

The Pharmacy Practice Research Trust
Registered Charity No. 1076457



Medicines & People
Turning Knowledge Into Know-how

Annual Report and Financial Statements
Year ended 31st August 2009

haysmacintyre
Chartered Accountants
Registered Auditors

Chairman's Foreword

The reporting year has brought some significant achievements for the Pharmacy Practice Research Trust across the breadth of its activities – both in the context of what we do and, indeed, how.

With regard to the former, an annual objective for the reporting year was to increase partnership and collaborative endeavours; taking pharmacy to a wider audience and creating a buzz about the profession in research communities that had not previously considered exploring pharmacy practice. The Trustees believe that the recent partnerships with Arthritis Care and the Universities of Stirling, York and Aston will pave the way for further opportunities to stimulate others to explore pharmacy and compete for funding from broader sources.

As for the “how”, the Trust undertook an impact evaluation in the reporting year – looking across its activities such as research capacity building and pump-priming. 83% of grant holders indicated that the funding they had received from the Trust had contributed to the development of further research/funding in their team/department (17% significantly), therefore the Trust has had some demonstrable success in generating wider financial support for pharmacy research. The impact of capacity building and pump priming activities should not be underestimated at a time when research funding across all disciplines is unlikely to be sustained at past levels.

Continuing on the latter theme, the Trustees were pleased to secure membership of the Association of Medical Research Charities (AMRC) - widely regarded as a mark of quality with regard to research governance in the world of medical and health research. Our membership of AMRC represents a demonstrable recognition of our work and a commitment on the part of the Trust to maintain the highest standards of practice and policy. A notable benefit of AMRC policy, and therefore membership, is that the Trust no longer has to contribute to indirect costs on the research it commissions. Consequently, Trust funds currently available for pharmacy practice research will go further, creating greater value for the profession and the public which it serves.

This year also represents our 10th anniversary and to accompany this Annual Report, the Trust will be publishing a Review which will not only highlight the achievements in 2009 but more longer term achievements and impact.

Looking forward to the year ahead the Trust does face some uncertainty and this is reflected in our future plans. Research priority/strategy setting takes a necessary long view and therefore requires resources (including core funding) from the stakeholder community that enables such long-term planning. The Trust currently has a limited amount of resources (funds) and providing future funds can be reasonably assured, it intends to continue supporting research pharmacists and pharmacy research.

As ever, the Trustees would like to thank the busy academics and individuals who support the governance structure of the research and its commissioning, the Leverhulme Trade Charities Trust, the Royal Pharmaceutical Society for Great Britain, the Pharmaceutical Trust for Educational and Charitable Objectives and the Galen Trust for their financial contribution towards research. Plus, of course, all those individuals for whom we are here to support – as without their drive and commitment our job would be considerably more challenging.

P. L. Marshall Davies
Chair, Pharmacy Practice Research Trust

CONTENTS	PAGE
Reference and Administrative Details	1
Objects	2
Aims	2
Objectives for the Year	2
Review of Activities	2
Grant Making Policy	6
Partnerships	6
Achievements and Performance	6
Structure, Governance and Management	8
Statement of Trustee's Responsibilities	10
Public Benefit	10
Risk Assessment	10
Plans for the Future	10
Financial Review	11
Independent Auditor's Report	13
Statement of Financial Activities	14
Balance Sheet	15
Accounting Policies	16
Notes to the Accounts	17

REFERENCE AND ADMINISTRATIVE DETAILS:

Registered Charity Name	The Pharmacy Practice Research Trust
Registered Charity No.	1076457
Principal Address:	1 Lambeth High Street, London SE1 7JN
Trustees:	Mr Peter Curphey Mr Anthony Clinch Mr Marshall Davies (Chair) Professor Brian Edwards Ms Christina Funnell Mr Ray Jobling (from October 2008) Lord Newton of Braintree Mr Steve Churton - ex-officio Professor Clive Smee
Trust Director:	Sue Ambler
Deputy Trust Director/Research Manager:	Beth Allen
Research Strategy Co-ordinator:	Erika Kennington (from June 2009) Rachel Roberts (from June 2009) Linda Sheldrake (until February 2009)
Senior Research Administrator:	Charlotte Coates (from April 2009) Clare Sidoti (until February 2009)
Team Administrator:	Lisa Williamson
Auditors:	haysmacintyre Fairfax House 15 Fulwood Place London WC1V 6AY
Solicitors:	Boyes Turner Abbots House, Abbey Street Reading RG1 3BD
Principal Bankers:	National Westminster Charing Cross Business Centre 2 nd Floor, Cavell House 2a Charing Cross Road London WC2H 0NN

OBJECTS

The objects of the Pharmacy Practice Research Trust (the "Trust"), as set out in its Charitable Trust Deed, is the relief of sickness generally in the United Kingdom and in particular but not so as to limit the generality of the foregoing:

- to promote research into the practice of pharmacy in the United Kingdom and to publish the useful results of such research;
- to promote the health of the public by educating pharmacists in order to improve the standard of healthcare available to the public; and
- to advance and promote knowledge and skill in relation to the practice of pharmacy for the public good.

AIMS

The Trust has set about identifying a programme of social and economic research that focuses on the use of medicines and their place in society more generally. Through its ***Medicines & People programme*** the Trust aims to:

- Provide opportunities for key stakeholders to develop a shared research agenda;
- Identify researchers with the right skills to address high priority research questions;
- Support the development of researchers with the right skills and leadership potential to take the field forward in the future; and
- Provide a forum in which the implications of the results can be considered in the widest possible policy context.

OBJECTIVES FOR THE YEAR

- Inform the aspirations of the Department of Health's White Paper *Pharmacy In England: Building on strengths – delivering the future*
- Continue to strengthen and develop existing role in capacity building
- Greater partnership working and exploration of match funding opportunities

REVIEW OF ACTIVITIES

When appraising the outcomes of research funded by the Pharmacy Practice Research Trust, as for many other charities, it should be considered that the research process is incremental, and the road to discovery and application can be long and complex. Therefore, the impacts of the Trust's funding are likely to be seen some time after the expenditure is committed – and the direct link to health outcomes may be seen only in generations to come¹.

Nevertheless, in terms of public benefit, incremental findings underpin further research and provide the foundations for future improvements in health. Publications and events during the reporting year have immediate affect on practice and feedback from participants at events has provided good demonstrable evidence of the impact of the work of the Trust. This report highlights some of the achievements from work previously funded as well as work funded within the past year.

¹ Wellcome Trust Annual Report and Financial Statements 2005.

All trusts and foundations are in the business of bringing about some form of positive change and delivering public benefit, giving grants to support education and professional development is the means by which the Trust sets out to do this. And yet, all too often grant makers focus on the giving itself rather than the outcomes of the giving. Having given, they frequently fail to ask the key question: has our grant enabled the Trust to meet its aims and made a difference?²

Through their Medicines and People Programme the Trustees are committed to creating knowledge for public benefit that “ensures that the right person gets the right medicine at the right time in a manner that meets the needs and expectations of the individual who will take it” and to ensuring that this knowledge is used appropriately to inform and shape policy and practice relating to medicines and their use.

The Medicines and People Programme addresses 5 related themes:

Programme 1 – The health of the public and the place of medicines will help us to understand the beliefs, expectations, skills, knowledge and competencies of the people who use and take medicines – the patients and their carers as well as the healthcare professions.

Results from ongoing projects under this research programme will be available in future reporting years.

Programme 2 – The right medicine for the right patient: preventing medication errors will help us to understand the basis of clinical practice and services and the regulation and governance of the system.

Results from ongoing projects under this research programme will be available in future reporting years.

Programme 3 – Pharmacy: a profession fit for purpose will inform the development of the contribution which pharmacy makes to the provision of high quality patient centred care. This programme is split into three areas – workforce, education and ethics.

Achievements in the reporting year 2008/2009:

1. Clozapine, which can improve the negative symptoms of schizophrenia and increase social integration amongst people with Treatment Resistant Schizophrenia (TRS), also has some potentially dangerous side effects that require careful management. Pharmacists are increasingly becoming involved in the delivery of clozapine services, but there is a lack of evidence about the most cost-effective organisational model to inform these developments.

The Trust awarded a grant to the University of Bath for a study addressing TRS, its management with clozapine and the pharmacist provision of these services.

² Introduction to Monitoring & Evaluation. Association of Charitable Trusts, 1998.

Their research will compare patient outcomes and costs when different teams of professionals, including hospital or community pharmacist, nurse, hospital doctor or psychiatrist, are involved in delivering care by studying five different clozapine services for people with TRS in a large NHS trust in Wales. This study will make an important contribution to the evidence base that demonstrates how pharmacy can deliver effective, high quality and value for money services in the important area of mental health and ultimately seek to improve the patient experience.

2. The principles of professionalism should influence all current and future professionals - from undergraduate students to registered practitioners - and continue to be an influence throughout professional career pathways. In the context of pharmacy practice, the face of the profession is evolving as a result of significant changes seen in policy over the last 5 years. These changes which have brought about an increase in patient contact and higher clinical accountability mean the profession must deliver services competently, ethically and professionally. It must also reflect the general direction for a health professional workforce which supports the main reform policy direction of health promotion, disease prevention and delivering face-to-face services in more local settings. This ultimately means that, for pharmacy, increased patient contact, working as part of a multi-disciplinary team, growing clinical responsibility and increased accountability in practice are now key areas impacting on the profession.

To pursue this agenda the Trust awarded two grants:

I. Contextualising patient centred professionalism in pharmacy practice: consulting with patients, professionals and stakeholders – Swansea University

In order to nurture professional values and practice in pharmacy and create the key pharmacy leaders and role models of the future, through well designed teaching and learning initiatives, we must understand which aspects of professionalism in practice are valued both by pharmacists and their patients and introduce these at the outset of pharmacists' career development. However, it is not enough to instill good ethics and attitudes; we must also understand how professionalism functions and most importantly, recognise the contextualised nature of practice – different environments impact in different ways on professional practice. This study will be the first of its type to place current definitions in context in a very practical way whilst broadening understanding of professional and patient need and examining expectations about building trust and delivering patient-centred professionalism.

II. Mapping the teaching and assessment of professionalism in pharmacy education – Manchester University

The main aim of this study is to understand and clarify how professionalism is learned, cultivated and facilitated in the academic environment. By exploring notions of professionalism with pharmacy students it will define the nature of professionalism in pharmacy and shed light on the ways that teaching of the topic is transferred into practice settings. Given that learning and maintaining appropriate professional behaviour is an intrinsic element of professional regulation this study will generate findings which will also inform developments surrounding the formation of the new

regulatory body, the General Pharmaceutical Council, as well as associated debates about revalidation, how performance and competence of pharmacists can be assessed and maintained, and quality assurance in education and pre-registration training.

3. The *Working lives of preregistration trainees* report (University of Manchester) was published as the latest report from the Longitudinal Cohort Study of Pharmacy Careers following the career progress of the 2006 pharmacy graduates from around Great Britain. It found that preregistration pharmacy trainees' commitment to pharmacy as a profession is high and satisfaction with preregistration training is high. However, for some, work overload and difficulties with work/life balance start in their preregistration year

At a regional level it appeared that the largest proportion of graduates hoped to work in the same region where they attended pharmacy school and preferences for work were significantly correlated with sector of training; from a workforce planning perspective this suggests little cross sector mobility during the earliest career stages.

The fact that workload is already an issue in what is effectively a training environment is also concerning. This study informs understanding of how career choices are initially influenced and how they change over time, it also has implications for workforce planning and patient/public experience of pharmacy.

4. As part of the Trust's role in "Turning Knowledge Into Know-How" it contributed to the RPSGB's Workplace Pressure initiative by bringing together employers, employee associations, trade bodies, unions, researchers and individual pharmacists to: share current research findings on workforce, job satisfaction, health policy and organisational and employer policies on stress and work-life balance; hear evidence of real cases of stress and its consequences in pharmacy; and, identify key areas for collective action. The two day symposium held in April 2009 contributed to a number of positive initiatives including the RPSGB's campaign to decriminalise single dispensing errors. It also resulted in the RPSGB issuing an explicit statement on rest breaks based on the research evidence presented. This decisive action, based on existing evidence, will result in significant benefit for pharmacists and the patients they serve.

Programme 4 – Medicines and the health of communities will explore medicines and their place in addressing the wider health agenda relating to public health and tackling inequalities.

Results from ongoing projects under this research programme will be available in future reporting years.

Programme 5 – Science, technology and medicines will highlight how well the different systems meet the changing expectations of society and accommodate the challenges of a rapidly evolving scientific and technological agenda.

Results from ongoing projects under this research programme will be available in future reporting years.

Capacity Building

In order for pharmacy to become an established voice in primary care and to be recognised as a key and essential element in the delivery of clinical services, a sound evidence base that demonstrates how pharmacy delivers effective, high quality and value for money services is needed. Indeed, the UK strategies for pharmacy all indicate that research underpinning both clinical and commissioning decisions needs to be strengthened and this represents a capacity building requirement within the system as a whole.

The Trustees recognise that, as in any field of academic endeavour, the quality of the research produced relies heavily upon the availability of a properly equipped research workforce. The Trustees are therefore committed to supporting the development and training of the research workforce. The Trust has a specific programme of research grants and bursaries, funded with grants from the Leverhulme Trade Charities Trust and the Galen Trust.

In the reporting year the Trust made research grants (personal awards) and training bursaries of more than £100,000 to eight pharmacists to develop capacity within the profession.

Since the launch of the one-to-one research e-mentoring scheme for pharmacists, 15 mentors and 7 mentees have signed up to the scheme. In the reporting year, the research team undertook an evaluation of the scheme to ascertain mentor/mentee experiences and develop and improve upon the service.

GRANT MAKING POLICY

The Trust supports high quality research across pharmacy practice and the wider health services research. Both grant making & commissioning is done through a national competitive process and supported by external expert peer review. In the reporting year the Trust gained membership to the Association of Medical Research Charities, giving the research governance processes a recognised "quality mark".

PARTNERSHIPS

The Trustees are committed to working with other stakeholders in order to turn the knowledge into know-how which improves policy, practice and services and supports the process of innovation in healthcare. The Trust is always looking to work closely with potential sponsors to identify and develop workable projects and to engender ownership of the results. The Trustees aim to involve all stakeholders and sponsors in events to discuss emerging and final results from the projects funded by the Trust.

ACHIEVEMENTS AND PERFORMANCE

A number of achievements are outlined under the review of activities. In addition, the following achievements were made against the objectives for the year:

Inform the aspirations of the Department of Health's White Paper *Pharmacy In England: Building on strengths – delivering the future*

In November 2008, the Pharmacy Practice Research Trust (the Trust) brought together key stakeholders from all sectors of pharmacy, employers and policy makers, including the Chief Pharmaceutical Officers from England, Scotland and Northern Ireland, to a research summit to discuss the future of pharmacy practice research across the UK. Earlier last year, the 2008 Department of Health White Paper for pharmacy, *Pharmacy in England: Building on strengths – delivering the future*, whilst stating that pharmacists should be involved in the delivery of a wider array of services, also clearly indicated that research underpinning both clinical and commissioning decisions needs to be strengthened.

In the Trust's view, pharmacy practice research has come some way over the last 10 years and some highly influential research has been undertaken in all four nations. However, in general the research is largely small scale and exploratory in nature, due in part to a comparatively small research workforce and a shortage of academic and research pharmacists with PhDs. The outputs and recommendations from these discussions form the basis of a strategic direction for pharmacy practice research that the Trust has published.³ This will guide the Trustees in their activities in relation to commissioning and capacity building and will increase opportunities for pharmacy to demonstrate its ability to deliver against the aspirations of the White Paper for the benefit of patients and the public.

Continue to strengthen and develop existing role in capacity building

- There is an apparent lack of engagement with research at practice level. Therefore, the Trust has begun to develop guidance materials to increase pharmacy engagement with research by: providing the necessary tools to evaluate existing services; encouraging practitioners to design and conduct high quality research; highlighting the value of developing evidence based practice; and, providing advice and information about disseminating research findings and sharing best practice. It is anticipated that this work will be launched in the reporting year 09/10 and disseminated at a regional level via the RPSGB's Local Practice Forums.
- In the reporting year, the Trust undertook an impact evaluation of its activities. One of the areas explored was research capacity building within pharmacy. All respondents that had received grants from the Trust indicated that the funding had contributed to development of skills, research leadership and capacity in their institution. Furthermore, seventy-three percent of stakeholder respondents indicated that the Trust had effected the development of the academic/research workforce.

Greater partnership working and exploration of match funding opportunities

- The Trust forged a partnership with Arthritis Care in the reporting year and released a joint brief inviting expressions of interest from research teams to investigate the relationship between identity and medication use amongst adolescents with arthritis

³ <http://www.pprt.org.uk/ResearchActivity/StrategicDirectionForPharmacyPracticeResearch.aspx>

and to explore the role of pharmacy in delivering services to this group. There are 17,000 young people in the UK with Rheumatoid Arthritis and 12,000 with Juvenile Idiopathic Arthritis but commonly held assumptions about arthritis are that it is an 'old person's disease' making it difficult for young people to incorporate a diagnosis into their conceptions of identity. Chronic diseases such as these place extensive behavioural demands on adolescents and a number of studies have demonstrated that approximately 50% of adolescents with a long-term condition do not comply with care recommendations. In order to develop interventions to improve medication adherence that are inclusive of patients' beliefs and values, research that explores the relationship between conceptions of identity/body image among adolescents with arthritis and their adherence to medication is needed.

- With the pharmacist's growing clinical role and integration into mainstream healthcare there's an increasing need for pharmacy research to move from a largely science based professional model to one that incorporates social science and philosophy. The Trust has, therefore, forged three new collaborative academic partnerships (funded by the Economic and Social Research Council Collaborative Studentship funding) to develop research capacity for the pharmacy profession in this way:

Community pharmacists and people with dementia: issues and developments
– Professor Alison Bowes, Applied Social Science, University of Stirling (1+3 year studentship).

Personalised medicine and hospital and community-based pharmacy: understanding the needs and role of pharmacists in response to innovation – Professor Andrew Webster, Sociology, University of York (+3 year studentship)

A mixed methods study of the implications for pharmacy policy and practice of self-tests for signs of serious illness – Dr Helen M Pattison, School of Life and Health Sciences, Aston University (1+3 year studentship)

STRUCTURE, GOVERNANCE AND MANAGEMENT

The Trust is a charitable trust established in 1999 by the Royal Pharmaceutical Society of Great Britain (RPSGB) to enable the RPSGB to benefit from the governance arrangements set up by the Trust and to ensure that the research funded is, and is seen to be, independent. The Trust is registered under the Charities Act 1993 (registration number 1076457).

The Trust is an independent research charity whose registered office is 1 Lambeth High Street, London SE1 7JN. The Trust is governed by its Charitable Trust Deed of 20th October 1998 and a supplemental Deed of Amendment of 17th March 2005.

The Trustees of the Pharmacy Practice Research Trust are distinguished in the fields of pharmacy, medicine, health services, patient and public involvement, research, business, law, economics and policy. The Trust considers each of the Trustees to be independent in character and judgement and that there are no relationships or circumstances which are likely to affect, or could appear to affect, the Trustees' judgement.

Trusteeship is discussed at the first Trustees' meeting each year. Trustees are invited to consider whether they are still able to make a valuable contribution to the Trust or whether they ought, in all the circumstances, to give way to new Trustees. A Trustee cannot resign unless there will be at least two Trustees left after the resignation. The Trust considers this more appropriate than a formal term of office.

Trustees are appointed by the RPSGB⁴, as Settlor, and in selecting persons to be appointed as Trustees, the Settlor takes into account the benefits of appointing a person who is able, by virtue of his or her personal or professional qualifications, to make a contribution to the pursuit of the Objects or the management of the Trust.

The Board of Trustees sets strategy, decides priorities, establishes funding policies and allocates budgets. The Board of Trustees draws on the advice and help of a number of experts in relation to grant making and project management/oversight.

The Trust undertakes a comprehensive induction programme for all new Trustees, which includes induction materials relating to the Trust's charitable purposes and finances, the powers of the Trustees and information about day-to-day running of the Trust. Key documents are provided, such as the Trust Deed, Deed of Amendment, The Essential Trustee⁵, three years of audited accounts and minutes of the most recent Trust Board meetings. Generic training is offered in areas such as Charity Trusteeship, Governance and Compliance, Financial Accounting and Intellectual Property. Informal training is offered through opportunities to attend pharmacy practice and health services conferences and seminars. Trustees also receive relevant training through their roles on external boards and committees on which they sit.

Declarations of Trustee's Conflicts of Interest:

- | | | |
|------------------|---|--|
| Mr Steve Churton | - | President, RPSGB |
| | - | Trustee, Pharmaceutical Trust for Educational and Charitable Objects |
| Mr Ray Jobling | - | Council Member, RPSGB |

⁴ The Royal Pharmaceutical Society of Great Britain (RPSGB) is the professional and regulatory body for pharmacists in England, Scotland and Wales. The primary objectives of the RPSGB are to lead, regulate, develop and represent the profession of pharmacy.

⁵ Charity Commission publication available at <http://www.charity-commission.gov.uk/publications/cc3.asp>

STATEMENT OF TRUSTEE'S RESPONSIBILITIES

The Trustees of the Charity are required to prepare for each financial year accounts 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 year. In preparing those financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- make judgments and estimates that are reasonable and prudent;
- state whether applicable 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 this basis applies.

The Trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Charity and to enable them to ensure that the financial statements comply with statutory requirements and with the Trust Deed dated 20 October 1998. 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.

PUBLIC BENEFIT

The Trustees confirm that they have complied with the duty in section 4 of the Charities Act 2006 to have due regard to the public benefit guidance published by the Charity Commission in determining the activities undertaken by the charity.

RISK ASSESSMENT

The Trustees are satisfied that the major risks to which the Trust is exposed, as identified by the Trustees, have been reviewed and that systems have been established to mitigate those risks. These will be reviewed on an annual basis.

PLANS FOR THE FUTURE

Seek further funding for pharmacy practice research to build evidence base for pharmacy to meet the aspirations of the White Paper *Pharmacy In England: Building on strengths – delivering the future*

To ensure that the pharmacy profession is able to engage with and demonstrate its role in meeting the aspirations of the White Paper the Trust will approach the wider stakeholder community to encourage ownership and investment in this agenda beyond existing funders.

Seek to secure medium and long-term collaborative relationship with both the RPSGB in its role as the new Professional Leadership Body, the new regulator for pharmacy (the General Pharmaceutical Council) and the Pharmaceutical Trust for Education and Charitable Objects.

Historically, the above organisations have shown a strong commitment to pharmacy practice research and have invested in the work of the Trust for the benefit of the profession and the public it serves. However, the RPSGB is currently undergoing significant organisational change which means that existing collaborations and future funding streams are being reviewed. The Trust will seek to secure future relationships with the above organisations to future proof its activities in advancing the profession through the research agenda.

Identify alternative partners/funders to reduce high risk of reliance on a small number of substantial donors.

The Trustees recognised in their annual risk assessment that reliance on a small number of substantial donors for resources is a high risk for the charity. This is exacerbated by the current economic climate as well as the organisational change and funding reviews referred to above. Therefore, the Trust will seek to further develop a wider funding base through enhanced stakeholder engagement, partnership working and direct funding applications.

FINANCIAL REVIEW

The Trustees administered the following grants in 2008/09:

From the Pharmaceutical Trust for Educational and Charitable Objectives:

- A restricted programme grant of £750K over 3 years (2007-2009) towards the cost of commissioning research under the Medicines and People programme of which £250,000 was received as income in the reporting year.
- An unrestricted grant of £213.9K over 3 years (2007-2009) to run the Trust, including publication and dissemination costs of which £71,300 was received in the reporting year.

From the Leverhulme Trade Charities Trust:

- A restricted project grant of £135K over three years to fund the Sir Hugh Linstead Fellowship (2007-2009) of which £50,000 was received as income in the reporting year.
- A restricted grant of £90K over three years (2008-2010) to fund the Research Training Bursary Scheme in pharmacy (community and PCO) of which £43,000 was received as income in the reporting year.

From the Galen Trust:

- A restricted grant of £50,000 towards funding responsive research through the "Galen Award" scheme for a period of 3 years (2008 – 2010) received as income in the reporting year 07/08.

In addition, the RPSGB provides the following support for the Trust which appears in the annual accounts of the Trust as a "Gift in Kind":

- Staff time to support the Trustees in their work; and
- Office accommodation (and associated overhead costs).

Charitable Outgoing Resources

Total charitable expenditure for the year was £392,455 (07/08: £265,828), an increase of £126,627.

Research Expenditure

In the reporting year 08/09, a total of £135,821 was spent on commissioned research under Programme 3 of the *Medicines and People* research programme.

Capacity Building

Total capacity building expenditure for the year was £70,074 (07/08: £26,610), an increase of £43,464.

Coordination & Governance

Coordination & Governance covers all charitable activities excluding research funding, grant making & capacity building. In the reporting year 08/09 a total of £52,538 (07/08: £40,398) was spent on Coordination & Governance activities.

Support

Total income for the year was £577,627 (07/08: £556,837), an increase of £20,790.

Reserves policy

Reserves at the year end stood at a level which is sufficient to sustain the Trust's current level of activities. It is anticipated that the scope and level of operation will expand as further funds are raised.

Approved by the Trustees on 25th March 2010 and signed on their behalf by:

Marshall Davies
Chair, Pharmacy Practice Research Trust

INDEPENDENT AUDITORS' REPORT TO THE TRUSTEES OF THE PHARMACY PRACTICE RESEARCH TRUST

We have audited the financial statements of The Pharmacy Practice Research Trust for the year ended 31 August 2009 which comprise the Statement of Financial Activities, the Balance Sheet, and the related notes. These financial statements have been prepared under the historical cost convention and the accounting policies set out therein.

This report is made solely to the charity's trustees, as a body, in accordance with the regulations made under the Charities Act 1993. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditors

As described in the Statement of Trustees' Responsibilities the charity's trustees are responsible for the preparation of the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

We have been appointed as auditors under section 43 of the Charities Act 1993 and report in accordance with regulations made under section 44 of that Act. Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and International Standards on Auditing (UK and Ireland).

We report to you our opinion as to whether the financial statements give a true and fair view and are properly prepared in accordance with the Charities Act 1993. We also report to you if, in our opinion, the Trustees' Report is not consistent with the financial statements, if the charity has not kept proper accounting records, if we have not received all the information and explanations we require for our audit.

We read the Trustees' Report and consider the implications for our report if we become aware of any apparent misstatements within it.

Basis of audit opinion

We conducted our audit in accordance with International Standards on Auditing (UK and Ireland) issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgments made by the trustees in the preparation of the financial statements, and of whether the accounting policies are appropriate to the charity's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

Opinion

In our opinion the financial statements:

- give a true and fair view, in accordance with United Kingdom Generally Accepted Accounting Practice, of the state of the charity's affairs as at 31 August 2009 and of its incoming resources and application of resources in the year then ended; and
- have been properly prepared in accordance with the Charities Act 1993.

haysmacintyre
Registered Auditors

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Fairfax House
15 Fulwood Place
London
WC1V 6AY

THE PHARMACY PRACTICE RESEARCH TRUST

STATEMENT OF FINANCIAL ACTIVITIES

FOR THE YEAR TO 31 AUGUST 2009

	Notes	Unrestricted funds	Restricted funds	Total 2009	Total 2008
		£	£	£	£
INCOMING RESOURCES					
<i>Voluntary income</i>					
Collections , Legacies & Donations	1	134,022	-	134,022	122,320
Grants		71,300	-	71,300	71,300
<i>Incoming resources from charitable activities :</i>					
Grants for training and research		-	343,000	343,000	338,000
Other Income		29,285	20	29,305	25,217
Total Incoming resources		<u>234,607</u>	<u>343,020</u>	<u>577,627</u>	<u>556,837</u>
RESOURCES EXPENDED					
<i>Charitable activities</i>					
Grants for training and research		30,085	70,074	100,159	55,152
Research costs		128,418	135,821	264,239	183,894
<i>Governance Costs</i>		28,057	-	28,057	26,782
Total Resources Expended	2	<u>186,560</u>	<u>205,895</u>	<u>392,455</u>	<u>265,828</u>
Net incoming resources and net movement on funds	3	48,047	137,125	185,172	291,009
Funds Brought Forward		<u>212,519</u>	<u>468,269</u>	<u>680,788</u>	<u>389,779</u>
Funds Carried Forward		<u>260,566</u>	<u>605,394</u>	<u>865,960</u>	<u>680,788</u>

All operations are continuing.

The notes on pages 17 to 21 form part of these financial statements.

THE PHARMACY PRACTICE RESEARCH TRUST

BALANCE SHEET

AS AT 31 AUGUST 2009

		2009		2008	
	Note	£	£	£	£
CURRENT ASSETS					
Debtors	4	-	-	-	-
Cash at Bank and in hand		873,371		699,094	
		<u>873,371</u>		<u>699,094</u>	
CREDITORS: Amounts falling due within one year	5	<u>(7,411)</u>		<u>(18,306)</u>	
NET CURRENT ASSETS			865,960		680,788
NET ASSETS	8		<u>865,960</u>		<u>680,788</u>
FUNDS					
Unrestricted	6		260,566		212,519
Restricted	7		605,394		468,269
			<u>865,960</u>		<u>680,788</u>

The notes on pages 17 to 21 form part of these financial statements.

The financial statements were approved by the Trustees on 25th March 2010 and were signed below on its behalf by:

P. L. Marshall Davies
Trustee

THE PHARMACY PRACTICE RESEARCH TRUST

ACCOUNTING POLICIES

FOR THE YEAR ENDED 31 AUGUST 2009

The financial statements have been prepared under the historical cost convention. In preparing the financial statements the charity follows best practice as laid down in the Statement of Recommended Practice "Accounting and Reporting by Charities" (SORP 2005) issued in March 2005.

Incoming resources

Collections, Legacies and Donations

These are recognised when receivable or when the Trust becomes legally entitled to them. Costs borne by the Royal Pharmaceutical Society on behalf of the Trust are reflected as income, classified as donations and as expenditure in the appropriate categories.

Grants have been accounted for when receivable by the charity.

Resources Expended

Grants payable to further charitable objectives are outflows of resources in respect of grants for training and research.

Research costs relate to the charity's costs associated with pharmaceutical research plus an allocation of support costs.

Governance costs are costs associated with constitutional and statutory requirements, e.g. the cost of trustee meetings and preparing statutory accounts, and costs incurred in the efficient running of the Trust, e.g. office costs.

Funds

Unrestricted funds comprise those funds which the trustees are free to use in accordance with the charitable objects.

Restricted funds comprise those funds which the trustees must use for training bursaries and research to further charitable objectives.

THE PHARMACY PRACTICE RESEARCH TRUST

NOTES TO THE ACCOUNTS

FOR THE YEAR ENDED 31 AUGUST 2009

1. COLLECTIONS, LEGACIES AND DONATIONS

	Unrestricted Funds £	Restricted Funds £	Total 2009 £	Total 2008 £
Gift in kind from R.P.S.G.B	134,022	-	134,022	122,320
	<u>134,022</u>		<u>134,022</u>	<u>122,320</u>
	<u><u>134,022</u></u>		<u><u>134,022</u></u>	<u><u>122,320</u></u>

The Gift in Kind is a contribution from the RPSGB to the Trust for staff costs and a 40% overhead of these costs to cover infrastructure (IT & Technical support, financial services, catering services, office cleaning, human resources, maintenance and library services). 75% of the salary contribution is allocated to research.

2. RESOURCES EXPENDED	Staff Costs £	Other Costs £	Total 2009 £	Total 2008 £
<i>Charitable Activities</i>				
Training and research grants	7,180	92,979	100,159	55,152
Research costs	83,763	180,476	264,239	183,894
Governance costs	4,786	23,271	28,057	26,782
	<u>95,729</u>	<u>296,726</u>	<u>392,455</u>	<u>265,828</u>
	<u><u>95,729</u></u>	<u><u>296,726</u></u>	<u><u>392,455</u></u>	<u><u>265,828</u></u>
2a. RESOURCES EXPENDED	Direct costs £	Support costs £	Total 2009 £	Total 2008 £
<i>Charitable Activities</i>				
Training and research grants	70,581	29,578	100,159	55,152
Research costs	210,242	53,997	264,239	183,894
Governance costs	19,522	8,535	28,057	26,782
	<u>300,345</u>	<u>92,110</u>	<u>392,455</u>	<u>265,828</u>
	<u><u>300,345</u></u>	<u><u>92,110</u></u>	<u><u>392,455</u></u>	<u><u>265,828</u></u>

THE PHARMACY PRACTICE RESEARCH TRUST

NOTES TO THE ACCOUNTS (continued)

FOR THE YEAR ENDED 31 AUGUST 2009

2b. SUPPORT COSTS	Total 2009 £	Total 2008 £
Conference/Events	24,721	13,638
Salary Costs (see note 1)	23,932	21,842
Overheads (see note 1)	38,293	34,949
Stationery	574	3,821
Refreshments	656	8
Training	648	1,296
Promotion	3,286	6,108
	<u>92,110</u>	<u>81,662</u>

2b. STAFF COSTS

The staff costs are analysed as follows:

Wages and salaries	81,803	73,618
Social Security	8,568	7,663
Pension Costs	5,358	6,090
	<u>95,729</u>	<u>87,371</u>

No

No

No employee earned more than £60,000 per annum from the Trust.

Number of employees	<u>5 (2.8 FTE)</u>	<u>5 (2.3 FTE)</u>
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The Trust do not employ any staff directly. The charge above reflects the breakdown of staff costs from RPSGB.

3. NET MOVEMENT OF FUNDS

The net movement of funds is stated after charging:

Auditors remuneration – audit fee	<u>5,000</u>	<u>4,800</u>
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THE PHARMACY PRACTICE RESEARCH TRUST

NOTES TO THE ACCOUNTS (continued)

FOR THE YEAR ENDED 31 AUGUST 2009

4. DEBTORS					2009	2008
					£	£
Accrued income:						
Amounts due from PTECO					-	-
					<u> </u>	<u> </u>
5. CREDITORS					2009	2008
					£	£
Accruals					7,411	18,306
					<u> </u>	<u> </u>
					<u>7,411</u>	<u>18,306</u>
					<u> </u>	<u> </u>
6. UNRESTRICTED FUNDS	Balance at 1 September 2008	Incoming Resources	Resources Expended	Transfers		Balance at 31 August 2009
	£	£	£	£		£
General	212,519	234,607	(186,560)	-		260,566
	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>
7. RESTRICTED FUNDS	Balance at 1 September 2008	Incoming Resources	Resources Expended	Transfers		Balance at 31 August 2009
	£	£	£	£		£
LTCT	19,231	43,000	(29,793)	-		32,438
Galen	30,582	20	(12,885)	-		17,717
Linstead	47,831	50,000	(27,396)	-		70,435
Donations for research	370,625	250,000	(135,821)	-		484,804
	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>
	<u>468,269</u>	<u>343,020</u>	<u>(205,895)</u>	<u> </u>		<u>605,394</u>
	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>

Research Training Bursaries (LTCT)

Bursaries made annually to develop individual pharmacists' skills and careers in research.

Galen (Trust)

Awards are made annually by the trust to individual pharmacy researchers. This is funded by the Galen Trust.

THE PHARMACY PRACTICE RESEARCH TRUST

NOTES TO THE ACCOUNTS (continued)

FOR THE YEAR ENDED 31 AUGUST 2009

7. RESTRICTED FUNDS (continued)

Linstead (LTCT)

Awards made annually to a total value of up to £45,000 for research that is of benefit to community pharmacy

Donations for Research

This fund was set up to cover costs to continue and fund research projects carried out by the Trust. In 2009, the fund has received income from the Pharmacy Trust for Education and Charitable Objectives (PTECO).

8. ANALYSIS OF NET ASSETS BETWEEN FUNDS	Tangible fixed assets £	Net current Assets £	Long Term Liabilities £	Total £
Restricted Funds	-	605,394	-	605,394
Unrestricted Funds	-	260,566	-	260,566
	<u>-</u>	<u>865,960</u>	<u>-</u>	<u>865,960</u>
	<u><u>-</u></u>	<u><u>865,960</u></u>	<u><u>-</u></u>	<u><u>865,960</u></u>

9. RELATED PARTY NOTE

The trustees did not receive any remuneration during the year, however 6 trustees received reimbursed expenses amounting to £5,038 (2008: 7 trustees received £4,176) covering the cost of travel during the year.

During the year the Royal Pharmaceutical Society (R.P.S.) incurred costs amounting to (£Nil) on behalf of the Trust. The R.P.S. also incurred salary and overhead costs on behalf of the Trust which amounted to £134,022 (2008: £122,230). These amounts are reflected both as income and expenditure in the Trust's accounts.

The ex-officio, Steve Churton is also a Trustee of the PTECO.

Mr Ray Jobling is also a Council Member of the RPSGB.