# **CNMF 23rd Biennial Meeting 2018**

# Leading the way: nurses and midwives for a safe, healthy and peaceful world

hosted by the CNMF and the Royal College of Nursing Friday 9 March 2018





# MEETING REPORT

The CNMF 23<sup>rd</sup> Biennial Meeting of members was held at the Royal College of Nursing, London UK on Friday 9 March 2018. The Biennial Meeting is the decision making body of the CNMF. At the Biennial, members voted on constitutional changes, endorsed policy statements, and elected the new CNMF President and Deputy President. Fifty members from sixteen countries attended the meeting. The report below highlights some of the key decision made at the meeting. The CNMF is very grateful to the Royal College of Nursing UK who generously hosted the meeting as well as the CNMF Board Meeting the previous day.



CNMF Biennial March 2018

The outgoing CNMF President, Ms Ramziah Binti Ahmad from Malaysia welcomed delegates to the 23<sup>rd</sup> Biennial Meeting. Ms Janet Davies, Chief Executive Officer and General Secretary of the Royal College of Nursing UK, welcomed delegates to the United Kingdom and to the RCN. Ms Ahmad introduced the CNMF Regional Board Members to delegates and invited delegates to introduce themselves to each other.

# PRESIDENT'S REPORT

The outgoing CNMF President then gave her report to delegates which was an overview of her four years as President of the CNMF. The highlights were:





I was President of the Malaysian Nurses Asociation for seven consecutive years from 2007 until 2014 and during that time, amongst other things:

- Organised and hosting the CNMF Biennial Meeting in Kuala Lumpur in 2007,
- Attended the Commonwealth Asia Migration Symposium in 2008,
- Presented at the CNMF Biennial Meeting in Botswana in 2009,
- Organised three leadership workshops for nurses in Malaysia in 2009.



I was elected Board member for the CNMF Pacific Region in Botswana in 2009. At that time the CNMF Pacific Region included Singapore and Malaysia. I was the first person from Asia to hold the position.

As CNMF Pacific Region Board Member:

 I attended and presented at the 15<sup>th</sup> South Pacific Nurses Forum in 2010.



In 2011 when Malaysia and Singapore joined the CNMF Asia Region, I became CNMF Board Member for the Asia Region.

During that time I conducted a patient safety workshop for nurses and midwives in Sri Lanka in 2013 and also attended the opening of the Commonwealth Heads of Government meeting.

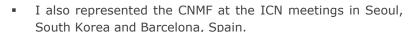


In 2014, I was elected President of the CNMF. This was a great privilege and honour. I had the opportunity to:

 Recruit the Brunei Darussalam Nurses Association into membership of the CNMF and conducted a leadership workshop for nurses and midwives in Brunei in 2014. I also attended the Queen of Brunei Darussalam's birthday celebrations.



- Participated in the Commonwealth Health Professions Alliance debate on the Millenium Development Goals at the Commonwealth Health Ministers' meeting in Geneva.
- I also had the privilege of attended a reception for Commonwealth civil society organisations held at Buckingham Palace and hosted by the Queen.





 Last year I had the great honour of conducting a leadership workshop for nurses and midwives in New Delhi India hosted by the Trained Nurses Association of India.

It has been a wonderful journey and I want to acknowledge the executive members of the CNMF, especially our Executive Secretary, Jill Iliffe and all Regional Board Members; the Malaysian Nurses Association for their support and all the national nursing association members of the CNMF. Special thanks to the Royal College of Nursing for the ongoing support which is so important to the CNMF. Congratulations to the new President and Deputy President and Regional Board Members. As I pass the baton to the new President I wish the CNMF all the best into the future.

The President then invited the Executive Secretary, Ms Jill Iliffe to give her report.



# 23rd CNMF BIENNIAL MEETING Jill ILIFFE

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**FINANCES** 

Ms Iliffe briefly highlighted with a power point presentation the key activities of the CNMF over the past two years under the headings: governance, administration, finances, communication, liaison, membership and programs.

### **GOVERNANCE**

Ms Iliffe advised that elections had been held for CNMF Board Member for the West Africa; Atlantic; East, Central and Southern Africa; and Asia Regions and elections will be held elections for CNMF President and Deputy President at the Biennial Meeting. Mr Paul Magesa Mashauri from Tanzania was re-elected as the CNMF Board Member for the East, Central and Southern Africa Region; and Ms Hossinatu Mary Kanu from Sierra Leone was re-elected as CNMF Board Member for the West Africa Region; and Mrs Bettyann Murray-John from Trinidad and Tobago is the new CNMF Board Member for the Atlantic Region. A new election is being held for the CNMF Board Member for the Asia Region.

Ms Iliffe explained that the newly elected or reelected Board Members term of office is from the close of the Biennial Meeting of Members 2018 to the close of the Biennial Meeting of Members 2022. The term of office for Board Members for the Pacific and Europe Regions finishes at the close of the Biennial Meeting of Members 2020.

# **ADMINISTRATION**

Ms Iliffe said that all administrative processes for the CNMF were running smoothly. An Annual Report is issued at the close of each financial year and also submitted to the Commonwealth Secretariat as part of ongoing Commonwealth accreditation. Ms Iliffe announced that a digital archive had been established for all CNMF files attached to a protected site on the CNMF website. This will preserve the CNMF records and history for the future in a searchable format. CNMF files have been held in an electronic format since 2012 and all existing paper files will gradually be digitised and added to the archive.

Ms Iliffe reported that the CNMF was in a stable financial position. Revenue was derived from membership fees, project grants, and consultancy work. Revenue from the consultancy work for the African Regulatory Collaborative will cease in August which will have an impact on the CNMF finances and work. All company and taxation statutory responsibilities have been met. The CNMF Board have approved the establishment of a Commonwealth Nurses and Midwives Foundation to be able to accumulate funds specifically for project work however this work has not yet commenced. The CNMF accounts are audited annually.

#### **COMMUNICATION**

Ms Iliffe reported that the three main mediums for communication were the monthly e-News, the biannual journal, The Commonwealth Nurse, and the CNMF website.





http://www.commonwealthnurses.org

The CNMF journal, The Commonwealth Nurse, has its own website and is produced digitally to reduce printing and postage charges. The CNMF website, is managed in-house to reduce costs and is regularly updated and redesigned to keep it fresh and interesting.

#### **MEMBERSHIP**

Membership is stable however there are some Commonwealth countries who are still not members of the CNMF, particularly midwifery associations. Countries are often slow to renew their membership and require continual follow-up. The new membership categories for the CNMF have been slow to grow but an increase in membership is necessary so the organisation is self-sufficient.

#### **LIAISON**

The CNMF maintains contact with the Commonwealth Secretariat and the Commonwealth Foundation; the Commonwealth Health Professions Alliance; C3 Collaborating for Health; The Burdett Trust; ICN and ICM; Health Information for All; and various other international organisations. The CNMF also liaises with the South Pacific Nurses Forum, the Caribbean Nurses Organisation, the East, Central and Southern Africa College of Nursing, and the West Africa College of Nursing through Regional Board Members.

# **PROGRAMS**

Ms Iliffe briefly outlined some of the activities and projects the CNMF has been involved in.

# Mental health legislation reform project

This project funded by the Commonwealth Foundation worked with two Commonwealth countries, Botswana and the Seychelles to reform their mental health legislation. The project received an extension to see the legislation finalised and admitted to Parliament.

# **African Regulatory Collaborative**

The three ARC initiatives – ARC ECSA, ARC West, and LARC held their final meetings in July 2017. With the change in administration in the USA, the initiative was not refunded. This was very disappointing considering the significant accomplishments during the initiative.

# **Lesotho CPD Data Base**

A data base was developed for Lesotho to monitor their mandatory CPD training. This data base can easily be modified for use by other countries on request.

# **Tanzania Generic CPD Framework**

This project was funded by I-TECH to develop a CPD framework for all their health workers both licensed and those not currently licensed. An implementation plan was also developed.

# **Maternal Health Education and Training**

The education and training is funded by the Burdett Trust for Nursing and conducted by the CNMF Education Consultant, Ms Minnesha Yasmine. Programs have been conducted in Malawi, Tanzania and Sierra Leone with two further programs for Sierra Leone still to be conducted. The program is run over five days and provides an opportunity for midwives to reflect on and refresh their midwifery skills and be introduced to current maternity teaching resources. The programs are evaluated highly by participants.



# Botswana Nursing and Midwifery Standards and National Nursing and Midwifery Strategy

The CNMF was invited by the Botswana Chief Nursing Officer to assist with the development of a national nursing and midwifery strategy and also invited by the Registrar of the Nursing and Midwifery Council of Botswana to assist in the development of their nursing and midwifery education and practice standards.



# **Nurses' Health in the South Pacific**

This project is also funded by the Burdett Trust for Nursing and is looking at nurses' health and any impacts on their health education messages to their clients. The project is working in Fiji, the Cook Island, Kiribati, Samoa and Tonga.

In concluding her report, Ms Iliffe thanked the RCN for their ongoing support; friendship; wise counsel; the provision of administrative support; and the hosting of the Biennial Meeting. Ms Iliffe paid tribute to the support, commitment and contribution of the CNMF President, Vice President, Board Members and Honorary Treasurer.

#### **CNMF ELECTIONS**

Elections were held for the positions of CNMF President and Deputy President. Professor Kathleen McCourt from the UK was the only nominee for the position of President so was elected unopposed. Mrs Rosemarie Josey from the Bahamas was the successful candidate for Deputy President. Both terms are for four years.





Professor Kathleen McCourt Mrs Rosemarie Josev

# **CONSTITUTIONAL CHANGES**

The constitutional changes proposed by the CNMF Board were endorsed. There were four minor changes:

- Changing the term Vice President to Deputy President.
- Inserting a clause that clarified when terms of office began and ended.
- Inserting activity requirements for Regional Board Members.
- Inserting a clause to remove an elected officer who was not performing in the role.

# **POLICY STATEMENTS**

Three policy statements developed from policy discussion at the 22<sup>nd</sup> CNMF Biennial Meeting in 2016 were submitted for endorsement. The policy statements had been circulated to members for comment prior to finalisation.

- Policy statement on career structures for nurses and midwives.
- Policy statement on nursing and midwifery work.
- statement on professional and Policy industrial representation for nurses and midwives.

Following discussion and minor amendment the policy statements were endorsed by the meeting. Two policy discussions followed to be developed into policy statements for endorsement in 2020.

- The relationship between nursing and midwifery education and practice.
- Continuing professional development and whether it should be mandatory and linked to re-licensure.

# POLICY STATEMENT ON NURSING AND MIDWIFERY WORK

The Commonwealth Nurses and Midwives Federation supports the position that all workers providing nursing and midwifery care are part of the nursing and midwifery family: from novice to expert, from lower level cadre to higher level cadre. Position titles should include the words: nurse or nursing; midwife or midwifery so that the worker is clearly identified as being a part of the nursing and midwifery profession (for example registered nurse; enrolled nurse; nurse or nursing assistant; registered midwife; enrolled midwife; midwife or midwifery assistant). As all nurses and midwives work together as a team, delegating care to or between each other, in order to protect worker and client, all workers providing nursing and midwifery care should be educated within a nursing or midwifery faculty, and be regulated by a nursing and midwifery regulatory body.

Endorsed March 2018

# POLICY STATEMENT ON INDUSTRIAL AND PROFESSIONAL REPRESENTATION FOR NURSES **AND MIDWIVES**

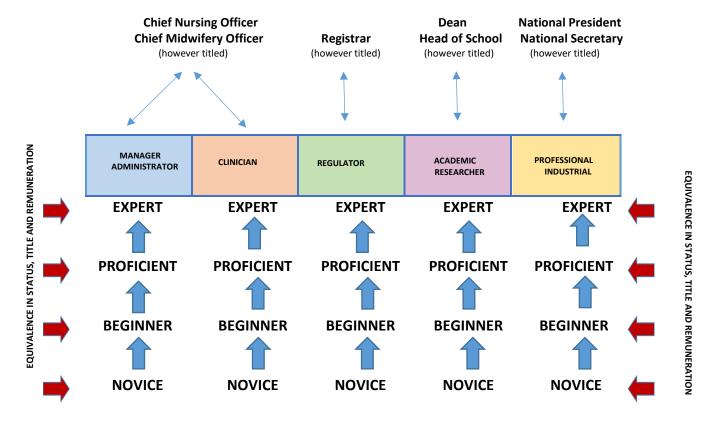
The Commonwealth Nurses and Midwives Federation endorses the position that all workers who are part of the nursing and midwifery family (however titled), and who provide nursing and midwifery care, should be eligible to be a part of, and be represented professionally and industrially by, an organisation that is led or governed by nurses and midwives who can provide input into and influence decisions made on their behalf.

Professional and industrial issues for nurses and midwives are interlinked: industrial issues frequently have professional implications in the same way that issues frequently have industrial professional implications. Nursing and midwifery professional bodies may have an industrial mandate and nursing and midwifery industrial bodies may also have a professional mandate. Professional and industrial representation for nurses and midwives may be conducted by the same organisation however if these bodies are separate organisations, they should work constructively together in the best interests of nurses and midwives. Professional and industrial issues may include: legislation and regulation, initial and continuing education, standards, competencies, career structure, scopes of practice, position descriptions, remuneration, and occupational health and safety.

Endorsed March 2018

#### POLICY STATEMENT ON CAREER STRUCTURES FOR NURSES AND MIDWIVES

The Commonwealth Nurses and Midwives Federation supports career opportunities and career structures for nurses and midwives that allow their progression from beginner to expert in all areas of practice: as managers and administrators; as clinicians; as regulators; as academics and researchers; and as professional and industrial officers. Career progression from beginner to expert should be equivalent in status, title, and remuneration between areas of practice.



# **PREPARE FOR 2020**

5<sup>th</sup> Commonwealth Nurses and Midwives Conference 24<sup>th</sup> CNMF Biennial Meeting of Members

The CNMF Board have confirmed that the 24<sup>th</sup> CNMF Biennial Meeting of Members will be held in London UK on Thursday 5 March 2020. The 5<sup>th</sup> Commonwealth Nurses and Midwives Conference will be held Friday 6 and Saturday 7 March 2020. Members are requested to advise their own members of the dates and are encouraged to start planning now to attend.

Prior to the CNMF Biennial Meeting of Members there will be elections for CNMF Board Member for the Europe and the Pacific Regions.

Two policy statements will be developed and submitted to members for comment in preparation for endorsement at the Biennial Meeting. The policy statements follow discussion on the two issues at the  $23^{rd}$  Biennial Meeting of Members. Members had previously identified the issues of being of concern to them and their members.

The first issue was the relationship between nursing and midwifery education and practice. The discussion at the Biennial Meeting was led by Ghana and South Africa. The second issue related to continuing professional development: whether it should be mandatory, issues of access; and whether it should be linked to re-licensure. The discussion was led by Botswana, the UK, and Australia.



Outgoing Presidential address: Ms Ramziah Binti Ahmad



CNMF Board



CNMF Asia Region



CNMF Atlantic Region



CNMF Pacific and Europe Regions



Delegates at the 23<sup>rd</sup> CNMF Biennial Meeting of Members



CNMF West and East, Central and Southern Africa Regions



Outgoing President Ramziah Ahmad with CNMF Executive Secretary, Jill Iliffe



23<sup>rd</sup> CNMF Biennial Meeting of Members





















Delegates from Africa: Tanzania, Cameroon, South Africa, Ghana, Botswana, Nigeria and Sierra Leone



















Bahamas

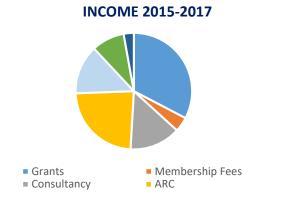


# HONORARY TREASURER'S REPORT

# **Brian CHRISTOPHER**

Ji. Olytu

The Treasurer's report covers the financial years 2015-2016 and 2016-2017. End of year results in both financial years showed a small surplus which is necessary to build up reserves, however it is important to minimise surpluses on which corporation tax must be paid. The CNMF achieves a great deal with very little funding and is held in high regard for the quality, scope and cost-effectiveness of the activities it provides.



# **EXPENDITURE 2015-2017**



# **NOTES TO 2015-2017 ACCOUNTS**

# 1. INCOME

The CNMF income is generated from membership fees, project grants, consultancies, donations, and fundraising activities. The majority of these funds are expended on approved projects and activities leaving a small surplus each year. Net surplus (ie: total income less total expenditure) for the two years under review amounted to £1,629.

# **MEMBERSHIP FEES**

Membership fees are quite small compared with other international organisations. For the last two years they have averaged at £8,751 pa, or 4% of total revenue. Membership fees for national and midwifery organisations are structured according to number of financial members belonging to that organisation The CNMF Board has not increased membership fees since 2014 and there is no recommendation to increase membership fees for 2018. Of the current CNMF financial members, 65% pay the lowest fee.

# **PROJECT GRANTS**

During the reporting period, the CNMF had a number of grants. For the two years under review grants constituted £139,526 (or 33%) of Income.

# (a) Commonwealth Foundation

In 2014, the CNMF was successful in a grant application to the Commonwealth Foundation to work with the governments of Botswana and Seychelles to review their mental health legislation. The grant was for £51,406 over two years. This project concluded at the end of December 2016 with drafting instructions developed and agreed for new mental health legislation in both countries. An extension of funding from the Commonwealth Foundation has been agreed to facilitate the drafting instructions being converted into a new Mental Health Bill.

# (b) The Burdett Trust

The CNMF was awarded £50,000 by the Burdett Trust in 2014 to extend the successful maternal health education updates, previously conducted in Sierra Leone to Lesotho, Malawi and Tanzania. Two programs were conducted in Lesotho in July, two programs in Tanzania in October and December 2016, and one program in Malawi in December 2016. Further funding of £35,500 (2017-2018) has been received from the Burdett Trust to conduct three maternal health programs in Sierra Leone. Another grant for £75,000 (2016-2017) has been received to conduct the first phase of a Nurses' Health project in the South Pacific working with Samoa, Tonga, Fiji, Kiribati, and the Cook Islands. Income from The Burdett Trust amounted to £104,000 or 24% of Total Income for the two years under review.

# (c) Public Health Informatics Institute

The CNMF was contracted by the Public Health Informatics Institute to work with the Botswana nursing and midwifery leadership to develop a Task Sharing Policy. This was a very small grant as the project was run in conjunction with another project funded by the African Regulatory Collaborative initiative. The project was successfully concluded in October 2016.

#### (d) International Training and Education Centre for Health (I-TECH)

The CNMF was contracted to work with the Tanzania Ministry for Health to develop a national continuing professional development framework for all health workers in Tanzania, both those licensed and those not licensed, and an implementation plan so that CPD requirements for health workers are consistent across the country. This was a small project but very interesting and successful.

#### **CONSULTANCY**

This is income generated by consultancy services provided to the African Regulatory Collaborative. Income from consultancy services provided 14% of total income. Consultancy income relates to writing the reports of the meetings and provided technical assistance to countries with their projects. The line also includes a small consultancy in supporting a CPD Landscape project in Malawi and Tanzania.

# AFRICAN REGULATORY COLLABORATIVE (ARC)

ARC is a partnership between the Centre for Disease Prevention and Control (CDC) in Atlanta; Emory University also in Atlanta; the East, Central and Southern Africa Health Community; and the Commonwealth Nurses and Midwives Federation to work with nursing and midwifery leaders in the ECSA region to improve regulation and standards particularly in relation to HIV prevention, care and treatment. The income shown in this line represents administrative support provided by the CNMF in 2016. The ARC income is offset by ARC expenses. ARC income and expenditure in any given financial year is influenced by the number of meetings held in that financial year. ARC income represented 23% of total income. The differences in receipts and payments for ARC in the accounts are due to income and expenditure overlapping within different financial years. The ARC initiative came to an end in August 2017.

# **CONFERENCES**

This income relates predominantly to income generated by the  $3^{rd}$  Commonwealth Nurses and Midwives Conference in March 2016 with only a small amount generated by the  $4^{th}$  Commonwealth Nurses and Midwives Conference. The conference income is offset by conference expenditure.

# **COMMONWEALTH CIVIL SOCIETY FORUMS**

The CNMF acts as treasurer for the Commonwealth Health Professions Alliance (CHPA). The CHPA puts in a funding proposal to the Commonwealth Foundation each year to host a Commonwealth Civil Society Forum (CCSF) in conjunction with the Commonwealth Health Ministers' meeting. The CNMF acts as the budget holder for the CCSF. The income for the CCSF is offset by the expenditure. Any unspent funds are returned to the Commonwealth Foundation. Income over the last four years has totalled £58,888, with expenses of £61,085.

# **MISCELLANEOUS**

This line in the past has included reimbursements received for payments made which could be claimed back from a third party. In future financial years, any reimbursements received will be allocated to the relevant line.

# 2. EXPENDITURE

The CNMF expenditure reflects the costs associated with running the organisation and conducting projects.

#### **PROJECTS**

These items represent costs incurred in managing and delivering projects. The difference between the income and expenditure is attributable to income being received in one financial year but expenses not being paid until a difference financial year. Income also includes a small project management fee for each project which means that income should always be slightly in excess of expenditure. Overall project costs came in at £86,409 over the two year period (20% of total expenditure).

#### **CONSULTANT FEES**

The bulk of the expenditure in this line is the consultant fee for the Executive Secretary. From 1 April 2017, the Executive Secretary is employed for 36 hours at £25.00 an hour. The consultant fee line also includes consultancy fees paid to the CNMF Educator and small amounts paid to support in-country facilitators for the maternal health education and training. Consultant Fees account for 20% of total expenditure.

#### **MEETINGS**

This line relates to costs incurred by the Executive Secretary and Board Members attending various meetings representing the CNMF. Costs are kept low by 'piggy-backing' meetings with other meetings, particularly meetings where the costs will be met by other organisations. Meetings accounted for 6% of total expenditure.

#### AFRICAN REGULATORY COLLABORATIVE

The ARC expenditure relates to administrative support which was provided by the CNMF. Generally, the ARC expenditure should be offset by ARC income. ARC expenditure accounted for 25% of total expenditure.

#### **CONFERENCES**

This relates to conference expenditure such as venue and delegate packages; and conference website, call for abstracts, and registration brochure, book of abstracts, and similar items. These costs are mostly defrayed by Conference income.

# **COMMONWEALTH CIVIL SOCIETY FORUMS**

This relates to expenditure associated with the Commonwealth Civil Society Forums: venue, flights, accommodation, speaker costs etc. Most of these costs are covered by funding from the Commonwealth Foundation.

# **OFFICE SERVICES**

The costs in this line relate to office attendance by the Executive Secretary, paper, printing, telephone, website costs, capital expenses etc. Streamlining and reorganising office and publication arrangements have significantly reduced costs. Skype, text and email are predominantly used for communication keeping telephone costs very low. There is minimal cost for postage. Website costs are kept low because website maintenance, such as uploading and removing items from the website, is done 'in-house'. Overall such costs make up 1% of total expenditure.

# **FINANCIAL EXPENSES**

This includes bank fees, the auditor's fees, and costs associated with CNMF registration as a private limited company in the UK and registration for Corporation Tax with HM Revenue and Customs. It also includes currency exchange costs (gains or losses). Overall this line makes up 2% of total expenditure.

# **MISCELLANEOUS**

This line includes expenses associated with CNMF membership of the Commonwealth Health Professions Alliance (CHPA) and Health Information for All (HIFA). Miscellaneous costs are less than 1% of total expenditure.

# COMMONWEALTH NURSES AND MIDWIVES FEDERATION RECEIPTS AND PAYMENTS ACCOUNT:

Year ended 30 June 2017

| real ended 50 Julie 2017  |                 |                  |
|---|-----------------|------------------|
| Receipts  | 2017 £          | 2016 £           |
| Grant Income - Commonwealth Foundation - Mental Health Legislation Reform Project | 3,000           | 32,026           |
| Prior Year Adjustment - Mental Health Project 2015 Income taken in 2016           | 0               | 1,000            |
| Burdett Trust Maternal Health Project 2014-15                                     | 5,000           | 10,000           |
| Burdett Trust Maternal Health Project Sierra Leone                                | 25,500          | 0                |
| Burdett Trust Nurses' Health Project South Pacific                                | 63,000          | 0                |
| Commonwealth Civil Society Forum  | 15,000          | 24,000           |
| Consultancy Income  | 22,921          | 37,619           |
| Member subscriptions  | 8,456           | 9,046            |
| African Regulatory Collaborative  | 0               | 100,304          |
| 3 <sup>rd</sup> Commonwealth Nurses Conference 2016                               | 783             | 57,465           |
| Reimbursement   | 69              | 9,162            |
| Miscellaneous   | 2,709           | 140              |
|   | 146,438         | 280,762          |
| <u>Payments</u>   |                 |                  |
| Consultancy fees  | 47,687          | 39,308           |
| Meetings - Members' travel and accommodation                                      | 0               | 8,992            |
| Meetings - Board travel and accommodation   | 4,045           | 3,802            |
| Meetings - Officers' travel and accommodation                                     | 4,528           | 2,975            |
| Burdett Trust Maternal Health Workshops 2014-2016                                 | 28,070          | 10,608           |
| Burdett South Pacific Nurses' Health  | 6,309           | 0                |
| PHII Task Sharing Policy Project  | 0               | 6,369            |
| Mental Health Legislation Reform Project  | 10,475          | 6,820            |
| Botswana National N&M Strategy and N&M Education and Practice Standards           | 6,188           | 0                |
| Website Development Program   | 365             | 1,107            |
| 2015 Commonwealth Civil Society Forum   | 0               | 569              |
| 2016 Commonwealth Civil Society Forum   | 17.547          | 26,032           |
| 2017 Commonwealth Civil Society Forum   | 17,547<br>8 731 | 0<br>1 277       |
| I-TECH Gates Project Tanzania African Regulatory Collaborative                    | 8,721<br>6,781  | 1,377<br>100,611 |
| 3rd Commonwealth Nurses and Midwives Conference                                   | 0,781           | 58,713           |
| 4th Commonwealth Nurses and Midwives Conference 2018                              | 1,074           | 0                |
| Capital equipment and Infrastructure  | 0               | 808              |
| Publications  | 0               | 64               |
| Office attendance (travel, accommodation)   | 288             | 273              |
| Office services - stationery, printing, postage, telephone etc                    | 466             | 761              |
| Website   | 1,163           | 1,678            |
| Bank fees   | 439             | 3,405            |
| Net Adjustment/Currency exchange (gain)/loss on AU\$                              | (990)           | 2,772            |
| Auditor's fee   | 900             | 900              |
| Companies House   | 13              | 0                |
| Corporation Tax   | 427             | 1,134            |
| CHPA  | 163             | 37               |
| Subscriptions   | 250             | 100              |
| Miscellaneous   | 1,240           | 207              |
| Complete I/D of the Albertan  | 146,149         | 279,422          |
| Surplus/(Deficit) for the year  | 289             | 1,340            |
| Surplus c/fwd at 30 June 2016   | 26,725          | 25,385           |
| Surpius C/Twa at 30 June 2016   | 27,014          | 26,725           |
| Surplus represented by:   |                 |                  |
| Bank balance  | 40,101          | 111,638          |
| Cash in hand  | 0               | 140              |
| Add debtors and prepayments   | 10,017          | 31,447           |
|   | 50,118          | 143,225          |
| Less creditors and accrued liabilities  | (23,104)        | (116,500)        |
|   | 27,014          | 26,725           |
|   |                 |                  |

**Signed**: Brian Christopher, CNMF Treasurer **Signed**: Jill Iliffe, CNMF Executive Secretary

Signed: Peter Westley BA, FCCA, Chartered Certified Accountant, 12 December 2017