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| OSC**r** | Trustees’ Annual Report for the period | | | | | | | |
|  | Period start date | | |  | Period end date | | |
|  | Day | Month | Year |  | Day | Month | Year |
| From | 01 | 04 | 2019 | To | 31 | 03 | 2020 |
| Office of the Scottish **Charity Regulator** |  |  |  |  |  |  |  |  |

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| Reference and administration details |

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| Charity name |  | THE ANN, CIARA AND NIAMH COPELAND 200 CLUB TRUST FUND | |
| **Other names charity is known by** |  | COPELAND 200 CLUB TRUST FUND | |
| **Registered charity number** |  | SC043683 | |
| **Charity’s principal address** |  | CLOVER COTTAGE | |
|  |  | SCHOOL ROAD | |
|  |  | LANDRAKE, SALTASH | |
|  |  | CORNWALL | Postcode PL12 5EA |

##### Names of the charity trustees on date of approval of Trustees’ Annual Report

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|  | **Trustee name** | **Office (if any)** | **Dates acted if  not for whole year** | **Name of person  (or body) entitled to  appoint trustee (if any)** |
| **1** | BARRY COPELAND | Chairperson/Treasurer | Whole Year | Trust Founder |
| **2** | JEAN HASLAM | Secretary | Whole Year | Trust Founder |
| **3** | JOHN TAVENDALE |  | Whole Year | Trust Founder |
| **4** | ANDRINNE CRAIG |  | Whole Year | Trust Founder |
| **5** | GAVIN CALDER |  | Whole Year | Trustees 1 - 4 |
| **6** | LISA SINGLETON |  | Whole Year | Trustees 1 - 4 |
| **7** | JAMES FERRIER |  | Whole Year | Trustees 1 - 4 |
| **8** |  |  |  |  |
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| Reference and administration details |

Names of all other charity trustees during the period, if any, (for example, those who resigned part way through the financial period)

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| **Name** | **Dates acted if not for whole year** |
| NONE |  |
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| Structure, governance and management |

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| Type of governing document | THE ANN, CIARA AND NIAMH COPELAND 200 CLUB TRUST FUND DEED  signed on Thursday 13 December 2012  at 15 West Street, Johnshaven, Montrose, DD10 0HL |
| Trustee recruitment and appointment | New Trustees can be proposed by any existing Trustee or Trust supporter, appointment to be ratified by a majority of the existing Trustees. |

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| Objectives and activities |

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| Charitable purposes | To assist in the advancement of health, the relief of those in need by reason of ill-health/disability or other disadvantage and the prevention or relief of poverty.  To be primarily achieved through helping to provide *LEPRA Health In Action* with the funds required specifically to run the *Koraput Referral Centre* in Orissa state, eastern India; the Centre’s work having been dedicated to *the living memory of Ann, Ciara and Niamh Copeland*. |
| **Summary of the main activities  in relation to these objects** | Selling ‘shares’ by persuading people to commit to paying a minimum of £10 by standing order into the account each month.  Funds will also be generated by Sponsored Runs and the like; undertaken or organised by individual trustees and supporters. |

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| Achievements and performance | |
| **Summary of the main achievements of the charity during the financial period** | Before I write anything else, I would like to express my sadness at the deaths of two of our most stalwart supporters, **Pete Bell** and **Jim Webster,** who were both good men and true. I want also to thank those who have had to stop or reduce their contributions due to changes in their financial circumstances. I will always be grateful for all of your kindness and generosity.  The Trust started the year with funds of **£7021**. In August 2019 **£7000** was donated to *LEPRA Health in Action* in order to meet our annual commitment to meet as much as possible of the running cost of the ***KORALEP\* Referral Centre*** in Koraput, Orissa State, India.  *\*KORALEP is the abbreviation used by LEPRA for the Koraput Leprosy Eradication Project*  Over the period covered by this report £5616 was paid into the Trust’s account. However the monthly donations include an extra £5 paid into the account by myself each month which exactly offsets the banking charge levied by CAF Bank. Thus in reality **£5556** is the true figure raised through monthly and one off donations, giving a balance at 31 March 2020 of **£5577.** As always **100% of the funds raised will continue to be passed on** to Koraput.  The annual Trustees Meeting was scheduled for 14 March 2020, but unfortunately was an early victim of the Covid19 Lockdown as I had to self-isolate and was unable to travel due to contact with a suspected case, which in fact proved to be a false alarm. It was hoped to rearrange the meeting for the autumn but this seems unlikely to occur, so matters will be conducted via email and possibly a Zoom conference.  Although not strictly relevant to this report it should be noted that the Trustees have been asked to approve a further donation of **£5500** to *LEPRA Health in Action* and this will hopefully be made in early September 2020. In just over 7 years of existence we will have thus donated **£40,500** to Koraput.  Once again this has been another successful year of fundraising, however more difficult times are ahead as I will outline later in this Report. For most of the financial year the level of guaranteed UK monthly contributions was at its highest level ever, £360 per month, which with our Gift Aid status **guaranteed us an income of at least £5,000 each year** before we even took into account funds raised through sponsored events or donations from outside the UK.  Just like virtually every charity, the Trust will see a lower level of regular donations over the current financial year. Currently UK monthly donations are now £280 per month, with a subsequent annual Gift Aid top up of £585. That gives a projected comparable income of £3945 for 2020/21, or a reduction of over 20% or £1000.  In an effort to offset this reduction I am aiming to undertake some funding by sponsorship shortly, namely ***1000 miles for £1000*.** This will involve my attempting to **cycle 1000 miles during the month of October**, which will also require the best part of **100,000 feet of climbing** (or nearly 3½ times the height of Everest if you prefer). I do not think that it is practical in the current circumstances to put together a definitive A to B journey, so I aim to accumulate the mileage in small tours and day trips. I will be extremely grateful for any donations you can make or raise on my behalf. Further details will follow shortly.  **So how is our money to be used?**  The latest information from ***Lepra*** is that the annual cost of running the Koraput Referral Centre itself is currently **£11384**, so £7000 constitutes **61.4%** of that sum and is a mighty useful contribution.  I would emphasise that we aren’t TOO specific about what should be done with the money; basically **we insist that if LEPRA accepts our donations then it must continue to fund Koraput but trust it to use the money as it sees fit.** We are here solely to raise funds, not to interfere with how the operation is run. It should be noted that the annual cost has been significantly reduced over the last few years as Lepra’s approach has evolved in cooperation with the Indian Government and consequently the Centre’s role has changed.  As mentioned at the beginning of this report, the Koraput Referral Centre is part of a wider project in the area called KORALEP. This in turn was merged in 2017 with an adjacent area Bolangir to create a new project named *Swabhiman* (which means self-respect) in order to enable more effective use of limited resources. |

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|  | *Covid19* has had a devastating effect on *LEPRA Health in Action* in the UK, which has had to develop a financial plan that will safeguard the organisation and its overseas work for the long term. This has entailed switching to remote virtual working and furloughing over 50% of the staff, with all the remaining personnel taking significant pay cuts of 20-40%.  *Lepra* has not yet run a formal assessment on the impact that the situation has had on current or future fundraising, but many significant events and activities have had to be postponed or cancelled. These include fundraising dinners, mass participant events such as the London Marathon or the annual Edinburgh to St Andrews bike ride, as well as all of its school or church engagements, all of which usually raise significant amounts of money. Nor is there any reliable timeline for when such activities may start up again.  The situation in India is also extremely difficult. Whilst future funding is obviously precarious, there have been huge problems on the ground. As previously described, there has been a shift in emphasis in recent years to a more proactive approach focused on early case detection and disability prevention, but with medical treatment provided for those still unfortunate enough to require surgery.  The project thus focuses not just on active case finding but also screening those likely to have had close contact with someone affected by leprosy, with up to 20 households being screened whenever a case is detected. Extensive school screening programmes had also been developed. All of these of course have virtually ceased.  A nationwide lockdown was enforced by the federal government from March 25th to May 3rd and all critical aid activities in the field had to be deferred. The majority of the medical and public health services came to a grinding halt and as leprosy is considered a low priority, work in this area has been slow to restart. The major impacts are listed below:   * Active case detection activities are on hold * No outsiders were allowed to enter villages * (Leprosy) Contact Tracing and Post Exposure Prophylaxis administration is on hold * Reconstructive surgery suspended * Access to Multi Drug Therapy (MDT), ulcer kits, customised footwear and self-care aids & appliances is very difficult for people who need support. * Active Case Finding interventions in new districts have not started * Movement of staff is very difficult due to lack of available transport.   During each quarter of 2019 on average the project:   * Diagnosed 71 people with leprosy per quarter. In the period April-June 2020 only 44 were detected. * Conducted 55 skin smears examinations. The corresponding figure for April-June 2020 is just 5 * Treated 858 people with MDT, compared to 176 for April-June 2020 * Provided 980 people with protective footwear, compared to 131 for April-June 2020 * Performed 10 Reconstructive Surgeries as opposed to 0 in April-June 2020 * Treated 32 people for post-operative management, rather than 12 in April-June 2020 |

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|  | One could go on and on with these statistical comparisons, but the essential point is that a lot of the population in this remote area are already some of the poorest, most disadvantaged people in India.  So many of the programmes will have been set back years or will need to start again from scratch. Yet *Lepra* will be struggling to provide the funds needed to meet these challenges and that is why our help is so desperately needed, more so now than ever before!  The annual cost of running the Koraput Referral Centre itself has been roughly around **£11,500**, so this year’s donation of £5,500 is as always, a mighty useful contribution.  I would emphasise that we aren’t TOO specific about what should be done with the money; basically **we insist that if LEPRA accepts our donations then it must continue to fund Koraput but trust it to use the money as it sees fit.** We are here solely to raise funds, not to interfere with how the operation is run. |

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| Financial review |

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| **Brief statement of the charity’s policy on reserves** | As the Trust has no overheads or expenses, there is no need to hold large amounts of funds in reserve. The only real financial policy of the Trust is that outgoing payments to Lepra will always be covered by assets; in other words no overdrafts or loans will be taken out. |
| Details of any deficit | None |
| **Donated facilities and services (if any)** | None |

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| Other optional information |
| There are expenses related to the Trust’s website ([www.copelandfamilytrustfund.com](http://www.copelandfamilytrustfund.com)) but not the email address ([copeland090108@gmail.com](mailto:copeland090108@gmail.com)). Like the monthly bank account charge these are covered by private funding so **100% of the funds raised continue to be passed on** to Koraput. |

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| Declaration |

**The trustees declare that they have approved the trustees’ report above.**

**Signed on behalf of the charity’s trustees**

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| **Signature(s)** |  |  |
| **Full name(s)** | BARRY JOHN COPELAND |  |
| **Position (e.g. Chair)** | CHAIR & TREASURER |  |
| **Date** | 15 August 2020 |  |