



Annual Report 2012



Mission & Vision

Mission

Achieving optimal asthma care in Ireland.

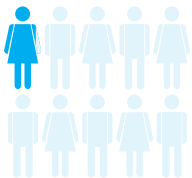
Vision

In Ireland asthma care is planned and managed so that every patient and their family has access to the right treatment and support at the right time in the context of a commitment to a care partnership between the patient and healthcare professionals.

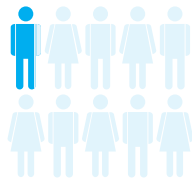
The Asthma Society of Ireland is the national charity dedicated to empowering Ireland's 470,000 people with asthma to take control of their asthma.

Asthma cannot be cured but with the right treatment, knowledge and support, it can be controlled. In Ireland, 60% of people with asthma do not have their asthma under control. This means that many people miss work or school, have to seek emergency care or are hospitalised. It is also a sad fact that on average one person a week dies in Ireland from asthma.

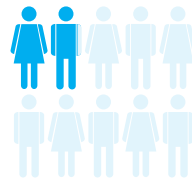
We are working to reduce the number of deaths and hospital visits caused by asthma and to increase the number of people receiving the right information and support to allow them to control their asthma. We directly support people with asthma and their families by providing a wide range of high quality information and education services – all of them completely free of charge. We provide a strong, unified voice, and work to improve the health and quality of life of all people with asthma. We drive change nationally by raising awareness, supporting innovative research and advocating for universal access to best practice asthma care. We actively work in partnership with healthcare professionals, industry and government bodies to provide expert information on asthma and allergies and to keep asthma high on the national agenda.



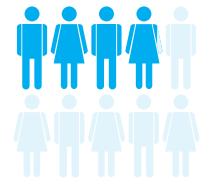
Ireland has the fourth highest prevalence of asthma in the world (470,000 cases in a population of 4,581,269: that is **9.8%** or almost one in 10)



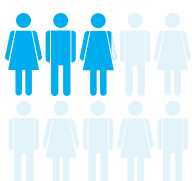
7.1% of population aged 18 and over have asthma



18.9% of 13-15 year olds have asthma



38.5% of 13-15 year olds reported wheezing




- *More than one person a week dies from asthma*
- *More than 5,000 asthma admissions to hospital every year*
- *20,000 asthma related Emergency Department attendances annually*


- 29%** of asthma patients miss school or work
- Adults miss 12 days a year on average
 - Children miss 10 days a year on average

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A Message from Angela Edghill

Chairperson of the Asthma Society of Ireland



Since its foundation in 1973 the Asthma Society of Ireland has had to adapt and reorganise to take account of major change and challenge, external and internal. But one thing has remained unchanged in those 40 years. The Asthma Society of Ireland has stayed true to its original purpose, providing services and support to people with asthma and their families. They remain the core and focus of all we do.

Framing our new strategy for 2012-2015 staff and board members together had the opportunity to plan for the challenges of the future, and also to reflect on the Asthma Society of Ireland's past achievements.

The Strategy contains a commitment to patient-centred services and advocacy. Our Director of Nursing Services, Frances Guiney, and our team of Asthma Nurse Specialists have continued throughout the year to provide their expert advice and reassurance to the almost 3,000 people who contacted our Adviceline or attended our many regional Asthma Clinics. This is an invaluable and personal service available at no cost to the public.

We have been fortunate in having a remarkable team over many years. In 2012 our communications, research, advocacy, fundraising and administrative staff, Anne, Niamh, Louis, Marge, Orlaith, Louise, David, Frank and Ann were the engine of the Asthma Society of Ireland's work...

We are particularly proud of the Asthma Society of Ireland's role in laying the foundations of what is now Government policy, the National Asthma Programme (NAP). When fully implemented, the NAP has the potential to radically change the way asthma is managed in Ireland and to transform the lives of people with asthma. The development of such a programme has been a key goal of the Asthma Society of Ireland over many years. At this crucial stage, we are continue to work with the HSE, the Department of Health, medical, nursing and other professionals on the implementation group. As with any major systemic change, progress can appear to be frustratingly slow at times for all involved. We will continue to work hopefully and positively in partnership with all stakeholders to ensure that our shared goal can be reached.

The past year has seen significant internal change in the Asthma Society of Ireland. Dr. Jean Holohan, our CEO, relocated to London in mid-2012, having spearheaded the painstaking research, collaboration and advocacy work which became the foundation for the NAP. She has been an exceptional champion for people with asthma, developing strong and enduring relationships between the Asthma Society of Ireland and our partners and colleagues across the healthcare sector nationally and internationally. We are so grateful for her pioneering leadership and hard work.

In July, we warmly welcomed Sharon Cosgrove as our new CEO. Sharon has a wealth of experience in the not-for-profit sector. She has quickly got to grips with leading implementation of our strategic plan at the head of the talented staff team.

After twelve years as a Director and nearly ten years as Chair of the Asthma Society of Ireland it is my intention to retire at the 2013 AGM. It has been a huge privilege to work with committed and enthusiastic people who have the common aim of helping to make positive change in the health and lives of people with asthma. I am deeply grateful to past and present Asthma Society Board members, members of the Medical Advisory Board, currently chaired by Dr. Basil Elnazir, staff and many supporters. I thank them all most sincerely for their generosity and hard work and for contributing to the future transformation of the management of asthma in Ireland.

Finally I would like to extend my best wishes to the incoming Chair and Board in the hope and expectation that the next period will be as successful and innovative as the last.

Foreword from Sharon Cosgrove

Chief Executive of the Asthma Society of Ireland



I am delighted to be addressing you as the new CEO of the Asthma Society of Ireland (ASI). I took over from Dr Jean Holohan in July 2012 and look forward to building on her work.

To me, the scale of asthma in Ireland is quite startling with 470,000 people living with this chronic disease day to day. We have the fourth highest level of asthma in the world – certainly not a statistic to be proud of! Many people with asthma are so unwell they are unable to go to work, children are missing school, people are attending hospital emergency departments having asthma attacks and many people are being admitted to hospitals. The most concerning and terrible fact of all is the number of deaths from asthma every year in Ireland. Last year there were 62 deaths from asthma recorded here and a number of these were children and teenagers.

There is currently no cure for asthma, but it can be managed with the right care and guided self-management. The challenge for the Asthma Society of Ireland is to support and advocate for the implementation of the best possible asthma health care service. We do this by working as active partners with the HSE National Asthma Programme which was approved in 2011. Building on the work of my predecessor, Dr. Jean Holohan, we will continue to bring the patient voice to this process as well as pressing Government for the full implementation of the Programme. We will continue to provide specialist services to inform and educate people with asthma, their families and the general public about asthma, about how it can be managed.

The Asthma Society of Ireland is proud to say that in 2012 we provided specialist asthma nursing services to 2,789 people. We had over 50,000 visitors to our website and we distributed thousands of asthma publications to people availing of our services and to members of the public. The Asthma Society of Ireland's 2012 World Asthma Day Campaign received excellent media coverage and was successful in raising awareness about the number of people in Ireland who die from asthma.

Our success is dependent on our continued positive relationship with health care professionals and their professional bodies. In 2012, we continued to work closely with our Medical Chair, Dr Basil Elnazir and his colleagues on the Medical Board who provide us with the best possible advice and medical content for our publications and web-site. The Asthma Society of Ireland staff made 22 presentations to groups, communities and health care providers during the year and 866 health care professionals used our Asthma E-Learning programme. We were delighted to award the inaugural joint Research Fellowship with the Irish Thoracic Society to the James Connolly Memorial Hospital to support research into asthma. In April 2012, the Asthma Society of Ireland Board approved the Strategic Plan 2012-2015. Espousing the best possible standards of governance and service delivery, the Board has worked towards compliance with the new Code of Governance for Community and Voluntary organisations. We have a communications plan for 2013 and are maintaining staff developments to create a positive and energising workplace for the team.

On behalf of myself and my predecessor I would like to thank the Board for their support and the team for their hard work in 2012. I look forward to building on this in 2013 and beyond.

Summary of Our Key Achievements in 2012

- **Our Services:** In 2012, a total number of 2,879 people accessed asthma support services. We held six Asthma Clinics providing 355 people with asthma and their families with specialist nurse services. The Asthma Adviceline responded to 1,930 queries, made up of 1,643 calls and 287 emails. A further 594 people with asthma received one-on-one asthma consultations with the Asthma Society of Ireland nurses in pharmacy clinics all over the country.
- **Education & Information:** Asthma information materials were distributed at all Asthma Clinics and to callers to the Asthma Adviceline service, as well as at local and national events and shows. A number of information publications were launched in 2012 including Reach Your Peak and Asthma in Babies and Children. The Asthma Society of Ireland also released Ireland's first iPhone asthma management app, called Asthma Coach.
- **Support for Healthcare Professionals:** In 2012, there were 22 presentations to groups, communities and health care providers. In addition, 866 health care professionals were users of the Asthma Society's Asthma E-Learning programme. The Asthma Society of Ireland worked closely with the Irish Pharmacy Union and GlaxoSmithKline to deliver a Train the Trainer training programme to a group of pharmacists, who in turn delivered asthma training to pharmacists around the country.
- **Growing Public Awareness:** The Asthma Society of Ireland ran a national awareness campaign for World Asthma Day in May 2012, with a radio campaign to highlight the number of asthma deaths every year. Seasonal campaigns on hay fever, back to school and the flu vaccination were supplemented this year by awareness campaigns, on smoking, lung health and pneumococcal disease, run in partnership with a number of external organisations. Regional media agencies were targeted with press releases to highlight the six regional clinics and to raise awareness of asthma.
- **Representing People with Asthma:** Implementation of the National Asthma Programme was the Asthma Society of Ireland's advocacy priority in 2012. Several key developments, including a revision of the Asthma Control in General Practice guidelines, the completion of Asthma Check and progression of the Model of Care, advanced the programme closer to implementation. In the autumn we issued our Pre Budget Submission which was positively received by politicians and people with asthma alike.
- **Advancing Research:** Funding objective and balanced clinical and asthma-related health information research. In 2012, the Asthma Society of Ireland presented findings from our work at national events and continued to support research into asthma through its inaugural joint Research Fellowship with the Irish Thoracic Society.



- **Governance and Finances:** Good governance equips the Asthma Society of Ireland to achieve its objective and enhance its role through excellent organisational governance, management and development.

In April 2012, the Board approved the Strategic Plan 2012-2015. A revised staffing structure was put in place during the year and a fundraising plan to address the projected impact of a reduction in lottery income was largely complete by the end of 2012. The Board welcomed and embraced the new Governance Code for Community, Voluntary and Charitable Organisations and a working group was formed to enhance existing governance policies and procedures with a view to achieving full compliance with the new Code in 2013.

The Asthma Society of Ireland Services 2012

Fig. 1 Calls and Emails to Adviceline 2012

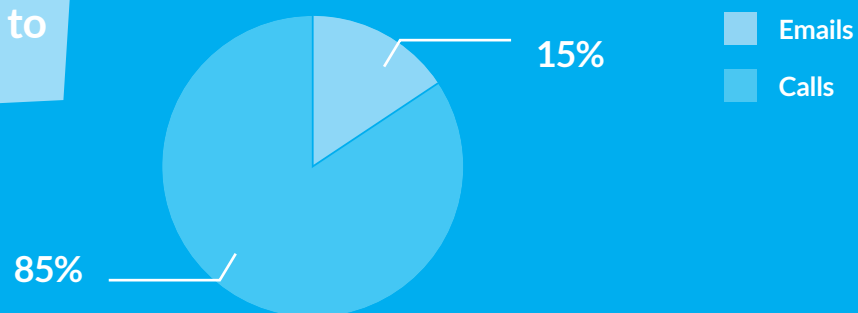


Fig. 2 Asthma Adviceline Queries 2012

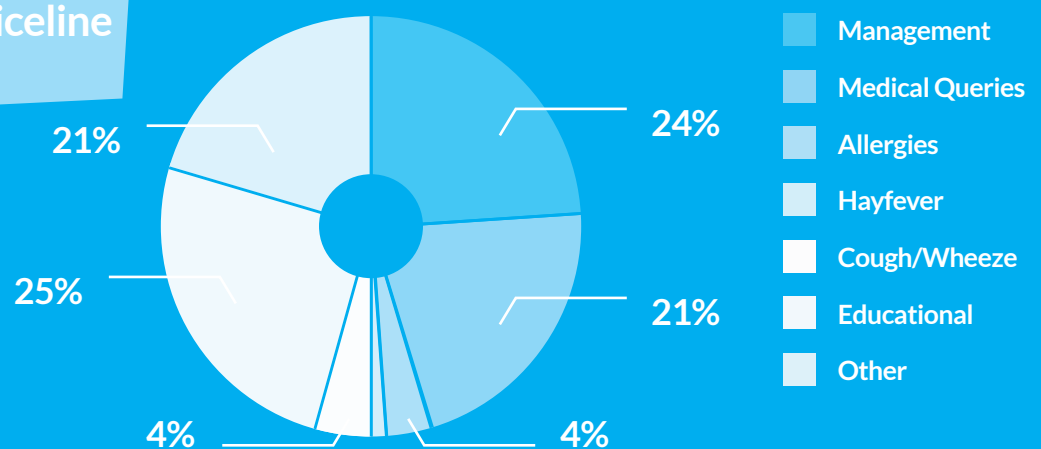


Fig. 3 Asthma Society Regional Asthma Clinics

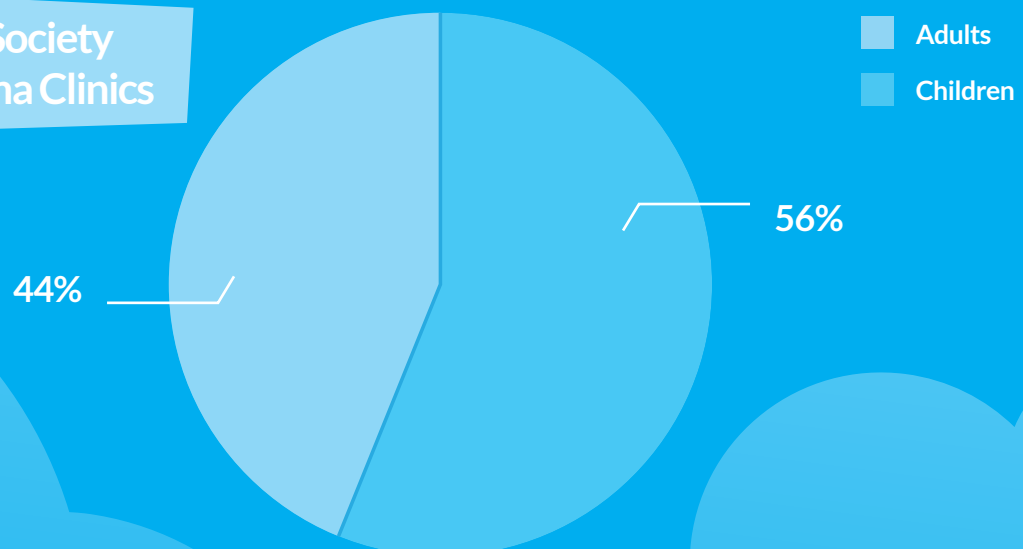
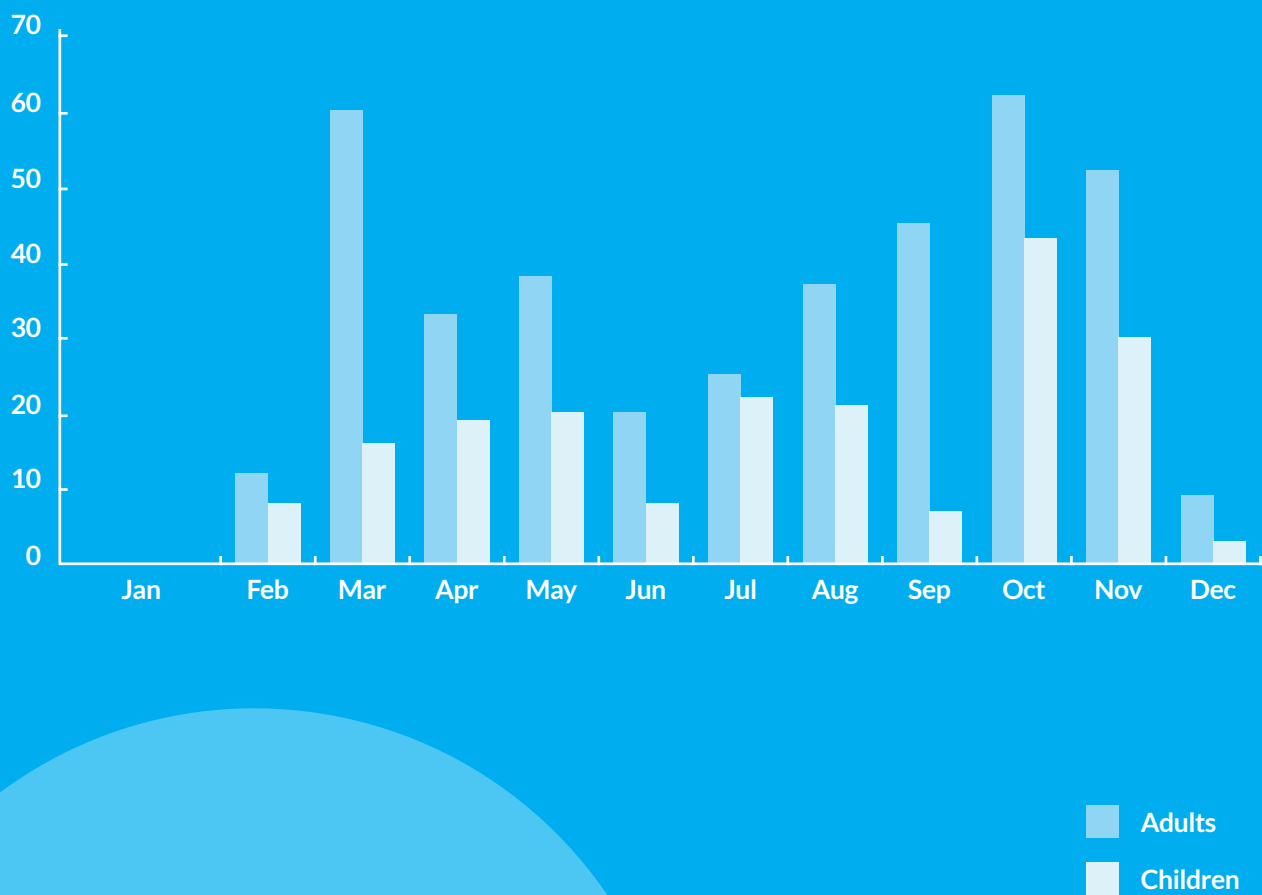


Fig. 4 Asthma Society of Ireland In-Store Pharmacy Clinics 2012



The Asthma Society of Ireland Services - Improving Lives

Our asthma support services provide expert, one-on-one advice to people throughout the country who are concerned about asthma. We have a dedicated team of Asthma Nurse Specialists who support and interact with people on our Asthma Adviceline, at our Asthma Clinics and at In-Store Asthma Clinics in pharmacies throughout Ireland. In 2012 the Asthma Society of Ireland's support services helped 2,879 people throughout Ireland.

The Asthma Adviceline

The Asthma Adviceline celebrated its 21st anniversary in 2012. Since 1991 the Asthma Adviceline has been the leading support service for anyone concerned about asthma. In 2012 our Asthma Adviceline nurses gave confidential advice and support to 1,930 people; responding to 1,643 calls and 287 emails (**Fig.1**).

Callers to the Asthma Adviceline include not only people with asthma, but also their relatives, healthcare professionals and anyone working with or caring for people with asthma, such as teachers and sports coaches. Our Asthma Nurse Specialists are available on **1850 44 54 64**, every weekday between 10am and 1pm to answer queries and give expert advice by phone and by email (**Fig.2**).

Nearly a quarter of all calls to the Asthma Adviceline were about asthma management, with more than 40% of queries coming from parents of children who have been recently diagnosed with asthma.

Frances Guiney, Director of Nursing Services leads the Asthma Adviceline's expert team of four dedicated Asthma Specialist Nurses; Mary Llewellyn, Deirdre Donaghy, Netta Williams and Maeve Kilduff.

Joan's Story

"I am the mother of two young boys with asthma, Sam and Jack. Sam's asthma has always been fairly manageable but his younger brother Jack is a different story. When Jack was just four months old his breathing became bad and it became very frightening as his breathing got worse and worse. I was aware of the Asthma Society as I had seen people fundraising for them before, and they had been recommended to me by the nurse in our local GP practice in the past. I rang the Asthma Adviceline and I am so happy I did. The Asthma Society of Ireland nurse was so knowledgeable and helpful; but most of all she reassured me and calmed me down. Seeing your child struggling to breathe is both heart-breaking and terrifying.

The Asthma Society of Ireland gave me lots of information about Jack's asthma, advising me on everything from the type of medication he is taking, to how to avoid his triggers like pollen and dust mites. I called the asthma Adviceline frequently throughout 2012 and picked up lots of useful information, like not to let Jack sleep with a teddy and that he should wear a scarf in front of his mouth in cold weather to warm up the air that goes into his lungs. It's hard to keep a scarf on him but I got him a balaclava and it has really helped. The nurse sent me on useful booklets and even gave me information to help with Sam's asthma too.

Our GP and Jack's consultant in Temple St Hospital were happy I had called and have been really supportive of the advice I've received from the Asthma Society. I always recommend the Asthma Adviceline whenever I hear of family and friends who have asthma. Jack still gets infections and his asthma continues to be a problem but it is so reassuring to know that the Asthma Society is there when I need advice or support. If it wasn't for the Asthma Adviceline I don't know how I would have coped."

Asthma Clinics

As part of our three year strategy we are committed to providing expert services in the community to people with asthma, their families and their carers. The goal of these services is to empower people with asthma by giving them the support, tools and information they need to take control of their asthma. Our asthma clinics achieve these aims by offering a one-on-one consultation with an asthma nurse specialist to review symptoms and treatments and provide information and advice. All of our clinics are open to everyone and are completely free of charge. In 2012 we continued our successful regional asthma clinics in six locations nationwide. We also worked in partnership with community pharmacists and GlaxoSmithKline Ltd. to develop a programme of in-store pharmacy clinics in communities throughout the country.



Former Minister for Primary Care Róisín Sorthall attending our Ballymun Clinic in March

Regional Asthma Clinics

The Asthma Society of Ireland's Regional Asthma Clinic programme has been up and running for three years. In 2012, we built on the success of previous clinics by visiting six new locations and giving more people than ever the opportunity to get free, expert advice (**Fig.3**).

The Regional Asthma Clinics are open to everyone in the local community and advertised in local media, in local GP surgeries, community centres and pharmacies, and to our members and contacts. The 2012 clinics were held in Dundalk, Dublin, Tralee, Castlebar, Clonmel and Newbridge, where our nurses gave 355 consultations to adults and children. The 2012 clinics proved popular with all age groups, from pensioners to families with babies.

Our team of asthma nurse specialists, paediatric nurses and respiratory scientists were on hand at each clinic to give advice on asthma and allergies. Attendees each received a twenty minute consultation which included a review of their asthma, education on symptoms, treatment and triggers, an inhaler technique review and instruction and peak flow testing. Respiratory scientists also carried out spirometry testing, checking lung function and providing a reading which could be passed on to a GP or consultant.

Overall the level of asthma control, education about triggers and understanding of medication and how to take them was found to be quite poor. Overuse of reliever medication, smoking and incorrect inhaler technique are just some of the issues that come up frequently at the clinics, demonstrating the need for community based, nurse led asthma services. In particular, there was a very low expectation of asthma control, both from adults and parents of children with asthma, meaning people are living day to day with limited breathing and poor quality of life. The Regional Asthma Clinics will continue to form a core element of our services for people with asthma for the remainder of our three year strategy and into the future.

In-Store Pharmacy Clinics

The Asthma Society of Ireland has been running in-store pharmacy clinics on a request basis for a number of years. In 2012 we developed a national programme of pharmacy clinics, expanding the service to more towns, cities and communities throughout Ireland (**Fig.4**).

Community pharmacies and asthma clinics go well together. People with asthma are used to attending their local pharmacy to get their asthma medication and pharmacists are trained to offer advice on allergy relief, trigger avoidance and inhaler technique.

We held 61 asthma clinics in pharmacies in 2012 which gave 533 adults and children with asthma the chance for a free asthma review. Each pharmacy received a pack of Asthma Society literature, information and promotional material. The clinics run from 10am to 4pm with appointments made in advance.



The Asthma Society of Ireland Services - Improving Lives

Attendees at our pharmacy clinics receive an asthma review with a specialist nurse. As with our Regional Asthma Clinics, we cover all aspects of asthma management, inhaler technique, peak flow testing and attendees are referred to their healthcare professional for a further review if necessary.

Holding asthma clinics in community pharmacies is a great way to reach more people with asthma and to educate people about good asthma management in a familiar and convenient setting. The programme is organised by Asthma Society of Ireland Patient Services Administrator, Orlaith Behan and is supported by GlaxoSmithKline. We plan to build on the success of the 2012 pharmacy clinic programme by visiting more stores in 2013.

Working with Disadvantaged Groups

In 2012 the Asthma Society of Ireland responded to a need for asthma education amongst a number of communities that experience disadvantage due to social and economic deprivation. The communities targeted included prisoners, residents of inner city housing developments and members of the Traveller community.

The Asthma Society of Ireland worked in partnership with statutory bodies and community development organisations to provide high quality asthma education and training. The programme was delivered through a train the trainer approach, in which community health care workers were provided with the training and information they needed to educate members of their community. All training and materials were provided by the Asthma Society of Ireland free of charge. The approach worked well, providing the information in an easily accessible format that was at low cost to the groups taking part.

Poverty, social exclusion, housing and health are inextricably linked. Members of disadvantaged groups and people living in poverty are more likely to suffer from chronic illnesses like asthma than people who are better off.

The primary aim of the training programme was to raise the levels of asthma control amongst a small number of targeted groups. In addition it gave us the opportunity to collaborate and share learning with a number of organisations including Pavee Point, community development groups in the Whitefriar Street, Rialto and Dolphin's Barn areas of Dublin City, and the prison services at Portlaoise Prison. The programme confirmed that members of vulnerable groups and people living in disadvantaged areas are likely to have poor asthma control and low levels of asthma awareness and education. The Asthma Society of Ireland plans to further address this need in 2013 by expanding the training to include more groups throughout the country.

'The Asthma Adviceline is very busy and the calls are interesting, challenging and rewarding. From parents of newly diagnosed children, to callers concerned about occupational asthma or going on holidays, our nursing team makes sure that everyone who calls the Asthma Adviceline receives the information, advice and support they need. Our job is to help people understand asthma and to enable them to take the steps they need to keep their asthma controlled and have a better quality of life.'

Mary Llewellyn
Asthma Adviceline Nurse



The Asthma Society of Ireland - Educating and Informing

The Asthma Society of Ireland is committed to educating people about asthma and providing them with the information they need to keep their asthma well controlled. We do this through a variety of different formats; from information booklets to educational videos available at www.asthma.ie and on YouTube. In 2012 we launched revisions of three of our core publications dealing with the important topics of exercise, allergies and childhood asthma. Whilst we continued to educate people and provide information in traditional formats in 2012 we launched a new and innovative education tool: The Asthma Coach App.

The Asthma Coach App

In November 2012, after nearly two years of development the Asthma Society of Ireland launched the first Irish asthma app, Asthma Coach. Over 282,000 Irish people do not have their asthma under control, which is 60% of the total asthma population in Ireland. We designed Asthma Coach to help tackle this worrying statistic.

Health apps are becoming increasingly popular and the market is set to grow by 25% annually over the next five years. The Asthma Society wants to help people with asthma to use mobile technology to improve the quality of their life, their health outcomes and ultimately reduce the number of people dying of asthma every year.

The development of Asthma Coach was managed by Asthma Society Communications Coordinator, Anne Kearney. Asthma Coach is available for free from the App Store for iPhones and from www.asthma.ie as a mobile website suitable for all smartphone devices. The app allows users to record and track their asthma symptoms, medication usage and peak flow to help them control their disease. Users may also share the diary and a graph of their asthma activities with their healthcare professional if they wish.



An Taoiseach Enda Kenny at the launch of the Asthma Coach app

Speaking at the launch of Asthma Coach CEO, Sharon Cosgrove, said, "Asthma is often not recognised as a serious condition. However, over 19,000 people attend A&E due to asthma each year. Adults with asthma miss an average of 12 days of work and children with asthma miss 10 days of school. Asthma is a chronic disease which has a terrible effect on the lives of so many people. It is essential for people with asthma to have an asthma management plan and to review it regularly with their healthcare professional. The Asthma Coach will let them do this easily in a way that fits into their busy lifestyle."

The free app can be used by anyone with asthma and can also be used by the parent of a child with asthma to help track their disease. Asthma symptoms and the need for medications can change over time and so the Asthma Coach allows for this to be tracked by the user or the parent. Other functions include the ability to set up helpful reminders such as when to make an appointment with the GP, when to refill a prescription, and when to do a peak flow test.

Dr Basil Elnazir, Chairperson of the Asthma Society Medical Board, said at the launch, "We hope that the app will help young people to engage in managing their own asthma. They form lifelong health habits in these years, so if they start to control their asthma now this will help them throughout their lives. We can't change whether people have asthma or not but we can help to change their outcomes through management of their condition. The app will help them to do this in partnership with their healthcare professional."

The project was enabled through an unrestricted educational grant from Pfizer Healthcare Ireland. The app also includes a pollen forecast from March-November, which is supported by Dyson.

Gordon Hayden, presenter on Spin 103.8 and TV3, launched the Asthma Coach campaign. He was diagnosed with asthma as a child and carries his inhaler with him everywhere. Speaking at the launch, he said, "I have already trialled the app and it's given me a great way to keep on top of what my asthma triggers are and what medications I'm taking. I'm always on the go and don't like to feel like my asthma is holding me back from anything. The app fits in with my life and helps me keep on top of my asthma instead of it getting on top of me."



The Asthma Society of Ireland - Educating and Informing

Asthma News

Our members' bi-annual magazine, *Asthma News*, was published and distributed to all of our members and supporters in spring and winter 2012. The articles covered in our 2012 editions included the latest news on international research into asthma as well as features on the National Asthma Programme, our new strategy and the Asthma Clinic Programme and other services. We also featured updates on our fundraisers and supporters who help make our work possible. Other articles covered our activities throughout the year and as well as our popular Q&A page where our asthma nurse answers questions about asthma. *Asthma News* is an important way for us to keep all of our members and supporters informed of our work and the latest news on asthma.

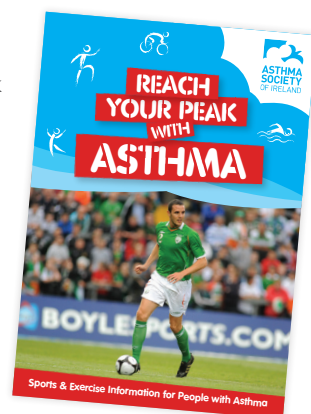
Asthma Information Booklets

The Asthma Society distributed more than 135,000 asthma information publications to people with asthma, parents, schools, sports clubs and healthcare professionals throughout Ireland. The majority of these publications were asthma information booklets, but also posters, wallet cards and management plans. 2012 saw the re-launch of three of our most popular asthma information booklets; *Reach Your Peak with Asthma*, *Asthma and Allergic Rhinitis*, and *Asthma in Babies and Children*.

Reach Your Peak with Asthma

Reach Your Peak was revised in spring 2012 and underwent a major redesign. The *Reach Your Peak with Asthma* Campaign was originally devised in 2007 to help people with asthma exercise and take part in sport. In response to demand from people with asthma, coaches and sports teachers we designed a pack which was fronted by Asthma Society Ambassador John O'Shea, covers everything you need to know to exercise safely with asthma. Increasing the amount of information and making it available in a variety of formats, makes it easier for people to access information on asthma when they're on the go.

The pack contains an information booklet with advice for people with asthma, as well as sports coaches and PE teachers, on how to exercise safely with asthma, tips for training and specific information on taking part in a variety of different sports with asthma. Also in the pack is a poster for sports clubs and schools, and a handy wallet card which can fit in a pocket or sports bag and contains training tips and emergency information on what to do if your asthma gets out of control during training. The *Reach Your Peak* packs were launched in May 2012 and delivered to sports clubs and summer camps throughout Ireland and made available at competitive events such as the Swim Ireland's summer swim meet



Asthma and Allergic Rhinitis



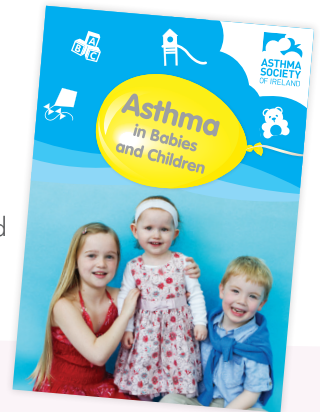
To help prepare people for the 2012 hay fever season we launched a revised and rebranded version of our *Asthma and Allergic Rhinitis* booklet. The booklet details the close relationship between asthma and allergies to airborne particles such as pollen, dust mites and chemicals. Many people with asthma also have allergies, with between 60% and 80% suffering from hay fever as well as asthma.

Coming in contact with something that causes an allergic reaction can trigger asthma symptoms and even lead to an asthma attack. For this reason, providing advice on how to manage and treat allergies is a key step in controlling asthma and a priority for The Asthma Society of Ireland. The *Asthma and Allergic Rhinitis* booklet gives asthma and allergy sufferers useful information, such as how to cope at exam time or while on holidays and includes a pollen calendar to monitor the changes in pollen levels for people with hay fever.

Asthma in Babies and Children

Our second most popular publication, *Asthma in Babies and Children*, was re-launched in time for the new school term in September 2012. This publication has all the information that parents need to manage their child's asthma. *Asthma in Babies and Children* can be used as a guide for the parents of newly diagnosed children or babies and as an asthma management resource for parents as their child grows.

Asthma in Babies and Children is a comprehensive guide detailing everything about the causes, triggers and treatments of asthma. It provides parents with an easy to read guide on how to care for their child's asthma and what to do if their child has an asthma attack.



"2012 was a very busy year for the Asthma Society, which saw the expansion of many of our services and the development of new education projects. The Asthma Society of Ireland Medical Board is a team of dedicated medical experts who support the Society by advising on medical information, research and assisting with campaigns. This year, amongst many projects, my colleagues on the Asthma Society of Ireland Medical Board and I were delighted to be involved in the development of the Asthma Coach App. The use of smartphone technology is becoming more and more popular in managing health and Asthma Coach demonstrates how an innovative but user friendly tool can make all the difference in enabling patients to control their asthma. The fact that Asthma Coach is the only Irish asthma app, and amongst few of its kind in the world demonstrates that the Asthma Society of Ireland is a pioneer in educating and empowering asthma sufferers. 2012 also saw the introduction of a new research bursary which was a joint project with the Irish Thoracic Society. Asthma Society of Ireland's continuing support for research projects which strive for better understanding of the epidemiology and pathophysiology of asthma in Ireland demonstrates our commitment to finding new ways to treat asthma and improve the lives of asthma sufferers. My Medical Board colleagues and I were delighted to be involved in such a successful year for the Asthma Society of Ireland and we look forward to continuing to support and work with the Asthma Society of Ireland team into 2013."

Dr Basil Elnazir
Medical Board Chairperson
The Asthma Society of Ireland



The Asthma Society of Ireland - Supporting Healthcare Professionals

Ensuring people with asthma receive the best possible care is fundamental to achieving our mission. We are committed to supporting doctors, nurses and pharmacists so that they can deliver quality care that is based on international guidelines on best practice in treating asthma.

The greatest part of this work in 2012 has been the Asthma Society of Ireland's continued participation in the National Asthma Programme to ensure that people with asthma remain at the centre of the programme and that their needs will be paramount at every stage.

In 2012 we continued to work closely with health practitioners and the HSE. The Asthma Society of Ireland worked closely with the Irish College of General Practitioners to update the guideline publication Asthma Control in General Practice which were originally developed in 2009. The Asthma Management E-Learning Programme, which was developed in 2011 as part of the HSE National Asthma Programme was further developed and participation in the Programme by healthcare professionals began in earnest. 2012 also saw the development and implementation of an asthma train the trainer programme for pharmacists.

Asthma Guidelines for General Practice

Asthma Control in General Practice, National Asthma Management Guidelines was originally developed by The Asthma Society of Ireland in partnership with the Irish College of General Practitioners (ICGP) and distributed as part of our Asthma Demonstration Programme in 2009. The document was adapted for Ireland from international best practice guidelines on how to treat asthma in a primary care setting. The purpose of Asthma Control in General Practice is to provide a resource guide for general practitioners which instructs on the best way to diagnose and treat asthma and provides a consistency of care for asthma patients in primary care throughout Ireland. In 2012 we worked with the ICGP again and the NAP working group to update the publication in line with new research and developments in international best practice. Asthma Control in General Practice provides the foundation for the Asthma Management E-Learning Programme and is at the core of the primary care component of the HSE National Asthma Programme.



Asthma Society of Ireland Medical Board member Professor Stephen Lane presenting at the EFA AGM in May.

Asthma Management E-Learning Programme

In 2012 we updated the Asthma Management E-Learning Programme to bring it up to date with national and international best practice. The E-Learning Programme is made up of web based education modules and forms the recommended educational standard for general practitioners, nurses and pharmacists treating people with asthma. The Programme has been accredited by GP, nursing and pharmacy bodies and has been adopted as the educational requirement for the HSE National Asthma Programme.

E-learning accounts and activity:

The Asthma Society of Ireland will continue to manage the E-Learning Programme and support healthcare professional participants as part of its major contribution to the HSE National Asthma Programme. The next revision of the E-Learning Programme will take place in 2015.

Three hundred and sixty five healthcare professionals completed the E Learning Programme in 2012. Doctors, nurses and pharmacists from all over Ireland signed up to complete the training and there were eight hundred and sixty six users registered with the online programme.

Pharmacy Training Programme

In 2012 we joined with the Irish Pharmacy Union (IPU) to develop and implement an asthma training programme for community pharmacists. The programme was supported by GlaxoSmithKline and its aim was to train pharmacists in giving asthma consultations to their customers. Research shows that community pharmacists can make a real difference in helping people control their asthma. Something as simple as demonstrating correct inhaler technique to people with asthma when they purchase their medication can make a noticeable improvement in asthma control.

A group of eight community pharmacists tutors were selected by the IPU and trained as part of the programme. The tutors were trained by The Asthma Society of Ireland Director of Nursing Services, Frances Guiney, in instructing on the correct use of asthma devices, how to use tools for assessing and monitoring asthma control and the fundamentals of an asthma management plan. During autumn 2012 pharmacists were invited to attend one of eighteen evening workshops where tutors delivered comprehensive training on asthma and consulting with people with asthma. The workshops were very popular with 281 community pharmacists attending overall. The Asthma Society of Ireland will build on this success in 2013 by offering the training to more community pharmacists, ensuring more people with asthma can benefit from the highest quality advice in their local community.



Louis Coyne (ASI), Olympic Swimmer & Asthma Society Ambassador Barry Murphy, and Robert Mooney (Swim Ireland) at a Swim Ireland competition in August.

The Asthma Society of Ireland - Growing Public Awareness



Dr Jean Holohan and Anne Robinson at the launch of the World Asthma Day Campaign

Raising awareness about asthma, its causes, effects and treatment has always been at the core of what we do and continues to be one of our key strategic priorities. Our World Asthma Day campaign struck a serious tone in 2012, as we highlighted the unacceptable number of asthma deaths in Ireland. Along with our traditional campaigns such as our Hayfever and our Back to School campaigns, the Asthma Society of Ireland also joined forces with a number of organisations to raise awareness about a number of other issues relating to asthma throughout the year. We continued to raise awareness about asthma online and launched an online pollen tracker to complement the Asthma Coach App and gave hay fever sufferers a useful tool to help manage their symptoms.

World Asthma Day 2012 - Asthma Still Claiming One Life a Week in Ireland

The Asthma Society of Ireland marked 2012 World Asthma Day on May 1st with a campaign to highlight the on-going tragedy of deaths from asthma in Ireland and launched our new asthma emergency information pack. Our message was simple and striking: 50 asthma related deaths a year is too high. These deaths are tragic, affecting families, friends and entire communities. The new Asthma Attack Card was made available free of charge to patients, healthcare professionals, schools and sporting organisations online and by post.

Reducing the number of asthma deaths and improving asthma control is the driving force behind the work of the Asthma Society. Through the 2012 World Asthma Day Campaign we wanted to ensure that everyone in the country knows the five key steps outlined in the Asthma Attack Card to follow in case of an asthma attack. We also aimed to raise awareness about the 400 people who attend the Emergency Department every week because of an asthma attack.

The impact of the World Asthma Day Campaign was heightened by the support and involvement of a number of families who had lost loved ones to asthma. Anne Robinson, who lost her eldest son Alex 25 years ago to asthma, joined with Graham Rothwell who lost his brother Michael and Geraldine Smith, whose daughter Trisha was just 14 when she died from an asthma attack, to draw attention to the unacceptable number of deaths from asthma in Ireland each year and to raise awareness of what to do in an asthma attack so that no more families have to suffer the loss of a loved one.

Many people are unaware that asthma can be fatal, so this was an important message for people living with the disease. Media articles and interviews were complimented by a national radio advertising campaign, which was supported by AstraZeneca. The World Asthma Day Campaign prompted thousands of people across Ireland to get in touch with the Asthma Society of Ireland to seek advice and get information on controlling their asthma. Calls to the Asthma Adviceline rose by 60% during the Campaign and website visitors rose by a massive 250% highlighting the difference our awareness campaigns can make.

Asthma Awareness Campaigns

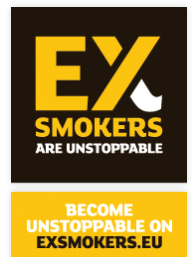
Breathing New Life into Lung Health

In June we joined with Olympic champion Dr Ronnie Delaney and ten other leading Irish lung health charities to urge the public to take a simple, fast and accurate test to measure their lung health.

The 'Love your Lungs' campaign aimed to encourage people to get their lungs tested, particularly if they have symptoms such as shortness of breath, persistent cough or wheeze. Testing can provide an early indication of diseases such as asthma, lung fibrosis, and chronic obstructive pulmonary disease (COPD). Early detection of these diseases can greatly improve outcomes and quality of life for patients. As part of the campaign the Asthma Society of Ireland teamed with the Irish Thoracic Society to offer free spirometry lung tests for World Spirometry Day on 27th of June and at the Over 50s Show in the RDS in Dublin in October.

Ex Smokers are Unstoppable

Cigarette smoke is a major trigger of asthma symptoms and the Asthma Society of Ireland is committed to helping people with asthma avoid smoking and smoky environments. In 2012 we partnered with the three year EU-wide campaign "Ex-Smokers are Unstoppable", which aims to shift the focus from the dangers of smoking to the positive benefits of quitting, highlighting the inspirational achievements of ex-smokers. The campaign is aimed at the 28 million EU smokers in the 18+ age range and is powered by a digital health platform which offers practical tips and advice to help you in your quitting journey. 221,804 European citizens have registered meaning that one in every thousand smokers across Europe is actively seeking support to quit via this dedicated interactive tool. Visit www.exsmokers.eu for more information.



Seven Reasons You Should Know Pneumo



People with asthma are in a high risk group for contracting pneumococcal disease so this year we partnered with a number of other health advocacy groups to raise awareness about the risks and encourage people with asthma to get vaccinated. RTE Presenter Ronan Collins fronted the Campaign to highlight the fact that the disease causes approximately 200 deaths each year – even though a preventative vaccine is available from doctors. 'Seven Reasons You Should Know Pneumo – The Real Faces of Pneumo' campaign was launched in September in partnership with Age Action Ireland, the Irish Patients' Association, Diabetes Ireland and Sanofi Pasteur MSD.

The Asthma Society of Ireland Pollen Forecast

As part of the Asthma Coach App, the Asthma Society of Ireland developed a Pollen Forecast to help people with asthma who are allergic to pollen and spores track the pollen levels in their region. The Pollen Forecast was made available through Asthma Coach and also on www.asthma.ie. The Forecast was sponsored by Dyson and made available in the peak hay fever months from April to November. During these months the Pollen Forecast helped people with allergies in all four provinces track the pollen levels in their area. The Forecast listed the pollen levels ranging from low to moderate, high or very high. The Asthma Society of Ireland also provided regular updates through social media to alert followers to peak pollen times and offer tips on how to manage hay fever and allergies.



The Asthma Society of Ireland - Representing People with Asthma



The Asthma Society of Ireland is committed to advancing changes in policy relating to asthma and asthma care to benefit Ireland's 470,000 people with asthma. In 2012 we continued to represent people with asthma on the HSE National Asthma Programme Working Group. This group is tasked with developing and implementing the HSE National Asthma Programme and it is vital that people with asthma have their say in how these services will be delivered. In autumn 2012 we issued a submission in advance of Budget 2013. This was the first pre-budget submission from the Asthma Society of Ireland and signals the beginning of a new strategic advocacy programme.

National Asthma Programme

The HSE National Asthma Programme (NAP) was launched in 2011. Modelled on a pilot programme called The Asthma Demonstration Programme, which was developed, funded and implemented by the Asthma Society of Ireland in 2009; NAP aims to improve asthma care in Ireland.

The objectives of NAP are to:

- Ensure asthma treatment in primary and secondary care is provided according to a standard best practice guideline.
- Maximise the number of people whose asthma is controlled.
- Reduce asthma deaths by 90% over ten years.
- Ensure all patients diagnosed with asthma are enrolled over four years.
- Reduce GP out of hour visits due to asthma by 10% over three years.
- Reduce Emergency Department visits due to asthma by 10% over three years.
- Reduce the number of days spent in hospital by people with asthma by 10% per year over three years.

The aims of NAP may seem ambitious; however the results of a similar Programme in Finland and the Asthma Society's Demonstration Programme, as well as a wealth of international research, suggests that the health benefits of structured, guideline based asthma treatment in primary care are immense, both to people with asthma and to an overburdened hospital system.

Throughout 2012, the Asthma Society contributed resources and expertise to the planning and development of the Programme. In addition to designing and managing the Asthma E-Learning programme, the Asthma Society was an active member and the patient representative on the NAP working group, which is tasked with the design and implementation of all aspects of the Programme. Much of the work of the NAP working group in 2012 went into developing key policy and implementation plans, which include:

- **The Emergency Asthma Guideline** - An Adult and Paediatric version of this guideline was developed in January 2012 to assist healthcare professionals in treating acute asthma episodes.
- **Asthma Control in General Practice (2nd Edition)** – These guidelines were originally adapted, from the GINA Global Strategy for Asthma Management and Prevention, by the Asthma Society and the Irish College of General Practitioners in 2008. The NAP working group completed a revision of this document in 2012. The purpose of the guidelines is to assist healthcare professionals in diagnosing and treating asthma, and provide a standardised level of care for all asthma patients when visiting their GP. The national implementation of the guidelines will be a key deliverable of NAP in 2013.
- **Asthma Check** – Asthma Check is the chronic disease watch document developed by the National Asthma Programme in 2012 to support healthcare professionals to deliver guideline based asthma management. It is designed to ensure that all patients understand their disease, have a written asthma management plan and are prescribed the appropriate therapy to control their symptoms. Asthma Check outlines the step-by-step process for implementing guideline based asthma management in primary care.
- **Model of Care for the National Asthma Programme** – This document has been progressed and was in draft form at the end of 2012. It follows international best practice on delivering care to asthma patients and provides an integrated service approach. It covers the full spectrum of care provided in hospitals and in the community. It details how physicians, nurses, and other health care professionals will work with engaged patients to make the clinical decisions most appropriate to their circumstances and to collaborate with specialist colleagues in providing a safe, seamless experience through their journey within the health system in Ireland.

NAP implementation on a phased basis would be the single most important state health intervention that could be made for asthma sufferers. A child or adult with poorly controlled mild to moderate asthma is as likely to die from an asthma attack as someone with severe asthma. For this reason it is imperative that all people with asthma are included in NAP. The Asthma Society of Ireland will continue to actively represent people with asthma on the NAP working group and will keep advocating for the implementation of the Programme throughout 2013.

“The Asthma Society of Ireland’s role in helping to develop and implement the HSE National Asthma Programme (NAP) has been one of our most important achievements to date. Once implemented, NAP will be one of the most significant public health initiatives for people with asthma in Ireland. The work that the Asthma Society has undertaken in training doctors, nurses and pharmacists in 2012 is a testament to our commitment to working in partnership with healthcare professionals and the HSE to improve asthma care in Ireland. The Asthma Society of Ireland has been a driving force in ensuring that Ireland has patient centred, evidence based public policy on asthma and we will continue to strive to keep asthma high on the national agenda into 2013 and beyond.”



Dr Basil Elnazir
Medical Board Chairperson
Asthma Society of Ireland

The Asthma Society’s 2013 Pre-Budget Submission

In November, the Asthma Society launched its 2013 Pre Budget Submission, calling for the Government to immediately implement the HSE National Asthma Programme and for equity of access to treatment for all asthma patients.

As part of our on-going advocacy campaign to ensure that all patients in Ireland receive the best possible care, we submitted our recommendations to the Government outlining five priority actions which, if undertaken, would lead to better outcomes for people with asthma and result in cost savings for the State.

- 1. Include all people with asthma in the HSE National Asthma Programme on a phased basis:** People with the most severe asthma should be targeted first, with the inclusion of all people with asthma in the Programme over a four year period.
- 2. Provide an annual asthma review for all people with asthma:** Research demonstrates the benefit of a structured annual asthma review in improving people’s asthma and decreasing State spending. The Asthma Society recommends that each asthma sufferer should receive an annual review of their asthma which would include asthma education, peak flow testing and an inhaler technique review.
- 3. Promote the prescribing of minimum medication dosage:** International guidelines recommend that asthma is treated by stepping up medication during exacerbations and stepping it down when symptoms have eased. The Asthma Society advocates for minimum medication dosages to be prescribed for all patients, in accordance with best practice guidelines, to prevent the detrimental effects that incorrect prescribing causes to people with asthma’s health.
- 4. Implement acute protocols for primary and secondary care:** Acute protocols for primary and secondary care would ensure that all asthma exacerbations, whether mild or severe, are treated in accordance with recognised guidelines and would guarantee a continuity of care throughout the health system.
- 5. Ensure equitable access to medication for all:** Equitable access to medication and treatment for all is the key to ensuring that patients receive the best quality of care. The Asthma Society 2013 Pre Budget Submission made specific recommendations in relation to Xolair (Omalizumab).

The Asthma Society of Ireland - Representing People with Asthma

Developed by Asthma Society Advocacy and Information Coordinator, Niamh Kelly, the submission was the culmination of the Asthma Society's response to the needs of asthma patients, the recommendations of its medical committee, the findings of qualitative and quantitative research and its experience as a member of the steering committee of the National Asthma Programme. In addition, the recommendations made in the Asthma Society submission are in line with internationally recognised best practice guidelines on the treatment of asthma.

Speaking at the launch of the Submission in November 2012, CEO Sharon Cosgrove commented "The submission we are launching today demonstrates how the current model of asthma care in Ireland is over reliant on treating patients in acute secondary care, when their symptoms have reached crisis. Treating asthma in secondary care is unsustainable as it is disproportionately more expensive than treating the condition in primary care. The implementation of the National Asthma Programme is a core objective in our current Strategic Plan. We urge the Government to follow our recommendations, act now and reduce the number of deaths caused by this treatable condition."

Building International Relationships

In 2012 we continued to work with our European colleagues and further cement our relationship with a number of European health networks, such as the European Respiratory Society and the International Primary Care Research Group. The Asthma Society of Ireland has been a long standing member of the European Federation of Allergies and Airways Diseases Patients Associations (EFA). In 2011 Asthma Society Board Member, Breda Flood was elected EFA President and in May 2012 Dublin was chosen as the city to host the 2012 EFA AGM. Delegates from patient organisations across Europe arrived in Dublin for the event and the Asthma Society of Ireland hosted an information session on asthma and exercise. Asthma Society Medical Board member, Prof Stephen Lane gave a presentation on asthma and exercise and launched the Asthma Society of Ireland's Reach Your Peak with Asthma publication. Active involvement international networks and engagement with our European counterparts is an important way for the Asthma Society of Ireland to keep up to date on the latest developments in asthma care, to monitor EU policy relating to asthma and to share learning.

'Throughout 2012 the Asthma Society of Ireland has worked closely with the HSE as part of the National Asthma Programme (NAP) Working Group. The work of NAP is to improve the quality of life for people with asthma and this has advanced considerably in 2012; with the revision of Asthma Control in General Practice National Asthma Management Guidelines, the finalisation of key implementation plans and the growth in the number of healthcare professionals taking part in and completing the E-Learning Programme and the practical asthma training being delivered by asthma nurse specialists in nurse training centres, particularly for primary care practice nurses. The participation of the Asthma Society of Ireland in the development of health services for patients with asthma is greatly valued by the HSE and vital to the success of this health initiative. The Asthma Society has provided the voice of the asthma sufferer, especially in highlighting the potential barriers to implementation of the care for people with asthma on a national level. I look forward to working closely with the Asthma Society in the coming year on the next phase towards further implementation of the Programme.'

Dr Pat Manning
Programme Lead
HSE National Asthma Programme



The Asthma Society of Ireland - Advancing Research

Supporting research into the causes, treatment and management of asthma has been a key pillar of The Asthma Society of Ireland's mission and strategic objectives for many years. The Asthma Society of Ireland continued to support research in 2012 with the development of a new research bursary. The Asthma Society of Ireland was also asked to present at the world conference of the International Primary Care Research Group and the Irish Thoracic Society Meeting.

Asthma Society of Ireland & Irish Thoracic Society Joint Research Bursary

This year The Asthma Society of Ireland joined with the Irish Thoracic Society to fund a research bursary. A call for submissions for the inaugural Asthma Society of Ireland/Irish Thoracic Society Joint Research Bursary was issued in early autumn. A number of high quality submissions were received, with the successful entrant receiving €10,000 towards funding their research proposal. In December 2012 the bursary was awarded to a research team led by Dr John Faul and Mr. Conor Kerley of Connolly Hospital Blanchardstown, Dublin. The Connolly Hospital team's research project investigates the importance of Vitamin D deficiency in asthma.

Presenting the award, Sharon Cosgrove, CEO of the Asthma Society of Ireland, said: "Research into the causes and treatment of asthma is key to improving the quality of care that can be delivered to the estimated 470,000 people in Ireland with the disease. The Asthma Society of Ireland is delighted to be embarking on this award programme, in conjunction with the Irish Thoracic Society, in support of Asthma research in Ireland."



Dr Ed McKone (ITS), Conor Kerley, Sharon Cosgrove (ASI) and Dr John Faul at the awarding of the inaugural Asthma Society of Ireland and Irish Thoracic Society Joint Research Bursary

Dr Edward McKone, President of the Irish Thoracic Society, commended the successful research proposal: "Asthma is a major public health issue in Ireland and the Irish Thoracic Society, in conjunction with the Asthma Society of Ireland, are delighted to award this bursary to the team from Connolly Hospital to help with their study of the effects of vitamin D levels in patients with asthma. It promises to produce valuable new information about a potential novel therapeutic approach that has the potential to impact directly on the management of Irish asthma patients."

Research Presentations

The Asthma Society of Ireland was honoured to be involved in the 6th International Primary Care Research Group (IPCRG) World Conference. The conference took place in Edinburgh in October 2012 and was attended by Louis Coyne, Research and Education Coordinator and Frances Guiney, Director of Nursing Services. The Asthma Society of Ireland had two oral presentations accepted to the 'Research Ideas' section of the conference which were titled *Development of an Asthma Electronic Patient Record to validate a Minimum Dataset of Asthma* and *Specialised Questionnaires Aid Asthma Review Consultations in Primary Care*. Both presentations were well received, with interesting feedback and recommendations coming from the audience discussion which followed. In addition to the oral presentations the Asthma Society of Ireland also had two poster presentations accepted at the conference titled *Evaluation of Guideline Structured Asthma Management in Primary Care; A Nursing Perspective* and *Asthma in Competitive Adolescent Swimmers in Ireland* and was invited to chair a third session on COPD.

In November the Asthma Society of Ireland was also asked to present two posters at the Irish Thoracic Society Annual Scientific Meeting titled *Development of an Asthma Electronic Patient Record to validate a Minimum Dataset of Asthma* and *Evaluation of Guideline Structured Asthma Management in Primary Care; A Nursing Perspective*. Participation in events like the IPCRG World Conference and ITS Scientific Meeting offer the Asthma Society of Ireland an invaluable opportunity to share learning and discuss new research, whilst also demonstrating the high esteem in which the Society is held amongst the scientific and research communities.

The Asthma Society of Ireland - Advancing Research

The Asthma Society of Ireland's Órán Ó Muiré Research Bursary Update

The Órán Ó Muiré Research Bursary recognises the role that nurses play in the treatment of asthma. In 2010 and 2011 the Bursary was awarded to Nurse Mary Hughes for her research study *Accommodating Interruptions: A Grounded Theory of Adolescent Asthma*.

"I have been delighted to offer my professional assistance at several Asthma Society clinics held in pharmacies, a primary school and at The Asthma Society of Ireland's Regional Asthma Clinics in Kerry and Tipperary. These days have been beneficial from a practice perspective and also in allowing me the opportunity to meet with more adolescents to discuss their issues regarding asthma management. It has confirmed for me that my theory is robust and applicable to more than the participant cohort I interviewed last year. This is exciting from a dissemination of findings perspective and I anticipate that I will publish my theory following my successful defence of the Viva Voce next autumn.

My plan for the remainder of the final year of my study is to continue to redraft the theory and complete the thesis in August; I am currently writing the review of literature and methodology chapters of the thesis. I envisage that I will submit my completed thesis in August/September and defend the viva before the end of 2013. I would once again like to take this opportunity to thank the Asthma Society of Ireland for the awarding of the bursary for the past two years. Without your assistance I would have been unable to attend the Grounded Theory institute Seminars where I discussed my work with Dr Glaser and other fellows of the Institute. This has been invaluable in ensuring that my progression was on the appropriate track."



Nurse Mary Hughes at the 2011 Órán Ó Muiré Bursary

Governance and Finances

Good governance and financial management underpins all the work that the Asthma Society of Ireland does. The Asthma Society of Ireland underwent a lot of change in 2012 with the development of a new strategic plan, a new fundraising plan and an organisational restructuring. Like good governance, fundraising is fundamental in allowing us to provide the services we offer and to work on behalf of people with asthma. A number of community initiatives organised by dedicated volunteers, corporate donations and a range of other fundraising initiatives allowed us to have one of our most successful years ever, in 2012.

Governance, Management and Development

Towards the end of 2011 the Board of the Asthma Society of Ireland began the process of developing a new strategic plan for the period 2012-2015. In April 2012 the Strategic Plan was approved and during the course of the year the three year operational plan, high level key performance indicators and the fundraising plan was completed.

Asthma Society of Ireland Strategy 2012 - 2015

To influence the achievement of optimal asthma care through increased public understanding; constant improvement in asthma care policy and practices; and best practice in service delivery at every level, measured against clear benchmarks and positive outcomes for people with asthma.

The five key strategic objectives set out in the plan are:



Objective 1: Raising and sustaining public, people with asthma and professional awareness of asthma and its consequences

Objective 2: Providing services, support and training to people with asthma, their families, medical professionals and others engaged in achieving best possible care

Objective 3: Advocating for progressive development in policy and practice in asthma care

Objective 4: Supporting and developing research into asthma

Objective 5: Equipping the company to achieve its objective and enhance its role through excellent organisational governance, management and development

Activities and Progress in Governance and Management

The Board is committed to working towards full compliance with the Code of Governance for Community, Voluntary and Charitable Organisations. A working group was formed in 2012 to further improve the governance policies and practices. A communications plan was developed and a number of human resource (HR) activities took place including the development of staff handbook and a revised staffing structure was approved by the Board. To address the projected impact of the reduction in lottery income, a fundraising plan was largely completed by the end of 2012.

Governance and Finances

Medical Board

Dr Basil Elnazir (Chairperson)

Dr Phil Jennings

Dr David Lyons

Ms Frances Guiney

Ms Rhonda Forsythe

Ms Cicely Roche

Dr Peter Greally

Dr Eamonn Shanahan

Dr John Faul

Paediatric Committee

Dr Basil Elnazir (Chairperson)

Dr Jim Keely

Dr Dubhfeasa Slattery

Dr Peter Greally

Dr Muireann Ní Chroinin

Dr Barry Linnane

Ms Mary Hughes

Ms Mary McDonald

Dr David Mullane

Primary Care Committee

Dr Eamonn Shanahan (Chairperson)

Dr Jim Keely

Dr Jarlath Healy

Dr Dermot Nolan

Ms Ruth Morrow

Ms Patricia McLaughlin

Research & Scientific Committee

John Faul (Chairperson)

Aidan O'Brien

Stephen Lane

Pat Goodman

Terry O'Connor

Gerayln Hynes

Elizabeth Fahey



Audit, Risk and Finance Committee 2012

This committee met four times throughout the year, considering and approving the annual accounts for 2011, the quarterly management accounts, the budget for 2012, developing the risk register and overseeing the tender process for appointment of auditor. The committee members were Maeliosa O'hOgartaigh (Chairperson), Bob Gee and Michael Tyndall. The work of the committee was resourced by the Treasurer, Brendan Fanning and the Accounts Administrator, Marge Fitzsimons.

Changes in the Asthma Society's Team in 2012

There were a number of staff changes in 2012 with two valued permanent members of staff moving on. Dr Jean Holohan left the Asthma Society of Ireland CEO position in July 2012 following an eight year period at the helm. Dr. Holohan moved to London for family reasons. Having instigated the Asthma Society's Demonstration Project and laid the foundations for the development of the National Asthma Programme (NAP) in partnership with healthcare professionals, she continued to work as the Asthma Society of Ireland representative in the NAP until the end of 2012, ensuring continuity of involvement during this critical phase of the programme's development. We owe her a huge debt of gratitude for her pioneering work for the Asthma Society of Ireland during her period as CEO.

Louis Coyne was the Research and Education Co-ordinator for over three years and he finished up in December 2012 moving to Galway with his family and back to his home town. His work had largely involved the Demonstration Project and the development of the E-Learning Programme.

Asthma Society of Ireland Staff December 2012

Orlaith Behan	Patient Services Administrator
Frank Black	Communications Assistant
Sharon Cosgrove	CEO
Louis Coyne	Research & Education Coordinator
Deirdre Donaghy Adviceline	Nurse
Ann Eccles	Receptionist
Marge Fitzsimons	Accounts Assistant
Louise Halton	Receptionist
Mary Llewellyn	Adviceline Nurse
Anne Kearney	Communications Coordinator
Niamh Kelly	Advocacy & Information Coordinator
Maeve Kilduff	Adviceline Nurse
David Minogue	Receptionist
Netta Williams	Adviceline Nurse

Governance and Finances

Fundraising

Asthma Society of Ireland Charitable Lottery

The Asthma Society of Ireland raises a significant proportion of its funds through the sale of licensed lottery tickets. We are grateful to the sellers who work on our behalf and to the general public for their continued support of this vital income stream.

Donations in Memorial

We received several donations in memorial in 2012 including the following:

A donation was made by Louise and Nick Statham on behalf of the Musgrave Family in memory of Priscilla Statham. This enabled the Society to purchase:

- VOIP Phone System to improve access to the Adviceline and reduce reception costs
- Air Conditioning for Nurses office – to improve health and safety in a poorly ventilated room
- iPad tablets for the collection of data at our regional asthma clinics and awareness days
- Projection equipment for use for staff training and meetings

A donation of €1,125 was made in memory of Amenah Fitzpatrick, Tramore, Co Waterford which helped fund the development of the Asthma Coach App.

Bequests €144,098

Bequests are an important source of funding for the Asthma Society. In 2012 we received three very generous bequests:

Anonymous €114,722 – July 2012

Finbarr McCarthy, Glanmire, Co Cork, €24,375 – Oct 2012

Mary Darcy, Greystones, Co Wicklow, €5,000 – Aug 2012

We are very grateful to everyone who generously bequeathed money to fund our work. If you would like more information about leaving a bequest to the Asthma Society visit www.asthma.ie



Liam O'Sullivan at the top of Mt Kilimanjaro

Sponsored Events



Great Open Airways Run Campaign

Ireland and Sunderland soccer star, John O'Shea helped us launch the Great Open Airways Run campaign which encouraged people all over Ireland to run, jog or walk for the Asthma Society. The campaign ran throughout 2012 with participants taking part in running and walking events all over Ireland to raise funds for the Asthma Society of Ireland. Fundraisers took part in major national events, such as the Flora Women's Mini Marathon and the Dublin City Marathon, as well as smaller local races.

Kilimanjaro Climb

On 25th January 2012 Liam O'Sullivan from Co. Kerry made a successful bid to climb Mount Kilimanjaro in aid of the Asthma Society of Ireland. Liam's determination and hard work meant he not only achieved an amazing personal goal and also raised more than €3,800 for the Asthma Society of Ireland.

Annual Bunclody GPA Clay Pigeon Shoot

This is an annual event held to raise funds for the Asthma Society of Ireland and which took place in August 2012. The event is held in memory of Bunclody District GPA member, Kieran O'Connor who died from an asthma attack in 2007.

Strawberry Half Marathon - Enniscorthy

The Asthma Society of Ireland was the nominated charity of the annual Strawberry Half Marathon held in Enniscorthy 24th June 2012. The Strawberry Half Marathon's nomination of the Asthma Society as chosen charity for this year's race honoured the memory of Enniscorthy man, Alex Robinson, who tragically died of an asthma attack 25 years ago. Alex's mother, Anne Robinson, and the extended Robinson family have campaigned tirelessly both locally and nationally to raise funds to support the vital work of the Asthma Society and prevent similar tragedies happening to other families. The sun came out for the race and those taking part helped raise over €2,850 for the Asthma Society of Ireland.



Thank You

We would like to thank all of our fundraisers in 2012. In particular we would like to extend our gratitude to Athy Youth Club, Stella Maris Secondary School in Tramore, Colaiste Iosaef in Kilmallock, Anne Robinson and Pamela Toland's Hair Salon in Donegal.

Without your support we would not be able to help people with asthma. If you would like information on how to support the Asthma Society visit www.asthma.ie

Corporate Partners & Funders

The Asthma Society of Ireland would like to thank all of our Corporate Partners who have supported our work in 2012.



Asthma Society of Ireland

(A Company Limited by Guarantee and not having a Share Capital)

Directors' Report And Financial Statements For The Year Ended 31 December 2012

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Reference and administrative details of the company and advisers for the year ended 31 December 2012

Directors

Angela Edghill, (Chairperson)
Lynn Carberry
Oliver Carroll (appointed 23 April 2012)
Dr. Basil Elnazir
Breda Flood
Bob Gee
Jean Higgins
Louise Maher
Maeliosa OhOgartaigh (appointed 26 March 2012)
Anne Robinson
Michael Tyndall (appointed 23 April 2012)

Company Registered Number

57125

Charity Registered Number

CHY 6100

Registered Office

4th Floor
42 - 43 Amiens Street
Dublin 1

Company Secretary

Dr Jean Holohan (resigned 3 December 2012)
Michael Tyndall (appointed 3 December 2012)

Chief Executive Officer

Dr Jean Holohan (resigned 17 July 2012)
Sharon Cosgrove (appointed 17 July 2012)

Independent Auditor

Russell Brennan Keane Business Advisers
Chartered Accountants & Registered Auditor
96 Lower Baggot Street
Dublin 2

Principal Bankers

Bank of Ireland	AIB Dun Laoghaire
2 College Green	George's Street
Dublin 2	Dun Laoghaire
	Co. Dublin

Solicitors

Rutherfords
41 Fitzwilliam Square
Dublin 2

The Directors Report

The Directors present their annual report together with the audited financial statements of the Asthma Society of Ireland (the "Company") for the year ended 31 December 2012. The Directors confirm that the annual report and financial statements of the Company comply with the current statutory requirements, the requirements of the Company's governing document and the provisions of the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" issued in March 2005 (updated in July 2008).

Structure, governance and management

a. Constitution

The Company is a registered charity founded in 1973 as a Company limited by guarantee. The principal office of the Company is 4th Floor, 42-43 Amiens Street, Dublin 1. The Company's registered number is 57125 and its charity registration number is CHY 6100. Governance and management structures are set out in the Memorandum & Articles of Association. The Company is governed by its Board of Directors, which includes representation from a broad range of stakeholders including people with asthma and from the medical profession. The Board is supported by its Medical Board, Medical Committees and the Audit, Risk and Finance Committee.

b. Method Of Appointment Or Election Of Directors

The Directors are appointed to terms of office that comply with the Articles of Association of the Company.

c. Organisational Structure And Decision Making

The Company is governed by its Board of Directors, which makes decisions regarding strategy in relation to the Company. The Board met 10 times in 2012. The Directors have appointed a Chief Executive Officer and have delegated a range of day-to-day decision making powers to this Chief Executive Officer.

Audit, Risk and Finance Committee

The Company has an Audit, Risk and Finance Committee with terms of reference to review all audit, risk and finance issues. This Committee met four times in 2012 and two of its members have recent and relevant financial experience.

d. Directors And Company Secretary

There has been no change to the Board of Directors since the date of approval (25 June 2012) of the previous financial statements.

On 3 December 2012, Dr. Jean Holohan resigned as Company Secretary and Mr. Michael Tyndall was appointed as Company Secretary. Angela Edghill has indicated her intention to retire as a Director at the Annual General Meeting in 2013. In accordance with the Articles of Association, Anne Robinson, Lynn Carberry and Bob Gee will retire by rotation and, being eligible, will offer themselves for re-election at the Annual General Meeting in 2013.

e. Taxation Status

Asthma Society of Ireland has Charitable Status and accordingly the Company's profits are exempt from corporation tax.

f. Risk Management

The Board of Directors has assessed the major risks to which the Company is exposed, in particular those related to the operations and finances of the Company, and is satisfied that systems and procedures are in place to mitigate exposure to the major risks.

Risks facing the Company

The Board of Directors considers long term funding, going concern and reputational issues as being key risks facing the Company and has to put in place strategic plans to manage these risks.

Objectives and Activities

a. Policies And Objectives

The Asthma Society of Ireland is the leading independent agency in Ireland providing support to people affected by asthma and their families. The Company's main objective is to relieve sickness and distress by enabling patients to enjoy optimal asthma control and quality of life through evidence based care in an integrated public health approach to asthma management.

b. Strategies For Achieving Objectives

The strategies which the Company has adopted in order to achieve its objectives are to enlist, solicit and seek out State, corporate and individual funding, to raise and increase public awareness of the Company and to establish relationships with the medical community.

c. Activities For Achieving Objectives

- **Asthma Nursing Services:** Providing specialist advice to people with asthma and their families. In 2012, a total number of 2,879 people accessed asthma support services. Six regional clinics were held at which 355 people with asthma were provided with specialist nurse services. The asthma Adviceline dealt with 1,643 calls and 287 emails (a total of 1,930 enquiries) and a further 594 people with asthma were seen in pharmacy clinics all over the country.
- **Asthma Information Services:** Providing asthma information through materials and resources. Asthma information material was distributed at all clinics and to those availing of the Adviceline, as well as at local and national events and shows. A number of leaflets were developed in 2012 including Reach Your Peak and Asthma in Babies and Children. The Asthma Coach, the iPhone asthma management app was released
- **Education and Service Development:** Developing and implementing asthma education programme for patients and healthcare professionals. In 2012, there were 22 presentations to groups, communities and health care providers. In addition, over 600 health care professionals were users of the Asthma Society's Asthma E Learning programme. The Asthma Society of Ireland worked closely with the Irish Pharmacy Union and GlaxoSmithKline to deliver a Train the Trainer training programme to a group of pharmacists, who in turn went on to deliver asthma training to pharmacists around the country.
- **Research:** Funding objective and balanced clinical and asthma related health information research. In 2012, the Asthma Society of Ireland presented findings from the Asthma Demonstration Programme at national events and continued to support research into asthma through its inaugural joint Research Fellowship with the Irish Thoracic Society
- **Asthma Awareness:** To raise awareness of asthma and of the work of the Asthma Society. The Company ran a national awareness campaign for World Asthma Day in May 2012, with a one week radio campaign highlighting the number of asthma deaths every year. In addition, seasonal campaigns covered hayfever, back to school and the flu vaccination.

Regional media agencies were targeted with press releases to highlight the six regional clinics and to raise awareness of asthma.

- **Governance and management:** Equipping the Company to achieve its main objective and enhance its role through excellent organisational governance, management and development. In April 2012, the Board approved the Strategic Plan 2012 – 2015 and decided to work towards compliance with the Code of Governance for Community, Voluntary and Charitable Organisations. A working group was formed to further improve the Company's governance policies and practices, A communications plan was developed, a number of HR activities took place including the development of staff handbook and a revised staffing structure was approved by the Board. To address the projected impact of the reduction in lottery income, a fundraising plan was largely complete by the end of 2012 with implementation to commence in 2013.
- **Advocacy** - advocating for progressive development in policy and practice in asthma care. Throughout 2012, the Asthma Society of Ireland continued to contribute resources and expertise to the planning and development of the National Asthma Programme (NAP). The Asthma Society of Ireland was an active member and the asthma patient representative on the NAP working group, which is tasked with the design and implementation of all aspects of the Programme. The Asthma Society of Ireland continued to develop, host and manage the healthcare professional e Learning component of NAP.

Achievements and performance

a. Review Of Activities

Gross income for the year was €1,374,170 (2011:€1,269,406). The principal source of gross income for the Company is its Charitable Lottery, operated through the sale of its scratch cards. Sales of scratch cards in 2012 amounted to €508,497 (2011: €660,821) and were down by €152,324 on the previous year. The decline is attributed to the general economic climate and severe competition in the scratch card market. The Company also receives funding from the Department of Justice and Equality under the Charitable Lotteries Fund Scheme. This funding increased from €364,236 in 2011 to €371,277.

Expenditure in 2012 for charitable activities amounted to €864,501 compared to €838,853 in 2011. In accordance with the terms of the Charitable Lotteries Fund Scheme, funding of €364,236, received from the Department of Justice and Equality in December 2011, was fully utilised during 2012. Expenditure was focused on the four areas of operation -support services to patients, education, and research and asthma awareness.

The Company had a net surplus of €52,707 in 2012 compared to an net deficit of (€159,018) in 2011.

b. Investment Policy And Performance

The objective of the Company's investment policy is to maintain sufficient liquidity while ensuring maximum security, meeting ethical standards and achieving the highest possible returns. Interest earned is applied to the charitable causes of the Company.

Financial review

a. Reserves Policy

The Company's available reserves at the year end were €1,389,845 (2011: €1,337,138).

The Directors recognise the need to hold reserves to ensure the financial stability of the Company. In particular, the Directors recognise that the Company is currently substantially dependent on one source of income to fund its activities. That source is the lottery operation, which in turn generates income from the Charitable Lotteries Fund Scheme.

In order to mitigate the risks associated with its income, it is the policy of the Company to hold sufficient reserves to fund its activities for a year. The Directors review this policy on an ongoing basis to ensure that it continues to be appropriate for the financial stability of the Company.

The Company holds as a Restricted Reserve the income it receives from the Charitable Lotteries Fund Scheme. This income is received each year in late December and is expended over the course of the following twelve months in accordance with the terms and conditions of the Scheme. It therefore appears in Restricted Reserves in the Balance Sheet at 31 December.

The Directors of the Company may also determine that a portion of reserves be utilised for particular or designated purposes or projects to advance the causes of the Company. Such reserves, if any, are classified as Designated Reserves at the Balance Sheet date. At 31 December no reserves were classified as Designated. On 25 February 2013, the Board of Directors designated that an amount of €200,000 would be designated for utilisation by the Company in developing a sustainable fundraising structure within the organisation in order to broaden the fundraising capacity of the Company.

Plans for the future

a. Future Developments

Throughout 2013, the Company will continue to develop and enhance its services to individuals and families who are affected by asthma. To reduce its dependence on the operation of its Charitable Lottery and the Charitable Lotteries Fund Scheme, the Company is also actively pursuing new sources of funding.

Members' Liability

The Company is a Company limited by guarantee and does not have a share capital. The liability of members is limited as defined in the Company's Memorandum of Association and shall not exceed €5 in the event of a winding up or dissolution of the Company.

Accounting Records

The measures taken by the Directors to ensure compliance with the requirements of Section 202 of the Companies Act 1990 regarding books of account are the implementation of necessary policies and procedures for recording transactions, the employment of competent accounting personnel with appropriate expertise and the provision of adequate resources to the finance function. The books of account of the Company are maintained on the 4th Floor, 42-43 Amiens Street, Dublin 1

Post Balance Sheet Events

There have been no significant events affecting the Company since the year end, which in the opinion of Directors, requires disclosure in the financial statements.

Statement Of Directors' Responsibilities

The Directors are responsible for preparing the Directors' report and the audited financial statements in accordance with applicable law, the Companies Acts and Statement of Recommended Practice.

Company and charity law requires the Directors to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Company and of the incoming resources and application of resources, including the income and expenditure, of the Company for that period. In preparing these financial statements, the Directors are required to:

select suitable accounting policies and then apply them consistently; make judgments and accounting estimates that are reasonable and prudent; prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Company will continue in operation.

The Directors have opted to observe the methods and principles in the Charities SORP.

The Directors are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the Company and enable them to ensure that the financial statements comply with the Companies Acts, 1963 to 2012. They are also responsible for safeguarding the assets of the Company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities

Political Contributions

There were no political contributions which require disclosure under the Electoral Act 1997.

Financial Statements

Auditor

On 3 December 2012, Ormsby & Rhodes resigned as auditor and Russell Brennan Keane Business Advisers was appointed as auditor.

The auditor, Russell Brennan Keane Business Advisers, have indicated their willingness to continue in office in accordance with provisions of Section 160 (2) of the Companies Act, 1963.

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

Angela Edghill

Director

Maeliosa OhOgartaigh

Director

25 March 2013

Independent Auditors' Report To The Members Of Asthma Society Of Ireland (A Company Limited By Guarantee And Not Having A Share Capital)

We have audited the financial statements of Asthma Society of Ireland for the year ended 31 December 2012 which comprise of the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement and 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 Company's members, as a body, in accordance with Section 193 of the Companies Act, 1963. Our audit work has been undertaken so that we might state to the Company's members 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 Company and its members, for our audit work, for this report, or for the opinion we have formed.

Respective Responsibilities Of Directors And Independent Auditor

The Board of Directors is responsible for the preparation of the financial statements in accordance with applicable law and the accounting standards issued by the Accounting Standards Board and promulgated by Chartered Accountants Ireland (Generally Accepted Accounting Practice in Ireland).

We have been appointed as auditor in accordance with the Companies Acts, 1963 and 2012. Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Ethical Standards for Auditors.

We report to you our opinion as to whether the financial statements give a true and fair view and are prepared in accordance with the Companies Acts, 1963 to 2012. We also report to you if, in our opinion the information given in the Directors' Report is not consistent with those financial statements, the Company has not kept adequate accounting records, if the Company's financial statements are not in agreement with the accounting records, or if we have not received all the information and explanations we require for our audit.

We read the Directors' 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 judgment made by the Directors in the preparation of the financial statements and of whether the accounting policies are appropriate to the Company'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 generally Accepted Accounting Practice in Ireland, of the state of the Company's affairs as at the 31 December 2012 and of its Income and Expenditure and Cash Flow Statement for the year then ended have been prepared in accordance with the requirements of the Companies Acts 1963 to 2012.

We have obtained all the information and explanations we considered necessary for the purpose of our audit. In our opinion proper books of accounts have been kept by the Company. The Company's Balance Sheet is in agreement with the books of account.

In our opinion the information given in the Directors' Report is consistent with the financial statements

Conor Woods
(Statutory Auditor)

For and on behalf of

Russell Brennan Keane Business Advisers

Chartered Accountants & Registered Auditor
96 Lower Baggot Street
Dublin 2.

4 April 2013

Financial Statements

Statement Of Financial Activities (Incorporating Income and Expenditure Account) For The Year Ended 31 December 2012

		Unrestricted funds	Restricted funds	Total funds	Total funds
	Note	2012 €	2012 €	2012 €	2011 €
Incoming Resources					
Incoming resources from generated funds:					
Voluntary income	2	278,091	84,694	362,785	165,007
Activities for generating funds	3	546,840	425,726	972,566	1,072,654
Investment income	4	38,819	-	38,819	31,745
Total Incoming Resources		863,750	510,420	1,374,170	1,269,406
Resources Expended					
Costs of generating funds:					
Costs of generating voluntary income	5	433,993	-	433,993	565,686
Resources expended by charitable activities	6	361,122	503,379	864,501	838,853
Governance costs	9	22,969	-	22,969	23,885
Total Resources Expended		<u>818,084</u>	<u>503,379</u>	<u>1,321,463</u>	<u>1,428,424</u>
Movement In Total Funds For The Year - Net Income/(Expenditure) For The Year		45,666	7,041	52,707	(159,018)
Total funds at 1 January 2012		<u>972,902</u>	<u>364,236</u>	<u>1,337,138</u>	<u>1,496,156</u>
Total Funds At 31 December 2012		<u>1,018,568</u>	<u>371,277</u>	<u>1,389,845</u>	<u>1,337,138</u>

All activities relate to continuing operations.

The Statements of Financial Activities includes all gains and losses recognised in the year.

The financial statements were approved by the Directors and signed on their behalf by:

Angela Edghill

Director

25 March 2013

Maeliosa OhOgartaigh

Director

Balance Sheet As At 31 December 2012

		2012		2011	
	Note	€	€	€	€
Fixed Assets					
Tangible assets	13		20,358		24,755
Current Assets					
Debtors	14	32,983		19,020	
Cash at bank and on deposit		<u>1,423,188</u>		<u>1,374,855</u>	
		1,456,171		1,393,875	
Creditors: amounts falling due within one year	15	(86,684)		(81,492)	
Net Current Assets			<u>1,369,487</u>		<u>1,312,383</u>
Net Assets			<u>1,389,845</u>		<u>1,337,138</u>
Total Funds					
Restricted funds	16		371,277		364,236
Unrestricted funds	16		<u>1,018,568</u>		<u>972,902</u>
Total Funds			<u>1,389,845</u>		<u>1,337,138</u>

The financial statements were approved by the Directors and signed on their behalf, by:

Angela Edghill

Director

25 March 2013

Maeliosa OhOgartaigh

Director

Cash Flow Statement For The Year Ended 31 December 2012

		2012	2011
	Note	€	€
Net cash flow from operating activities	18	14,442	(148,135)
Returns on investments and servicing of finance	19	38,819	31,745
Capital expenditure and financial investment	19	(4,928)	(21,048)
Increase/(Decrease) In Cash In The Year		<u>48,333</u>	<u>(137,438)</u>

Reconciliation Of Net Cash Flow To Movement In Net Funds For The Year Ended 31 December 2012

		2012	2011
	Note	€	€
Increase/(Decrease) in cash in the year		<u>48,333</u>	<u>(137,438)</u>
Movement In Net Cash In The Year	20	48,333	(137,438)
Net cash at 1 January 2012	20	<u>1,374,855</u>	<u>1,512,293</u>
Net Cash At 31 December 2012		<u>1,423,188</u>	<u>1,374,855</u>

1. Accounting Policies

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the financial statements. The financial statements have been prepared in Euro.

1.1: Basis Of Preparation Of Financial Statements

The financial statements have been prepared under the historical cost convention. The financial statements have been prepared in accordance with the Statement of Recommended Practice (SORP), "Accounting and Reporting by Charities" published in March 2005 (updated July 2008), applicable accounting standards and the Companies Act, 1963 to 2012

1.2: Fund Accounting

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

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors which have been received by the Company for particular purposes. The cost of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in the notes to the financial statements.

Investment income, gains and losses are recognised in the Statement of Financial Activities.

1.3: Incoming Resources

All incoming resources are included in the Statement of Financial Activities when the Company is legally entitled to the income and the amount can be quantified with reasonable accuracy. For legacies, entitlement is the earlier of the Company being notified of an impending distribution or the legacy being received.

Restricted funds

Restricted funds consist of funds received which can only be used for the purpose for which they are specified by the donors. These purposes are the objects of the Company.

Unrestricted funds

Unrestricted funds consist of funds received which the Company can spend based on its own discretion to enable it to achieve its objects.

1.4: Resources Expended

All expenditure is accounted for on an accruals basis and has been included under expense categories that aggregate all costs for allocation to activities. Where costs cannot be directly attributed to particular activities they have been allocated on a basis consistent with the use of the resources.

Fundraising costs are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities. Support costs are those costs incurred directly in support of expenditure on the objects of the Company and include project management carried out at Headquarters. Governance costs are those incurred in connection with administration of the Company and compliance with constitutional and statutory requirements.

1.5: Tangible Fixed Assets And Depreciation

Fixed assets are stated at cost or valuation less depreciation. Depreciation on tangible fixed assets is provided at rates calculated to write off the cost or valuation of those assets, less their estimated residual value, over the expected useful lives on the following bases:

Fixtures and fittings - 20% straight line

Office equipment - 10% straight line

Computer equipment - 33% straight line

1.6: Operating Leases

Rentals under operating leases are charged to the Statement of Financial Activities on a straight line basis over the lease term.

1.7: Pensions

The Company operates defined contribution pension schemes for its staff. The annual contributions to these schemes are dealt with in the income and expenditure account in the year to which they relate.

2. Voluntary Income

	Unrestricted funds	Restricted funds	Total funds	Total funds
	2012 €	2012 €	2012 €	2011 €
General donations	13,956	-	13,956	29,169
General donations restricted	-	1,125	1,125	-
Corporate donations	54,500	8,916	63,416	51,500
Legacies	144,098	-	144,098	-
HSE grants	7,741	74,653	82,394	50,711
Department of Environment	50,000	-	50,000	25,000
Membership	7,796	-	7,796	8,627
Total Voluntary Income	278,091	84,694	362,785	165,007

Financial Statements

3. Income From Activities For Generating Funds

	Unrestricted funds	Restricted funds	Total funds	Total funds
	2012 €	2012 €	2012 €	2011 €
Fund raising	21,559	-	21,559	29,925
Other income	16,784	54,449	71,233	17,672
Dept. of Justice & Equality - Charitable Lotteries Fund Scheme	-	371,277	371,277	364,236
Gross lottery receipts	508,497	-	508,497	660,821
Total Income From Activities For Generating Funds	546,840	425,726	972,566	1,072,654

4. Investment Income

	Unrestricted funds	Restricted funds	Total funds	Total funds
	2012 €	2012 €	2012 €	2011 €
Bank deposit interest received	<u>38,819</u>	-	<u>38,819</u>	<u>31,745</u>

5. Costs Of Generating Funds

	Unrestricted funds	Restricted funds	Total funds	Total funds
	2012 €	2012 €	2012 €	2011 €
Asthma devices	10,189	-	10,189	13,444
Fund raising	15,143	-	15,143	15,280
Lottery costs	408,661	-	408,661	536,962
	<u>433,993</u>	-	<u>433,993</u>	<u>565,686</u>

6. Resources Expended By Charitable Activities

	Activities undertaken directly	Support costs	Total funds	Total funds
	2012 €	2012 €	2012 €	2011 €
Patient Services (notes 7, 8)	111,442	40,052	151,494	138,214
Asthma Awareness (notes 7, 8)	99,169	35,704	134,873	124,601
Information and Materials (notes 7, 8)	340,543	122,445	462,988	478,848
Research (note 7, 8)	84,477	30,669	115,146	97,190
Total	<u>635,631</u>	<u>228,870</u>	<u>864,501</u>	<u>838,853</u>

The costs are analysed below in more detail.

7. Total Charitable Activities

	2012 €	2011 €
Patient Services	111,442	110,037
Asthma awareness	99,169	99,483
Information and Materials	350,543	392,708
Research	84,477	75,615
Total	<u>635,631</u>	<u>677,843</u>

Financial Statements

Patient Services

	2012 €	2011 €
Asthma clinics	16,999	23,998
Pharmacy days	19,084	-
Asthma meetings	4,046	2,426
Phone apps campaign	6,000	-
Pollen app	3,156	-
Educational events	19,325	27,878
Campaign and communications contractor	10,804	-
Staff costs	16,689	41,696
Education staff costs	15,339	14,039
Total	<u>111,442</u>	<u>110,037</u>

Asthma Awareness

	2012 €	2011 €
Media awareness	1,035	5,643
National asthma strategy	3,154	2,545
PR campaigns	49,853	59,291
Communication staff costs	45,127	32,004
Total	<u>99,169</u>	<u>99,483</u>

Information and Materials

	2012 €	2011 €
Asthma news	29,095	24,362
Nursing staff costs	94,952	76,681
Help line expenses	695	23
Information booklets	13,924	55,420
Postage	8,777	4,760
Storage and distribution cost	10,485	10,756
Asthma management app	10,884	39,351
Office machine maintenance	12,256	10,249
Web education	-	22,208
Premise costs	21,500	22,593
Expenses	456	1,616
Charitable staff costs	129,233	117,436
Telecommunications	8,286	7,253
Total	<u>340,543</u>	<u>392,708</u>

Research

	2012 €	2011 €
Research and Education staff costs	50,998	46,663
Database	1,230	605
Asthma in Ireland	2,036	12
Fellowship	10,000	-
Medical advisor	6,219	-
National Asthma Programme	13,395	24,107
Órán Ó Muiré research bursary	599	4,228
Total	<u>84,477</u>	<u>75,615</u>

Financial Statements

8. Support Costs

	2012 €	2011 €
Bank and credit card charges	3,737	3,798
Office costs	10,555	10,264
Insurance	2,621	2,617
Consultancy & Professional	27,800	19,454
Subscriptions	3,073	3,550
Recruitment	32,036	-
Consultancy fundraiser	15,131	28,649
Premises costs	14,148	11,763
Office machiney	7,353	4,897
General costs	2,876	3,197
Light and heat	600	-
Agency receptionist	32,870	-
Staff training	3,680	2,172
Moving premises costs	-	11,555
Governance staff costs	72,390	59,094
Total	<u>228,870</u>	<u>161,010</u>

9. Governance Costs

	Unrestricted funds	Restricted funds	Total funds	Total funds
	2012 €	2012 €	2012 €	2011 €
Auditor remuneration	8,775	-	8,775	10,003
Annual report and Board meetings	4,869	-	4,869	4,089
Depreciation	9,325	-	9,325	9,793
	<u>22,969</u>	<u>-</u>	<u>22,969</u>	<u>23,885</u>

10. Net Income

This is stated after charging:

	2012 €	2011 €
Depreciation of tangible fixed assets:		
- owned by the company	9,325	9,793
Auditor remuneration	<u>8,775</u>	<u>10,003</u>

During the year, no Directors received any remuneration (2011 - €NIL).

During the year, no Directors received any benefits in kind (2011 - €NIL).

During the year, Directors received reimbursement of expenses amounting to €961 (2011 - €602).

Financial Statements

11. Staff Costs

The average monthly number of employees during the year as follows:

	2012 €	2011 €
	12	11
Staff Costs Were as follows:		
	2012 €	2011 €
Wages and salaries	371,306	335,507
PRSI	37,993	35,304
Pension costs	15,427	16,801
Total	<u>424,726</u>	<u>387,612</u>

12. Taxation

The Company is exempt from taxation under section 11(6) of the Corporation Tax Act 1976, as a Company.

13. Tangible Fixed Assets

	Office furniture €	Office furniture €	Computer equipment €	Total €
Cost				
At 1 January 2012	44,129	64,823	20,809	129,761
Additions	<u>2,392</u>	-	<u>2,536</u>	<u>4,928</u>
At 31 December 2012	46,521	64,823	23,345	134,689
Depreciation				
At 1 January 2012	28,303	55,894	20,809	105,006
Charge for the year	5,687	2,793	845	9,325
At 31 December 2012	33,990	58,687	21,654	114,331
Net book value				
At 31 December 2012	12,531	6,136	1,691	20,358
At 31 December 2011	15,826	8,929	-	24,755

14. Debtors

	2012 €	2011 €
Due within one year		
	2012 €	2011 €
Prepayments and accrued income	21,294	18,831
Other debtors	11,689	189
	<u>32,983</u>	<u>19,020</u>

15. Creditors

Amounts falling due within one year

	2012 €	2011 €
Trade Creditors	51,536	51,530
PAYE	14,331	16,020
Other creditors	6,647	-
Accruals	14,170	13,942
	<u>86,684</u>	<u>81,492</u>

16. Statement Of Funds

	Brought Forward €	Incoming Resources €	Resources Expended €	Carried Forward €
Unrestricted funds				
Reserves	972,902	863,750	(818,084)	1,018,568
Restricted funds				
Restricted funds	364,236	510,420	(503,379)	371,277
Total of funds	<u>1,337,138</u>	<u>1,374,170</u>	<u>(1,321,463)</u>	<u>1,389,845</u>

17. Analysis Of Net Assets Between Funds

	Unrestricted funds 2012 €	Restricted funds 2012 €	Total funds 2012 €	Total funds 2011 €
Tangible fixed assets	20,358	-	20,358	24,755
Debtors due within one year	32,983	-	32,983	19,020
Cash at bank and on deposit	1,051,911	371,277	1,423,188	1,374,855
Creditors due within one year	(86,684)	-	(86,684)	(81,492)
	<u>1,018,568</u>	<u>371,277</u>	<u>1,389,845</u>	<u>1,337,138</u>

18. Net Cash Flow From Operating Activities

	2012 Total €	2011 Total €
Net incoming resources before revaluations	52,707	(159,018)
Returns on investments and servicing of finance	(38,819)	(31,745)
Depreciation of tangible fixed assets	9,325	9,793
Decrease in stocks	-	6,401
(Increase)/decrease in debtors	(13,963)	3,825
Increase in creditors	5,192	22,609
Net cash inflow/(outflow) from operations	<u>14,442</u>	<u>(148,135)</u>

19. Analysis Of Cash Flows For Headings Netted In Cash Flow Statement

	2012 €	2011 €
Returns on investments and servicing of finance		
Interest received	<u>38,819</u>	<u>31,745</u>
	2012 €	2011 €
Capital expenditure and financial investment		
Purchase of tangible fixed assets	<u>(4,928)</u>	<u>(21,048)</u>

20. Analysis Of Changes In Net Debt

	1 January 2012 €	Cash flow €	Other non-cash changes €	31 December 2012 €
Cash at bank and on deposit	1,374,855	48,333	-	1,423,188
Net funds	<u>1,374,855</u>	<u>48,333</u>	<u>-</u>	<u>1,423,188</u>

21. Pension Commitments

The Company operates defined contribution schemes for the benefit of its staff. The assets of the scheme are held separately from those of the Company in independently administered pension funds. Pension costs amounted to €15,427 (2011: €16,801)

22. Operating Lease Commitments

At 31 December 2012, the Company had annual commitments under non-cancellable operating leases for their office located on 4th Floor, 42-43 Amiens Street, Dublin 1 as follows:

	2012 €	2011 €
Expiry date:		
Within 1 year	24,260	24,600
Between 2 and 5 years	71,750	96,350

23. Related Party Transactions

Ultimate control

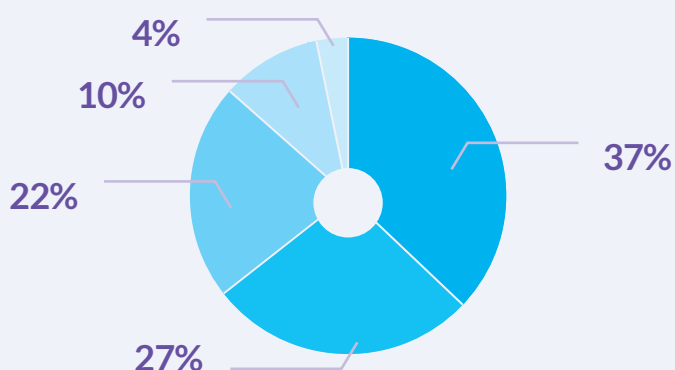
There is no ultimate controlling party. From day to day the Directors control the Company on behalf of the members.

24. Approval Of Financial Statements

The financial statements were approved by the Board on 25 March 2013.

Analysis Of Net Income

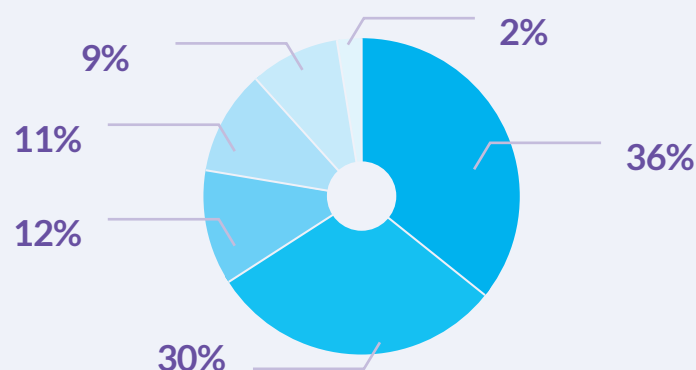
Gross Lottery Receipts	€508,497	37%
Department of Justice & Equality - Charitable Lotteries Fund Scheme	€371,277	27%
Fundraising/Donations/Membership/Other Income	€298,586	22%
Statutory Grants	€132,394	10%
Corporate Donations	€63,416	4%
Total	€1,374,170	100%



- Gross lottery Receipts
- Department of Justice & Equality - Charitable Lotteries Fund Scheme
- Fundraising/Donations/Membership/Other Income
- Statutory Grants

Analysis Of Expenditure

Information and Materials	€340,543	36%
Support Costs	€288,870	30%
Patient Services	€111,442	12%
Asthma Awareness	€99,169	11%
Research	€84,477	9%
Governance Costs	€22,969	2%
Total	€947,470	100%



- Information & Materials
- Support Costs
- Patient Services
- Asthma Awareness
- Research
- Governance Costs



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