critical appraisal of research. The goals are: to produce a “one-stop-shop” for evidence summaries written by osteopaths in an accessible format for busy osteopaths; to drive up the adoption of evidence-informed practice in the profession.

The first review was completed this year by Jonathan Spadaccini, titled *Manual therapy in the management of tendinopathy*. It is available at <http://www.ncor.org.uk/centre-for-reviews-and-summaries/>. Jonathan went on to win a ‘highly commended’ prize at the iO Convention 2016 for ‘Research In Practice’.

Concerns and complaints about osteopaths and osteopathic practice

NCOR continues to provide independent analysis of this data and produce an annual report. In addition this year a paper was published about the first two years of findings.

Carnes D. (2016) What can osteopaths learn from concerns and complaints raised against them? A review of insurance and regulator reports, *International Journal of Osteopathic Medicine*. <https://doi.org/10.1016/j.ijosm.2016.07.002>

Finance and governance review

Financial Review

During the year, total income amounted to £131,932 with costs of £77,469. Unrestricted reserves at the year end were £147,728.

We were pleased to welcome the Sutherland Cranial College as a new NCOR stakeholder. Additional income was also generated from the organisation of a research conference for the osteopathic profession (£8,435), the General Osteopathic Council (GOsC) for our work on the analysis of claims and complaints arising from insurers, the GOsC and the Institute of Osteopathy (£1,100), and £496 in donations.

Reserves policy

The Trustees have yet to establish a reserves policy.

Principal funding

NCOR is funded by donations from the General Osteopathic Council, the Institute of Osteopathy, the osteopathic education institutions and the Osteopathic Educational Foundation, and by other donations from members of public, osteopaths and supporters.

Structure, governance and management

NCOR is a Charitable Incorporated Organisation (registered charity number 1157217).

There are five NCOR trustees: Martin Pendry (appointed by the Osteopathic Educational Foundation); Maurice Cheng (appointed by the Institute of Osteopathy); Rachel Ives (appointed by the Council of Osteopathic Educational Institutions); Steve Vogel (elected by the NCOR Research Council); and Tim Walker (appointed by the General Osteopathic Council). All were appointed on the incorporation of the Charity in 2014.

The Trustees' role is not to sit as 'representatives' of their respective organisations but to ensure the effective operation of the charity, while the day to day research-related activities of NCOR are the responsibility of the NCOR Director and her team.

Dr Dawn Carnes is the NCOR director (one day per week), Carol Fawkes is the Senior Research Officer and Austin Plunkett is the Research Assistant (both three days per week).

Forward Plan

NCOR is working to a four year strategic plan for 2017 – 2021 as set out below.

Objective		Activity/initiatives
Strategic leadership	Advance and facilitate osteopathic research development in the UK, including developing a comprehensive and cohesive research strategy providing both direction and coordination of osteopathic research. This will focus the limited expertise and resources essential to deliver measurable progress in identified priority areas.	Continue to contribute to profession development
		Collaborate with the Osteopathic Foundation for strategic targeting of funds
		Convene meetings of the NCOR committee to provide a platform to generate initiatives, ratify decisions, help and support the NCOR staff achieve it aims.
		Convene meetings with the management board of trustees to ensure adequate oversight of expenditure and activity.
Advocacy	Represent the profession on matters relating to the osteopathic evidence base and research development. Act on behalf of the profession, in a research context, to the media, the public and patients, policy-makers, the inter-professional research community, other health professions, and others (such as the United Kingdom (UK) Advertising Standards Authority, Care Quality Commission, National Institute for Health and Clinical Excellence (NICE), etc.	Work with the iO, GOsC and others in representing osteopathic research interests to for example the ASA, NICE.
		Provide research information to support the promotion and image of osteopathy in the media and the wider health care community
		Promote osteopathic research, research priorities, and the work of NCOR within academic research networks, funding bodies, government departments, higher education institutions and other relevant healthcare bodies.
		Promote osteopathic research and the work of NCOR among patient groups, practices, and charitable organisations.
Research capacity and capability	To provide a forum for the Osteopathic Educational Institutions (OEl)s through which to forge consistent standards in research governance, to share expertise, achieve economies of scale, and foster undergraduate and postgraduate research collaboration. To promote research capacity and scholarship in the wider profession.	Provide research advice and establish a training course for osteopathic researchers and research supervisors .
		Liaise and network with international researchers and develop mechanisms for sharing international intelligence and expertise.
		Continue and develop the role and operation of the research hubs.
		Support osteopaths in clinical audit, using PROMs/PREMs to capture information about osteopathic practice and to disseminate the results.

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Information provision	To provide osteopaths, the public and patients, healthcare professionals, and the research and academic community with a recognised, high quality and accessible resource of research-related information concerning the distinctive body of knowledge within osteopathic practice.	Maintain and further develop information on the NCOR website.
		Provide website areas for patients, osteopaths, and other healthcare practitioners.
		Encourage osteopaths and other relevant organisations to link their websites to NCOR.
		Produce monthly NCOR e-bulletin and other regular updates for The Osteopath and Osteopathy Today.
		Publish new research summaries and update current research summaries. Identify hierarchy of areas for new research summaries.
		Provide suitable patient related outcome measures for use by osteopaths.
		Use social media to disseminate research relevant to osteopaths.
Liaison and promotion	To improve awareness of osteopathic research development amongst osteopaths and the wider community. To establish links and build networks within the research fraternity, nationally and internationally, with a view to development through collaboration. To formulate and foster strategies for attracting funding for osteopathic research development.	Liaise and network with international researchers to promote NCOR and new initiatives, broker international relations.
		Promote the use of the NCOR website, research summaries to osteopaths via communication channels of the NCOR stakeholder organisations.
		Support and broker collaboration among osteopathic researchers.
		Seek to identify any international opportunities for research collaboration.
Research Governance	To provide a research governance framework, disseminate and advise where appropriate standards for writing grant applications and clinical research governance.	Provide advisory and review service for those wishing to publish their research about minimum standards for publishing research in medical journals
		Provide a research advisory service for osteopaths/educators/professional organisations considering applying for funding and undertaking research.
Knowledge Transfer	To foster and disseminate outputs from osteopathic audit, evaluation, and research activities via, for example, an annual research conference.	Organise research conferences and other events to help osteopaths understand the relevance and importance of research to their practice.
		Promote the work of NCOR through other osteopathic events.
		Identify ways in which research outputs can be used to support osteopaths' CPD, e.g. online learning.
		Further develop online forums to facilitate research dialogue among osteopaths.
		Promote knowledge transfer into OEI curricula and faculty staff through regular stakeholder meetings.

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Generation of funding	To formulate and foster strategies for attracting funding for osteopathic research development.	Promote opportunities for obtaining funding within NCOR to continue with special projects funding.
		Promote, guide, advise OEIs and other interested bodies in applying for funding.

Key activity timelines

Activity	2017	2018	2019	2020	2021
Core					
Dissemination of research (website, social media)					
Promotion of research (Outreach: Hubs, OEIs, presenting NCOR at other forums conferences)					
Contribution to the development of the profession (Core profession meetings)					
Advisory role (reactive and proactive)					
Special projects					
Introduce quarterly virtual: Research advice 'drop-ins'					
Website update					
Standardised data collection update					
Fundraising - conference					
Provision of training courses					
PROMs project (continue)					
Collaborative initiatives (change structure of council meetings to facilitate more collaboration)					
Snapshot summary production by osteopaths for osteopaths (continue)					
PhD initiatives between QMUL and OEIs					

Trustees' responsibilities statement

The Trustees are responsible for preparing the Trustees' Report 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 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 of the charity for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgments and accounting 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 operation.

The Trustees are responsible for keeping proper accounting records that are sufficient to show and explain the charity's transactions and disclose with reasonable accuracy at any time the financial position of the charity and 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.

This report was approved by the Trustees on _____ and signed on their behalf by:

.....
Tim Walker
Chair of the Trustees

**Reference and administrative details of the charity, its trustees and advisers
for the year ended 30 April 2017**

Trustees

Martin Pendry
Maurice Cheng
Rachel Ives
Steve Vogel
Tim Walker

Charity registration number

1157217

Principal office

Yvonne Carter Building
58 Turner Street
London
E1 2AB

Accountants

Goldwins
Chartered Accountants
75 Maygrove Road
West Hampstead
London
NW6 2EG

Bankers

NatWest
Black Lion House
45 Whitechapel Road
London
E1 1DU

Independent Examiner's Report to the Trustees of the National Council for Osteopathic Research

I report to the trustees on my examination of the accounts of the National Council for Osteopathic Research for the year ended 30 April 2017.

Responsibilities and basis of report

As the charity trustees of the Trust you are responsible for the preparation of the accounts in accordance with the requirements of the Charities Act 2011 ('the Act').

I report in respect of my examination of the Trust's accounts carried out under section 145 of the 2011 Act and in carrying out my examination I have followed all the applicable Directions given by the Charity Commission under section 145(5)(b) of the Act.

Independent examiner's statement

I have completed my examination. I confirm that no material matters have come to my attention in connection with the examination giving me cause to believe that in any material respect:

1. accounting records were not kept in respect of the Trust as required by section 130 of the Act; or
2. the accounts do not accord with those records; or
3. the accounts do not comply with the applicable requirements concerning the form and content of accounts set out in the Charities (Accounts and Reports) Regulations 2008 other than any requirement that the accounts give a 'true and fair view which is not a matter considered as part of an independent examination.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Anthony Epton BA FCA CTA FCIE
Goldwins
Chartered accountants
75 Maygrove Road
West Hampstead
London NW6 2EG

Statement of Financial Activities for the year ended 30 April 2017

	Note	Unrestricted funds 2017 £	Total funds 2017 £	Restated total funds 2016 £
Income from				
Donations	2	130,832	130,832	124,343
Charitable activities	3	1,100	1,100	8,266
Total income		131,932	131,932	132,609
Expenditure on				
Charitable activities	4	77,469	77,469	87,923
Total expenditure		77,469	77,469	87,923
Net income and movement in funds		54,463	54,463	44,686
Reconciliation of funds				
Total funds brought forward		93,265	93,265	42,111
Prior year adjustment		-	-	6,468
Total funds carried forward		147,728	147,728	93,265

All activities relate to continuing operations.

The attached notes form part of these financial statements.

Balance Sheet as at 30 April 2017

	Note	£	2017 £	£	Restated 2016 £
Current assets					
Debtors	8	25,196		29,618	
Cash at bank and in hand		168,583		124,730	
Prior year adjustment		-		6,468	
		<u>193,779</u>		<u>160,816</u>	
Creditors: amounts falling due within one year	9	<u>(46,051)</u>		<u>(67,551)</u>	
Net current assets			<u>147,728</u>		<u>93,265</u>
Net assets			<u>147,728</u>		<u>93,265</u>
Charity funds					
Unrestricted funds			<u>147,728</u>		<u>93,265</u>
Total funds			<u>147,728</u>		<u>93,265</u>

The financial statements were approved by the Trustees on behalf, by:

and signed on their

.....
Tim Walker (Chair of the Trustees)

The attached notes form part of these financial statements.

Notes to the Financial Statements

1. Accounting policies

1.1 Basis of preparation of financial statements

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant notes to these accounts. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by 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 and Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and Charities Act 2011.

The financial statements have been prepared to give a 'true and fair' view and have departed from the Charities (Accounts and Reports) Regulations 2008 only to the extent required to provide a 'true and fair view'. This departure has involved following Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) issued on 16 July 2014 rather than the Accounting and Reporting by Charities: Statement of Recommended Practice from 1 April 2005 which has since been withdrawn.

National Council for Osteopathic Research constitutes a public benefit entity as defined by FRS 102. There are no significant estimates or judgements made by management in preparing these financial statements.

1.2 Fund accounting

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

1.3 Going concern

The Trustees consider that there are no material uncertainties about the Charity's ability to continue as a going concern.

With respect to the next financial period, 2017-18, the most significant area of uncertainty that affects the charity is the level of income received.

There are no significant estimates at the reporting date that have a risk of causing a material adjustment to the carrying value of assets and liabilities within the next reporting period.

1.4 Income

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

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

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

Notes to the Financial Statements

1. Accounting policies (continued)

Membership fees are recognised in the period to which the membership relates. Income received in advance is deferred.

Other donations are recognised when the charity has entitlement to the donation.

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

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

1.5 Expenditure

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

All expenditure is recognised on an accruals basis.

Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources.

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

All resources expended are inclusive of irrecoverable VAT.

1.6 Financial instruments

The charity only has basic financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

1.7 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount repaid net of any trade discounts due.

1.8 Cash at bank and in hand

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

1.9 Creditors and provisions

Liabilities are recognised when there is an obligation at the Balance Sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Liabilities are recognised at the amount that the charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide. Provisions are measured at the best estimate of the

Notes to the Financial Statements

1. Accounting policies (continued)

amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

2. Income from donations

	Unrestricted funds 2017 £	Total Funds 2017 £	Total funds 2016 £
Membership fees	121,900	121,900	103,000
Crowdfunding and other donations	8,932	8,932	22,023
Gift Aid claim	-	-	(680)
Total donations and legacies	130,832	130,832	124,343

In 2016, all income related to unrestricted funds.

3. Income from charitable activities

	Unrestricted funds 2017 £	Total Funds 2017 £	Total funds 2016 £
Osteomap	-	-	7,166
Complaints report	1,100	1,100	1,100
	1,100	1,100	8,266

In 2016, all income related to unrestricted funds.

4. Analysis of expenditure by activities

	Activities undertaken directly 2017 £	Governance and support costs 2017 £	Total 2017 £	Total 2016 £
Expenditure	55,128	22,341	77,469	87,923

Notes to the Financial Statements

5. Direct costs

	Research activities £	Total 2017 £	Total 2016 £
Research costs	-	-	16,790
Staff costs recharged	55,128	55,128	47,975
	55,128	55,128	64,765

6. Governance and support costs

	Governance £	Support £	Total 2017 £	Total 2016 £
Travel expenses	-	811	811	3,410
Conference costs	-	6,202	6,202	-
Training costs	-	-	-	145
Website costs	-	1,248	1,248	843
Sundry costs	336	304	640	4,600
Honoraria costs	-	12,000	12,000	12,000
Independent examination fee	1,440	-	1,440	2,160
	1,776	20,565	22,341	23,158

7. Net income/(expenditure)

This is stated after charging:

	2017 £	2016 £
Independent Examination fee	1,440	2,160

The key management personnel of the charity comprise the Trustees and the Director. The Trustees all give their time and expertise without any kind of remuneration or other benefits in kind (2016: £nil). The Director received an honorarium of £12,000 (2016: £12,000).

During the year no Trustee received any reimbursement of expenses (2016: £nil).

Notes to the Financial Statements

8. Debtors

	2017 £	2016 £
Trade debtors	-	13,250
Other debtors	25,144	13,316
Prepayments	-	3,000
Tax recoverable	52	52
	25,196	29,618

9. Creditors: amounts falling due within one year

	2017 £	2016 £
Other creditors, including accrued expenses	46,051	17,551
Deferred income	-	50,000
	46,051	67,551

10. Related party transactions

Queen Mary University London (QMUL) provided administration services to NCOR. Total costs were £59,081 (2016: £70,818) and comprised of recharged salary costs: £55,128 (2016: £47,975), and support costs: £3,952 (2016: £6,053). At the period end £15,778 (2016: £11,156) was due to NCOR and is included within other debtors.

A donation of £26,500 (2016: £26,500) was received from the General Osteopathic Council, a trustee of NCOR is also the Chief Executive of this organisation.

Annex 1 – Conferences

April 2017, International Conference for Advances in Osteopathic Research, Milan

- Presentation 1: Concerns and complaints relating to osteopaths and osteopathic practice in the UK.
- Presentation 2: Using PROMs in clinical practice: converging and diverging views of patients and clinicians.
- Presentation 3: Benchmarking your practice using Patient Reported Outcome Measures (PROMs)
- Poster presentation: Thematic Analysis of Challenging Experiences in Osteopathic Practices in the United Kingdom from 2014 to 2016.
- In addition Carol Fawkes was awarded the prize for Best experienced researcher presentation and Austin Plunkett was awarded the prize for Best poster presentation.

March, 2017: NHS England/ARMA event

Poster: Evaluating care in osteopathic practice using a PROMs mobile and web app

January 2017, National Council for Osteopathic Research, London

Conference theme: Helping patients to help themselves: Improving the management of persistent pain. 85 delegates attended this full day of presentations and facilitated workshops, organized by NCOR.

November 2016, Institute of Osteopathy Convention

- Workshop: Integrating psychological care into osteopathic care.
- Promotion stand: Patient Reported Outcomes Measures project
- Poster: Outcomes of osteopathic care.
- Poster: Data are just summaries of thousands of stories.

September 2016, Osteopathic International Alliance, Los Angeles

- Presentation: WHO collaboration and raising the evidence base for traditional and complementary healthcare.
- Chair: International Osteopathic Research Network meeting.

September 2016, Swiss Health Care Professions conference, Lugano, Switzerland

- Presentation 1. How safe is manual therapy
- Presentation 2. Self-management and chronic pain
- Workshop facilitation. The management and support of family and friends in the care of the elderly and those with dementia.

June 2016, CAMSTRAND conference, Warwick Medical School, Warwick University

Poster presentation: PROMS

May 2016, British School of Osteopathy, London

Invited speaker: Evaluation of the OsteoMAP intervention.

Annex 2 – Presentations and visits

Osteopathic Education Presentations

British School of Osteopathy 1.5.16
 College of Osteopaths 19.11.16
 European School of Osteopathy 20.9.16

Regional Societies

Kent and East Sussex 15.6.16
 Northern Counties 14.05.16
 Western Counties 6.6.16

Annex 3 – Hub Meetings

Bristol	07.07.2016	Core stability
	08.09.2016	Sitting and the effect on health and the musculoskeletal system
	10.11.2016	Groin pain
	19.01.2017	Trigger points
	27.04.2017	Heel pain
Exeter	16.07.2016	Safeguarding in clinical practice for children and vulnerable adults
	01.10.2016	The pathophysiology of prolonged sitting
	30.11.2016	Sleep disorders and their role in identifying red flags
	14.01.2017	The management of disc degeneration
	29.04.2017	Trigger points
Haywards Heath	08.06.2016	The physiological effects of sleep deprivation
	28.09.2016	Benign paroxysmal vertigo – diagnosis and management
	22.02.2017	VBI testing
Leeds	14.07.2016	Case studies and case series
	26.09.2016	Further case studies
	12.12.2016	Non-invasive manual therapies for patients with cancer
	27.02.2017	Plantar fasciitis