

The Medical Council on Alcohol
(A company limited by guarantee)

Report and Financial Statements
Year ended 31 March 2017

Charity number: 265242
Company number: 952312
VAT number: 128992569

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REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

The Medical Council on Alcohol

Report of the trustees for the year ended 31 March 2017

The Medical Council on Alcohol is a Registered Charity (Number 265242) and a Company Limited by Guarantee and not having a share capital (Company Registration Number 952312) as well as being VAT registered (128992569). It is governed by its Memorandum and Articles of Association dated 28 February 1967 under which one third of the Executive Committee is elected or re-elected at each Annual General Meeting. The Executive Committee appoints the Chairman and two Vice-Chairmen and is also entitled to appoint new Trustees and determine the method of their appointment.

The trustees are pleased to present their annual directors' report together with the financial statements of the charity for the year ended 31 March 2017 which are prepared to meet the requirements for a directors' report and accounts for Companies Act purposes.

The financial statements comply with the Charities Act 2011, the Companies Act 2006, the Memorandum and Articles of Association, and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (Effective 1 January 2015).

Medical Director's report

I am delighted to report a successful year at the MCA. This year we have continued to work on our four main activity streams of Education, Journal, Support and Policy.

Education is our principal area of activity. The success of our Annual Symposium has continued to grow and record numbers attended our annual symposium at the Royal College of Surgeons in London in November. As a result of high levels of delegate attendances with an appropriate pricing policy and increased numbers of sponsors, we achieved a small financial surplus as well as extremely positive feedback.

Other Educational projects include regular student competitions and a new edition of our student leaflet. For the first time we are able to print this in-house, thus saving on external printing costs. Handbook sales have continued at a fairly low level. We are hoping to develop the next edition as a digital version. This can be produced at a lower financial cost than previous hard copy versions, so that we can continue distribution to all UK medical students at no cost to them.

We work closely with Oxford University Press, our Journal co-owners. We hold regular strategy meetings to ensure that we continue to focus on our key strategic aims of increased Impact Factor and circulation. The Journal is our principal source of income and over the past years this has shown a pleasing increase.

Our investment income of course depends on the performance of the financial markets, which has been positive over the last year. Our Investment sub-committee meets regularly with our financial advisors Charles Stanley to monitor our investments and to review our risk position as necessary.

One of our strategic aims is to broaden our audience to include non-medical health professionals, especially nurses. Over recent years this group have attended our Symposia in increasing numbers and we have responded by having dedicated sessions for nurses. In order to meet the needs of this professional group even better, for the first time we are organising an entire event solely for nurses. Given the importance of nurses in managing the health harm from alcohol in our population, we anticipate that this will contribute to improved patient outcomes.

Plans for the future

Our aim for the next year is to continue our activities which ultimately result in improved outcomes for patients with alcohol related health harm. We aim to do this while staying in budget which will require careful scrutiny of all our activities and maximisation of fundraising opportunities.

REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

Our purpose and activities

Our objectives

The Council was established in 1967 for “the benefit of the community to provide an organisation of registered health care professionals with a view to the co-ordination of effort, the better understanding of alcoholism and its prevention and the treatment and after-care of alcoholics”.

Our Purpose

The purposes of the charity are:

- We aim to ensure that all doctors, medical students, nurses and other professionals allied to medicine understand the risks to their patients from alcohol and act effectively to prevent and manage these.
- We work with health care professionals to increase their understanding of the risks associated with their own alcohol consumption and of the measures to address these.
- We promote scientific advancement in the understanding, prevention and management of alcohol-related harm through our Journal and other publications and activities.
- We work with organisations on public health and policy interventions to reduce alcohol-related harm.

The vision that shapes our annual activities remains to create a workforce of health professionals educated and supported to reduce health harm from alcohol. Improving the competence of health professionals in the alcohol field will improve the quality of treatment for patients in the UK. The charity also supports healthcare professionals who have developed problems with their own use of alcohol.

In shaping our objectives for the year and planning our activities, the trustees have considered the Charity Commission’s guidance on public benefit, including the guidance ‘public benefit: running a charity’. The MCA relies on sponsorship income and income from membership fees, as well as income from its 50% share in the ‘Alcohol & Alcoholism’ journal, to cover its operating costs.

The MCA is active in four main spheres; Education, Journal, Policy and Support as denoted by its logo:



Educational Activities:

We run a series of educational activities including student competitions, free leaflets and a yearly symposium. The income from this event ensures that the event itself is cost neutral, although our future strategy is to increase sponsorship and delegate income to create a small surplus to aid in covering the costs of educational activities. Our activities have the benefit of improving the competence of health care professionals, particularly at the beginning of their careers, to manage health harm from alcohol in their patients.

Membership:

The MCA has a small membership body of 106, all from the healthcare field. The membership fees cover the cost of the quarterly newsletter and also allow the MCA to offer reduced rates for members to its educational events. Membership increases exposure to the MCA’s activities, which in turn has increased the competence of health care professionals.

Journal:

The MCA owns a 50% share with Oxford University Press of the ‘Alcohol & Alcoholism’ Journal. The income from the Journal contributes towards the operational costs of the organisation. Within the next 3-5 years it is hoped that the impact factor will be increased and that the presence of the Journal in the US and Asia will have a positive influence on income. The Journal meets the MCA’s vision and mission statements by contributing to the academic endeavours of improving the knowledge and understanding of alcohol-related health harm. This in turn improves the management of patients with alcohol-related health issues.

REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

Achievements and Performance

MCA Performance Review 2016-17

FINANCIAL GOAL	DID WE ACHIEVE IT?	COMMENTS
To generate a 4% yield on investments	NO	We received a 3.5% yield on investments (£27,121)

EDUCATIONAL GOAL	DID WE ACHIEVE IT?	COMMENTS
To hold one AGM as stated in the MCA memorandum	YES	Well attended AGM held on 19.11.16
To arrange one symposium with the aim to break even financially, and to have a minimum attendance of at least 100 people	YES	We achieved a surplus income of £1,959 and had 150 attendees
To produce x4 copies of the newsletter 'Alcoholis' and x3 copies of the student newsletter 'Alcoholomania'	YES / NO	We produced 4 copies of the Alcoholis newsletter but only 1 student newsletter as there was no editor

JOURNAL GOAL	DID WE ACHIEVE IT?	COMMENTS
To continue to increase the impact factor with the aspiration of achieving an impact factor of 2.5 – 3 within a 3 year period	YES	Impact factor was 2.724
To produce 6 issues of A&A Journal a year, with at least 100 pages per edition	YES	

POLICY GOAL	DID WE ACHIEVE IT?	COMMENTS
To maintain links to the AHA (Alcohol and Health Alliance) and other organisations on issues of policy relevance e.g. minimum pricing	YES	Supported them financially as well as via social media

SUPPORT GOAL	DID WE ACHIEVE IT?	COMMENTS
To continue to work with the BDDG and SDT to promote both organisations and also sign post healthcare professionals suffering from an alcohol problem to these organisations	YES	Many links including committee membership and joint marketing at conferences

This year the Journal's impact factor slightly decreased from 2.889 to 2.724. The MCA strengthened its links with the AHA by supporting them financially with a £1,000 grant whilst we also highlighted each others social media campaigns. The MCA also worked closely with the BDDG (British Doctors and Dentists Group) and the SDT (Sick Doctors Trust) by holding joint stands at external conferences and also joint lectures to medical students on alcohol-related health harm.

The MCA symposium in 2016 was entitled 'Alcohol and health harm; what can doctors, nurses and other professionals do?' and there were seventeen exhibitors and over 150 attendees creating a £1,959 surplus. The 2017 symposium will take place on 15th November 2017 at the British Medical Association with a lower daily delegate rate to help encourage increased attendance whilst still allowing room for up to 300 delegates and 20 exhibitors.

REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

Financial Review

The MCA recorded a net outflow for the year of -£51,826 (2016: -£28,964) before realised and unrealised investment gains of £75,889 (2016: losses of £25,660) showing a net increase in funds for the year of £24,063 (2016: -£54,624). At the year end the Council had net funds of £786,075 (2016: £762,012).

Income

Donations from members (including Gift Aid) totalled £1,598. A decrease in publication sales was also recorded, with income of £2,505 compared to £3,310 in 2016.

Total Journal income increased to £145,042 (2016: £127,550).

Dividend and interest income from investments for the year was £27,121 which was approximately a £3,475 increase from the previous year (2016: £23,646).

Expenditure

Total expenditure during the year amounted to £246,695 (2016: £200,899). This was due to a proactive approach to attending exhibitions to promote the MCA to healthcare professionals as well as the implementation of a series of new office procedures to ensure all systems are backed up by an external company. In addition the MCA also updated its IT and printing equipment to allow in-house printing rather than outsourcing. Extra expenditure can also be attributed to the addition of a new staff member to cover maternity leave.

Our membership and symposium pricing policies

The MCA has two pricing policies, one with regards to its membership and one with regards to its events. Both policies reflect our strategy of being accessible and cost effective to all types of healthcare professionals especially as budgets within the NHS are very strict at present. Our price breakdowns are:

Membership:

- 54.5% Discount is available to retired healthcare professionals, Junior Doctors and medical students
- 40% Discount is available to all nurses and PAM's
- 27% Discount is available for hospital wards
- 64% Discount is available for supporters (non voting membership type)

Symposium:

- 58% Discount is available to retired, junior doctors and student MCA members and Regional Advisors
- 58% Discount is available to retired people, junior doctors and students (non members)
- 21% Discount is available to all other MCA members
- 16% Discount is available to 'supporter' members (non voting members)
- 10.5% Discount is available to nurses and PAM's (non members)

Investment Powers and Policy

The Council has appointed Charles Stanley and Co. as their investment managers and also has appointed an investment and financial strategy sub-committee which has regular meetings with the investment manager to monitor performance. The investment manager is aware of the Council's ethical stance on alcohol-related investments. The portfolio is predominantly invested in equity stocks of companies listed on the UK Stock Exchange and which offer a reasonable and growing level of dividends.

At 31 March 2017 the carrying value of the investment portfolio, which excludes dividends received and is after charging investment management fees, had increased in value over the year by £46,255 (2016: decrease of £79,983).

REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

Reserves Policy

The Council's policy is that it will at all times seek to retain sufficient cash and easily liquidated investments to cover at least 9 months estimated future expenditure. At the year-end cash at bank and investments amounted to approximately £792,618. All equity holdings are considered to be capable of being liquidated quickly should the need arise.

Plans for the future

The Council will continue to aim for its income and expenditure to be in reasonable balance before any major charitable projects. It is the Council's intention always to put income from its activities to finance such projects, whilst being aware that there may be occasions when a project may be of such importance that it should be supported out of the Council's retained funds if there is a shortfall in charitable support.

We continue to strengthen our links with healthcare professionals through our membership, educational activities and Journal as well as using social media to raise the profile of the organisation.

Through our collaboration with OUP, we will continue to work to increase the income from the Journal. In particular we are targeting an increase in the Impact Factor and the reach of the Journal in the USA and other parts of the world.

Whilst not being in a position to fund major new projects, we are developing a publication strategy for the next edition of the Alcohol and Health Handbook. We intend to allow continued provision cost free to UK medical students and commercially to a wider audience, without depleting the MCA reserves by creating an online version.

REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

Structure, Governance and Management

Governing Document

The Medical Council on Alcohol is a company limited by guarantee governed by its Memorandum and Articles of Association dated 1967. It is registered as a charity with the Charity Commission.

The Council is governed by the Executive Committee and its subordinate Committees: Education, Public Health and Journal. There is a network of Regional Advisors associated principally with Medical Schools and Universities, and a membership of about 106. Members of the Executive Committee are Directors under Company Law and Trustees under Charity Law. Members of the Company guarantee to contribute an amount not exceeding £1 each to the assets of the Company in the event of a winding-up during their membership or within one year of their ceasing to be a member. The total of such guarantees at 31 March 2017 was £106 (2016: £117).

Appointment of trustees

Under the company's articles, directors of the company are known as members of the Executive Committee. Under the requirements of the Memorandum and Articles of Association the members of the Executive Committee are elected to serve for a period of three years after which they must be re-elected at the next Annual General Meeting. The directors retire by rotation and, if eligible, can offer themselves for re-election.

Most trustees are already familiar with the practical work of the Charity. Additionally, new trustees are encouraged to attend meeting sessions to familiarise themselves with the Charity and the context within which it operates.

Trustee induction and training

New trustees are briefed on their legal obligations under charity and company law, the Charity Commission guidance on public benefit and receive a copy of the Memorandum and Articles of Association. New trustees are presented with any recent financial documents and business plans.

Organisation

The board of trustees, which can have up to 30 members, administers the charity. The board normally meets three times a year and there are sub-committees covering investments and financial strategy which meet twice a year. A Chairman is appointed by the trustees to manage the day-to-day operations of the charity. To facilitate effective operations, the Chairman has delegated authority, within the terms of delegation approved by the trustees, for operational matters including finance, employment and membership to the Medical Director and other committees (Education & Journal).

Related parties and co-operation with other organisations

The Medical Council on Alcohol has formal Agreements only with the Journal Publisher (Oxford University Press) and the European Society for Biological Research into Alcohol (a charity with similar objectives, subject to Belgian National Law, but administered from Vienna).

In pursuance of its charitable objectives The Medical Council on Alcohol co-operates with bodies such as the Sick Doctors Trust, the Alcohol Health Alliance and the British Doctors' and Dentists' Group but has no formal relationship with these bodies.

The Medical Council on Alcohol became affiliated to the Royal College of Physicians in 2006: this affiliation does not affect the independence of The Medical Council on Alcohol as a Charity.

Pay policy for senior staff

The directors, who are also the trustees, give of their time freely and no director received remuneration in the year. Details of directors' expenses are related party transactions and are disclosed in note 9 in the accounts.

The pay of MCA staff is reviewed annually and normally increased in accordance with pay scales in other comparable medical organisations.

REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

Risk Management

The Council is exposed to operational and financial risks as a result of its operating activities. To mitigate these risks a system of internal financial controls has been implemented that is designed to provide reasonable (although not absolute) assurance against material misstatement or loss.

The trustees have a risk management strategy which comprises:

- An annual review of the principal risk and uncertainties that the charity faces;
- The establishment of policies, systems and procedures to mitigate those risks identified in the annual review; and
- The implementation of procedures designed to minimise or manage any potential impact on the charity should those risks materialise

This work has identified that financial sustainability is the major financial risk for the charity. A key element in the management of financial risk is a regular review of the investment portfolio and active management of debtors and creditors balances to ensure sufficient working capital.

The Council is also exposed to market risk as a result of holding investments in equities and bonds. To manage this risk the Council has given clear guidelines to the investment manager with regards to the investment strategy to be followed and receives regular reports from the investment manager on the performance of the portfolio. Members of the Investment and Financial Strategy sub-committee also meet regularly with the manager to review investment performance.

Attention has also been focused on non-financial risks arising from fire and health and safety issues. These risks are managed by ensuring that all office machines are PAT tested regularly, having set policies and procedures in place, maintenance of equipment, back up of data to an external server and regular staff training.

Reference and Administrative details

Charity number: 265242

Company number: 952312

VAT number: 128992569

Registered Office: 5 St Andrews Place, London NW1 4LB

Our Advisors:

Independent Examiner: Mark Motyer, Goldwyns

Bankers: Natwest

Investments: Charles Stanley

13 David Mews, London, W1U 6EQ

PO Box 2021, London, W1A 1FH

25 Luke Street, London, EC2A 4AR

REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

The directors of the charitable company (the charity) are its trustees for the purpose of charity law. The trustees as at 31 March 2017 were as follows:

OFFICERS

President:	Professor Sir Michael Marmot,	MB BS, MPH, PhD, FRCP, FFPHM, FMedSci
Vice President:	Dr Bruce Ritson,	OBE, MD, FRCPsych, FRCP (Ed)
Vice President:	Professor Peter Brunt,	CVO, OBE, MD, FRCP, FRCP(Ed), FRCS(Ed)

EXECUTIVE COMMITTEE

Officers

Chairman:	Professor Colin Drummond,	MB ChB, MD, FRCP, FRCPsych, FFPH, FRCGP(Hon)
Vice Chairman:	Dr Colin Payton (appointed 11.11.16),	MB ChB, FRCP, FFOM
Education Committee Chair:	Dr Iain Smith,	MB ChB, BSc, FRCPsych
Journal Committee Chair:	Dr Peter Rice,	MB ChB, FRCPsych

Members

Prof Jonathan Chick,	MA, MPhil, DSc, FRCP(Ed), FRCPsych
Dr Claire Gerada,	MBE, FRCP, FRCGP, MRCPsych
Prof Eilish Gilvary,	FRPsych, MRCGP, DCH, FRCPI
Dr Christopher Hilton,	MA, MB BS, MRCPsych, PGCERTULT
Dr Brian Hore,	BSc, MB BS, MPhil, FRCP, FRCPsych
Dr Jennifer Lisle,	MSc, MB BS, FFPH
Dr Anne McCune,	MD, FRCP
Dr Zulfiquar Mirza,	MBChB, DCH, DRCOG, MRCP, FFAEM, Tox FRCEM
Dr Marsha Morgan,	MB ChB, FRCP
Dr Iain Murray-Lyon,	BSc, MD, FRCP, FRCP(Ed)
Dr Andrew Thillainayagam,	MD, FRCP
Prof Robin Touquet,	RD, FCEM (appointed 11.11.16)
Dr Fiona Wisniacki,	MB BCh, MRCSEd, Dip Med
Dr Alistair Young,	MB ChB, MRCPsych

In Attendance

Honorary Treasurer:	Mr Graham Warner	MBA, FCA
Medical Director:	Dr Dominique Florin,	MA, MB BS, MRCGP, MD, FFPHM

Administrative Staff

Executive Assistant:	Mrs Sapphire Tuckfield,	BSc(Hons)
Executive Assistant:	Ms Emma D'Arcey	(Maternity Cover)
Admin Assistant:	Ms Clare Farrow,	BA(Hons), AISTD

Board Resignations (AGM 16/11/16)

Dr Christopher Hilton

REPORT OF THE TRUSTEES & DIRECTORS OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

Trustees' responsibilities in relation to the financial statements

The trustees (who are also directors of The Medical Council on Alcohol for the purposes of Company Law) 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).

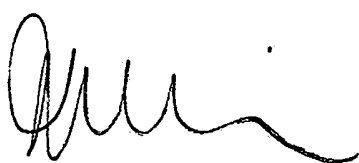
Company law requires the trustees to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for the year. 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 estimates that are reasonable and prudent;
- State whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

On behalf of the board:



Dr Dominique Florin
Medical Director

Date: 4th October 2017

INDEPENDENT EXAMINER'S REPORT TO THE TRUSTEES OF THE MEDICAL COUNCIL ON ALCOHOL FOR THE YEAR ENDED 31 MARCH 2017

I report on the accounts of the company for the year ended 31 March 2017 which are set out on pages 11 to 19.

Respective responsibilities of trustees and examiner

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

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

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

Basis of independent examiner's report

My examination was carried out in accordance with the general directions given by the Charity Commission. An examination includes a review of the accounting records kept by the 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 statement below.

Independent examiner's statements

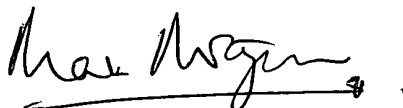
In connection with my examination, no matter has come to my attention:

1. which gives me reasonable cause to believe that, in any material respect, the requirements:
 - to keep accounting records in accordance with section 386 of the Companies Act 2006; and
 - to prepare accounts which accord with the accounting records, comply with the accounting requirements of section 396 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities

have not been met, or

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

MARK MOTYER, FCA
GOLDWYNS Chartered Accountants
13 David Mews
Porter Street
London
W1U 6EQ



Date: 4th October 2017

**THE MEDICAL COUNCIL ON ALCOHOL
STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31 MARCH 2017**

	Notes	2017			2016
		TOTAL	Unrestricted	Restricted	Total
Income		£	£	£	£
From generated funds					
Voluntary Income:					
Donations	4	1,598	0	1,598	1,471
Membership		4,432	0	4,432	5,878
Investment Income	6	27,121	27,121	0	23,646
		33,151	27,121	6,030	30,995
From charitable activities					
Journal		145,042	89,061	55,981	127,550
Symposium	5	14,161	0	14,161	10,080
Publication Sales		2,505	0	2,505	3,310
Other Incoming Resources:					
Sundry Income		10	10	0	0
		161,718	89,071	72,647	140,940
Total Income		194,869	116,192	78,677	171,935
Expenditure					
Charitable Activities	7a / 7b	178,410	99,733	78,677	150,684
Governance & Administration	7c	67,798	67,798	0	48,990
Others		487	487	0	1,225
Total Expenditure		246,695	168,018	78,677	200,899
Net (outgoing) / incoming Resources		(51,826)	(51,826)	0	(28,964)
Gains / (Losses) on Investments					
Realised investment gains		29,634	29,634	0	54,323
Change in value of the investment portfolio		46,255	46,255	0	(79,983)
		75,889	75,889	0	(25,660)
Net income / Expenditure and Net Movement in Funds for the year		24,063	24,063	0	(54,624)
Reconciliation of Funds					
Total funds Brought Forward		762,012	762,012	0	816,636
Total funds Carried Forward	17	786,075	786,075	0	762,012

The statement of financial activities includes all gains and losses in the year. All income and expenditures derive from continuing activities. The notes on pages 13 to 19 form part of these financial statements.

**THE MEDICAL COUNCIL ON ALCOHOL
BALANCE SHEET AS AT 31 MARCH 2017**

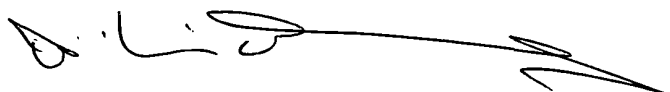
	Notes	31st March 2017	31st March 2016
		£	£
Fixed Assets			
Listed Investments	12	716,161	699,981
Total Fixed Assets		716,161	699,981
Current Assets			
Debtors	13	23,444	57,833
Cash at Bank & in Hand		76,457	25,401
Total Current Assets		99,901	83,234
Liabilities			
Creditors due within 1 year	14	29,987	21,203
Net Current Assets		69,914	62,031
Total Assets less Current Liabilities		786,075	762,012
The funds of the charity			
Unrestricted funds	16	686,244	708,436
Restricted funds		0	0
Revaluation Reserve	16a	99,831	53,576
Total Funds		786,075	762,012

For the year ended 31 March 2017 the company was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small companies and under the Charities Act 2011.

Directors' responsibilities:

- The members have not required the company to obtain an audit of its accounts for the year in question in accordance with section 476;
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts

Approved by the Executive Committee on 4th October 2017 and signed on its behalf,



Professor C Drummond,
Chairman, Executive Committee



Mr G Warner, MBA, FCA
Honorary Treasurer

THE MEDICAL COUNCIL ON ALCOHOL
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

1. Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

(a) Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (Effective 1 January 2015) - (Charities SORP (FRS 102)).

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

(b) Income

Income is accounted for gross (excluding Value Added Tax where applicable) when receivable, as long as it is capable of financial measurement. This includes donations, subscriptions, income from publications and investment income.

(c) Interest receivable

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

(d) Fund accounting

Unrestricted funds are available to spend on activities that further any of the purposes of the charity. Designated funds are unrestricted funds of the charity which the trustees have decided at their discretion to set aside to use for a specific purpose. Restricted funds are donations which the donor has specified are to be solely used for particular areas of the MCA's work or for specific projects being undertaken by the charity.

(e) Expenditure

All expenditure is accounted for gross or net where applicable, and when incurred. Rentals paid under operating leases are charged to the income and expenditure account as incurred.

(f) Allocation of support costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Seventy five percent of staff costs, rent/service charge, rates, insurance, and office expenses have been allocated to the charitable activities listed in note 7b.

(g) Operating leases

The charity leases its premises from the Royal College of Physicians. The lease is renewed periodically and the current lease expired on 31st December 2015 (See Note 18).

(h) Tangible Fixed Assets

Depreciation on office equipment is provided on a straight-line basis at a rate of 20% per annum. Items of expenditure are capitalised where the purchase price exceeds £1,000.

(i) Stock of Handbooks

The Medical Council on Alcohol has a stock of 5,108 (31.3.17) unsold 'Alcohol & Health Handbooks', the great majority of which will be sold at a price that covers only packaging, carriage and associated overheads. No value is attributed to this stock.

(j) Debtors

Debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid net.

THE MEDICAL COUNCIL ON ALCOHOL NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

(k) Cash at bank and in hand

Cash at bank and cash in hand include cash and deposits in the bank or similar accounts.

(l) Investments

The listed investment portfolio is stated at market value.

(m) Foreign Currencies

Transactions in foreign currencies are translated into sterling at the rate of exchange ruling at the date of execution. Exchange differences are taken to the SOFA. Assets and liabilities in foreign currencies are translated into sterling at the rate of exchange ruling at the balance sheet date.

(n) Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event or activities and are accrued for accordingly at their settlement amount.

(o) Financial instruments

The MCA only has 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.

(p) Pensions

The Medical Director of the charity receives a employer's contribution to a NHS pension on a monthly basis. The MCA is part of the governments NEST scheme with employer contributions being 1%. If staff meet the government requirements for a pension then the MCA pay into either NEST on their behalf or into a private pension scheme at the same rate as the NEST scheme.

2. Legal status of the Charity

The MCA is a company limited by guarantee and has no share capital. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

For the purposes of the Companies Act, the persons regarded as Directors and the Board of Directors respectively, are the Members of the Executive Committee.

3. Financial Performance of the charity

The statement of financial activities shows the overall income and expenditure of the charity.

4. Income from donations and legacies

Donations	2016-2017	2015-2016
	£	£
GiftAid	1,310	1,201
Member & Product donations	288	270
	1,598	1,471

The income from donations and legacies was £1,598 (2016: £1,471) of which £0 was unrestricted (2016: £0) and £1,598 restricted (2016: £1,471).

The MCA benefits greatly from the involvement and enthusiastic support of its many board members, Regional Advisors and volunteers, details of which are given in our annual report. In accordance with FRS 102 and the Charities SORP (FRS 102), the economic contribution of these people is not recognised in the accounts.

THE MEDICAL COUNCIL ON ALCOHOL
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

5. Income from charitable activities

	Unrestricted funds 2016-2017	Unrestricted funds 2015-2016
	£	£
Income from Symposium:		
Gross income from delegate fees	9,142	7,005
Gross income from sponsorship	3,519	2,325
Gross income from grants	1,500	750
Subtotal:	14,161	10,080
Income from publications:		
Gross income from handbook sales	2,505	3,310
Total income from charitable activities	16,666	13,390

6. Investment income

The MCA's investment income of £27,121 (2016: £23,646) arises from dividends received during the current financial period and any interest received on the MCA account. During the financial period a number of holdings were sold resulting in a realised gain of £29,634 (2016: £54,323).

7. Expenditure

7(a) Breakdown of costs by charitable activities (See note 17 for details of Restricted Expenditure):

	Direct Costs	Support	Total
	£	£	£
Journal (inc.Committee)	45,828	6,976	52,804
Member Communication	2,498	27,903	30,401
Education (External Events)	4,918	20,927	25,845
Education (Publications)	1,589	6,976	8,565
Education (Other)	5,157	2,791	7,948
Education (Symposia)	12,582	32,089	44,671
Education (Competitions)	1,200	6,976	8,176
	73,772	104,638	178,410

THE MEDICAL COUNCIL ON ALCOHOL
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

7(b) Analysis of costs by financial activity

	TOTAL	5% Journal	20% Mbr Com	15% Education: External Events	5% Education: Publications	2% Education: Other	23% Education: Symposium	5% Education Comp	25% Governance & Admin
	£	£	£	£	£	£	£	£	£
Staff	104,186	5,209	20,837	15,628	5,209	2,084	23,963	5,209	26,047
Premises	14,176	709	2,835	2,126	709	284	3,260	709	3,544
Other Office	21,156	1,058	4,231	3,173	1,058	423	4,866	1,058	5,289
	139,518	6,976	27,903	20,927	6,976	2,791	32,089	6,976	34,880
	Total	104,638							34,880

7(c) Governance and Administration costs:

	2016-2017	2015-2016
	£	£
Support Costs	34,880	30,737
Professional Fees	15,444	4,991
Executive Committee Costs	7,027	2,102
Extraordinary Committee costs	0	1,235
Annual General Meeting	6,261	5,073
Annual Report	0	750
Investment Management	3,793	3,780
Investment Committee Costs	47	33
Funding / Subscriptions	346	289
TOTAL	67,798	48,990

8. Net income/(expenditure) for the year

This is stated after charging:	2016-2017	2015-2016
	£	£
Operating leases	14,175	13,381
Bank interest receivable	(11)	(30)
Accountancy services	7,050	4,236

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

9. Analysis of staff costs, trustee remuneration and expenses

	2016-2017	2015-2016
	£	£
Wages and Salaries	94,089	78,550
Social Security Costs	8,603	4,649
Pension	5,173	5,029
Staff Travel	1,380	545
Employment Allowance	-3,000	0
SSP Reclaimed	-2,059	0
Total	104,186	88,773
Average number of employees during the year	3	3

The Charity trustees were not paid or received any other benefits from employment with the organisation in the year (2016: £nil) other than Professor J Chick who received an Honorarium for his editorship of the Journal which totalled £16,055 for the year plus additional editorial costs of £937.

No charity trustee received payment for professional or other services supplied to the charity (2016: £nil). Payments totalling £4,209 (2016: £1,318 to 12 members) were made to 14 Executive Committee members in reimbursement of travelling expenses incurred in attending meetings.

No employees had remuneration and employee benefits in excess of £60,000.

10. Staff Numbers

The MCA employs 1 full time and 2 part time members of staff. It also employs additional part-time staff when necessary during peak office times (e.g. financial month end, events etc.). In January 2017 the MCA employed an additional part time member of staff for maternity cover.

11. Taxation

The charity is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or section 252 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objects.

12. Fixed Assets – Listed Investments

	2016-2017	2015-2016
	£	£
Cost of investments at start of financial year	610,884	615,804
Additions at cost during the year	102,483	131,264
Disposals during the year	(147,039)	(190,507)
Realised gains on investments during the year	29,634	54,323
Cost of investments at end of financial year	595,962	610,884
Unrealised gains at year end	99,831	53,576
Market Value at end of financial year	695,793	664,460
Cash held pending investment	20,368	35,521
Total	716,161	699,981

All investments were listed on a recognised stock exchange.
Charity number: 265242

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

13. Debtors: Amounts Falling Due Within One Year

	2016-2017	2015-2016
	£	£
Prepayments & Accrued Income	13,704	13,344
Trade Debtors	9,239	44,143
Other Debtors	501	346
Total	23,444	57,833

14. Creditors: Amounts Falling Due Within One Year:

	2016-2017	2015-2016
	£	£
Accruals & Deferred Income	15,945	11,871
Trade Creditors	2,783	1,139
Other Creditors	17	0
VAT payable	11,242	8,193
Total	29,987	21,203

15. Deferred income

All income from ticket sales and exhibitor payments relating to the 2017 Symposium (to be held in November 2017) and the 2017 Nurses Conference has been included in Accruals & Deferred Income (Note 14).

16. Analysis of net assets between Funds

	2016-2017	2015-2016
	£	£
Unrestricted Funds, Net Current Assets	686,244	708,436
Unrealised gains on revaluation of investments	99,831	53,576
Restricted Funds, Net Current Assets	0	0
Total	786,075	762,012

16a. Movement in Revaluation Reserve

	2016-2017	2015-2016
Brought Forward balance at 1 April	53,576	133,559
Net movement	46,255	(79,983)
Balance at 31 March	99,831	53,576

THE MEDICAL COUNCIL ON ALCOHOL
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2017

17. Movement in Funds

Unrestricted Funds:	2016-2017	2015-2016
	£	£
At 1 April	762,012	816,636
Transfer from restricted funds	0	0
Net Movement in funds for year	24,063	(54,624)
At 31 March	786,075	762,012

Restricted Funds:	2016-2017	2015-2016
	£	£
At 1 April	0	0
Income	78,677	68,107
Expenditure	78,677	68,107
Transfer to unrestricted funds	0	0
At 31 March	0	0

Restricted funds received during the year and their subsequent expenditure was for:

Restricted Funds (in detail)	Amount	Expenditure
Seminars: The MCA holds a yearly symposium and delegates pay a set amount to attend.	£14,161	Symposium expenditure (to aid in covering costs)
GiftAid Donations: Donations by members for members only activities, such as AGM costs	£1,598	Members contribution towards AGM costs (to aid in covering costs)
Membership: The MCA receives yearly subscriptions to pay for member activities	£4,432	AGM costs, newsletter, website and member activity costs
Journal: The MCA receives monthly income from Oxford University Press to contribute to editorial and board expenses	£55,981	Editors' honorarium and board meetings
Publications: The MCA receives income from the sale of the Alcohol & Health handbook	£2,505	Postage and packaging costs
	£78,677	

18. Operating lease commitments

Following the expiry of the previous lease in December 2015, the MCA is currently negotiating a 2 year lease with a 1 year break clause in respect of the premises it occupies at the Royal College of Physicians. The rent and service charges in respect of the lease included in these accounts is £13,690 (2016: £12,404).

19. Post-balance sheet events

There are no post-balance sheet events to report.

20. Related parties

There are no related party transactions that require disclosure.