Dear Supporter

This has been another successful and eventful year for the Association, and we have many people to thank.

At the top of the list are our volunteers, staff and donors, without whom none of our valuable work would be possible.

Some of the largest donations in the year under review came from legacies, and we are very grateful to those who remembered the Association when making a will. The income from this source can vary greatly from one year to the next. This Annual review is accompanied by a leaflet on legacies, and I would appeal to you to read it and act upon it.

After much debate, the Governance Board decided to abide by its original decision to rebuild our headquarters at 21 Dublin Road, Belfast. We intend to use the top three floors of the five-storey building while letting out the lower two to generate further income. The completion date is expected to be July 2006.

It was a tremendous honour that Sir Richard Doll CH FRS, Emeritus Professor of Epidemiology at Oxford University, agreed to lay the foundation stone on 16th June 2005. Sir Richard was the first person to establish the link between smoking and health, and thus saved millions of lives throughout the world.

Sadly after a short illness, barely six weeks after laying the foundation stone, Sir Richard died on Sunday 24th July 2005 at the age of 92.

As ever, thank you to the members of the Scientific Research Grants Committee (SRGC), led by Professor Walter Holland CBE, a world-renowned epidemiologist who has been undertaking research for almost half a century.

It is good to learn that Dr Michael Power has been asked by the DHSSPS to set up a working group to revise and update the stroke strategy. It is highly significant that a strategy has now been agreed and will be implemented in the Eastern Board followed by other Board areas.

We were all delighted to hear the news that Mr David Magill had been awarded MBE as a result of his extensive work both for this Association and many other charitable causes. He has been Chairman of the Glengormley Support Group over many years and a stalwart member of Council, bringing much expertise to its deliberations.

We are sorry to lose Ms Jackie McCusker who has been a member of the Board for 6 years.

Mrs Anne Hayes has joined the Board having been a member of Council for some 5 years. Mrs Hayes was previously Director of the Northern Ireland MS Society and previously had an extensive career in nursing.

We welcome the following new members of Council: Mr Peter Lavery, Ms Grainne McMacken, Mr Charlie Warmington and Mr Martin McLoughlin.

A special word of thanks to Mrs Connie Wright who has been a long serving member of Council and a very active member of Holywood Support Group. It is good to know that she intends to continue in her work with the Holywood group.

Yours sincerely,

Roger Lowry OBE FRCP
Chairman
Sudden Cardiac Death

Sudden death is a shock to all. However, when it occurs in young fit adults it is even more devastating. Northern Ireland was shocked by the death of two very prominent young sportsmen in the year 2004. The loss of Cormac McAnallen and John McCall awakened everyone in the community to the dangers of sudden cardiac death, particularly in the young.

In the year under review, NICHSA has continued its efforts to persuade communities to purchase automatic external defibrillators, which can be used by members of the public. We have also been heavily involved in ensuring that as many people as possible are trained in CPR, which is a necessary component of any resuscitation. It is our belief that the public must play its part in augmenting the work undertaken by the Ambulance Service. In many areas it is not possible for an ambulance to reach the patient within four minutes. Derek Sweetnam has been active within the Association in persuading organisations to have automatic external defibrillators available 24 hours a day, particularly in those areas where large numbers of the public gather.

It is also important to take a family history of any sudden cardiac death. When such a case is identified it is essential that the whole extended family is screened. NICHSA has funded research over many years in this area under Dr Colin Graham at Belfast City Hospital. We are setting up an expert group to look at the issue of sudden cardiac death in the young and to make recommendations for policies.

Respiratory Illnesses

We were pleased to see that in August 2004 the Department of Health, Social Services and Public Safety (DHSSPS) established a working group on respiratory conditions to shape respiratory services over the next 10 years. The aim is to prevent these illnesses (asthma, emphysema, chronic bronchitis, bronchiectasis) and to improve treatment. Such action was long overdue. The framework will be published in the autumn of 2005, and NICHSA is represented on the working group.

Stroke Strategy Implementation Project

The Stroke Strategy Implementation Project was formally launched by Dr Paula Kilbane, Chief Executive of the Eastern Health and Social Services Board.

Four Masterclasses on stroke were organised in the autumn of 2004 for GPs in the Eastern Board area. The purpose of this was to ensure that family doctors had up-to-date knowledge on the management of stroke.

Ms Sandra Aitcheson, Nurse Advisor on the Elderly to the DHSSPS, has been appointed for 3 sessions per week to lead the Stroke Strategy Implementation Project. Local task forces have been set up to drive forward the stroke strategy both in hospital and in the community.
The following projects were agreed for funding during the last year:

1. Dr Gary McVeigh, Queen’s University, Belfast “Functional regulation of NOSIII in congestive cardiac failure: role of tetrahydrobiopterin” - £39k
2. Dr Joe MacMahon, Ulster University “Educational sessions in pulmonary rehabilitation” - £21k
3. Dr Vanessa Brown, Queen’s University Belfast “Investigations of neutrophil apoptosis in COPD” - £45k
4. Dr Peter McCarron, Queen’s University, Belfast “Association between diet and antioxidant status in adolescence and early adulthood and early adult lung function” - £35k
5. Dr Pascal McKeown, Royal Hospitals Trust “A study of aspirin resistance in patients with cardiovascular disease” - £8K
6. Professor Stuart Elborn, Belfast City Hospital “Airway clearance in bronchiectasis: is non-invasive ventilation a useful adjunct in moderate to severe disease?” - £18k
7. Dr Mary Ward, University of Ulster “The homocysteine-lowering effect of riboflavin in CVD patients with different MTHFR C677T genotypes” - £27k

The Association has a policy only to fund research of the highest quality and which will benefit the people of Northern Ireland in as short a time as possible. If applications do not come up to the standard, money is set aside for research projects in the following year. All research work is carried out in the hospitals and universities of Northern Ireland.

Scientific Research Conference
For the first time the Association invited those who had undertaken research funded by the Association to present their findings at a scientific research conference. This was held at the Research and Education Centre at the Royal Hospitals Trust. A large number of topics was presented with the majority being in heart disease and others on stroke and respiratory illnesses. NICHSA’s current policy is to encourage more research, particularly in the area of stroke and respiratory disease.

Tobacco Control
In December 2004 the Health Minister issued consultation on what should be done about smoking in workplaces as well as public places. Only three options were outlined:

a. to make no changes
b. to have the “English fudge” where some public houses and clubs would be smoke-free and others not
c. To render all workplaces and public places smoke free.

NICHSA, along with other medical and health organisations set about enlisting public support for the third option. On 24th March 2005, 25,000 letters were delivered to the Health Minister at Stormont. Other organisations involved included the Ulster Cancer Foundation, the BMA, the Royal College of Nursing and Action Cancer. The website set up for people to indicate their preference received a large number of “hits”.

In June 2005 the Health Minister announced that as many as 91% of those participating had voted in favour of option “c”, 8% in favour of the fudge option “b” and less than 1% in favour of making
no change. It is therefore with some confidence that we feel that the Minister will have no choice eventually but to heed the wishes of the Ulster public and to opt for smoke-free work environments and smoke-free public places.

We are pleased to note that support among smokers in the Republic of Ireland for smoke free environments has greatly increased since the change in March 2004. The legislation there has encouraged many smokers to attempt and to succeed in quitting the habit.

In fact only 26% of the Northern Ireland population smoke. Of those who do, 70% would dearly love to quit the habit but fail to do so because of the addictive effects of nicotine. This means that less than 8% of the Northern Ireland public are determined smokers. There is absolutely no way that Government can allow 8% of the population to dictate to the remainder, especially when the health of individuals and children in particular is put at risk.

**Stroke Forum**

A UK Stroke Forum has been established to bring together the different organisations and professions which deal with stroke. The Stroke Association has agreed to fund and to house a member of staff who will undertake the work of the Forum.

**Stroke Research Network**

The Government has established a UK Stroke Research Network. It will be located in Newcastle University and will be led by Professor Gary Ford. It will encourage more stroke research throughout the whole of the United Kingdom. NICHSA continues to seek to fund more research into the area of stroke. It is the largest single cause of disability in our community and the effects are often long-term. It is appropriate that everything possible is done not only to prevent stroke, but also to help in the rehabilitation of those who suffer it.

**Stroke Audit**

The National Sentinel Audit published by the Royal College of Physicians highlighted those hospitals where stroke units were not available. The Association has drawn this matter to the attention of Health Boards and Trusts. Congratulations are due to the Erne Hospital in Co Fermanagh, which, according to the report, has one of the best performing stroke units in Northern Ireland.
The year 2004 – 2005 has seen another massive stride forward in the delivery of our services.

Our Health Promotion services under the direction of Maureen McCourt have flourished, with a field of activities that includes:

- Cardiac Risk Factors
- Health
- Lifestyle Assessments
- Body Composition Assessment

This keeps our nursing staff fully occupied. The Down Lisburn Trust, in partnership with NICHSA, has, with the financial support of the Big Lottery Fund, engaged in a full screening programme to identify those most at risk from vascular disease and to develop a programme of health to reduce this risk. We continue to work in less advantaged areas to promote the good health message. The number of assessments carried out during the year exceeded 5,000.

Belfast bus drivers have again supported our nebuliser programme and a sincere word of thanks must be conveyed to Bob Kerr, who always considers that the Association is a priority for the Belfast Citybus drivers and has again donated a number of nebulisers, which has been very much appreciated.

Welfare

Our welfare grants system has again eased the hardship of families who have to live with chest, heart or stroke illnesses. We have loaned out equipment and bed linen, and have provided assistance with travel for children with congenital heart disease. This area of our work is perhaps less well known than some of the others, but plays a vital role in easing financial worry for families.

Stroke Services

Our Stroke Services continue to thrive and develop, providing support, education, and guidance through our Volunteer Stroke Schemes to more than 500 stroke survivors. The Stroke Family Support Service has supported over 400 families/carers, offering much needed advice and counselling. Carer support groups are on the increase, with carers requesting help to cope with the devastating effect of stroke and seeking to understand how best they can support the family member who has been affected. Meanwhile, the Young Stroke Projects – supported by the Big Lottery Fund and located in the Eastern Health and Social Services Board (EHSSB) area, Armagh & Dungannon Health and Social Services Trust (HSST) and Foyle HSST - are providing an effective programme to approximately 200 people and their carers. This year has identified many more young stroke survivors, including children as young as 3 and 4.

Lottery Support

The Big Lottery projects are all well established and have now entered the second year of their three year funding programme. These programmes are making a huge difference under the following four headings:

- Respiratory Illness
  The Northern Airways Project is working in the community on a pulmonary programme which is helping people to manage their condition more effectively and to have a better understanding of their medication and its effects.

- Cardiac Illness
  The Cardiac Rehabilitation Programme in the EHSSB has become well established, offering a comprehensive rehabilitation programme to all those within the EHSSB who have experienced an acute cardiac event (often, but not always, heart attack). The programme also offers telephone support and home visits.

  NICHSA has also been a partner in a research project in the Omagh area, which has focused on rehabilitation. This project will be completed in late 2005. The Association has supported the development of a Heart Manual, which has proved to be very successful for the cardiac staff and the patients receiving the service. This has ensured that people living in geographically isolated areas can access the rehabilitation programme.

- Stroke
  All of the projects which support the Stroke Programme have been well developed and are in the first stage of evaluation. Satisfaction surveys have revealed the massive positive impact these programmes have had on clients and carers.
Health Promotion
The Health and Homelessness Project has surpassed all the expectations of NICHSA and its partners. This project has enriched and enhanced the lives of many homeless people and has given them back skills, expertise and a sense of worth. It has aided them in taking both control of their lives and their health.

The success of the Health Directorate in providing services would not have been possible without the dedication and commitment of the staff who have worked tirelessly to deliver a rapidly expanding range of programmes to the Northern Ireland public.

Arts Project
This project was funded by the Arts Council Access Lottery Fund. With the help of Open Arts, 300 members of our 15 Volunteer Stroke Schemes were able to participate in structured arts activities. They were facilitated by professional artists. Exhibitions were held in all parts of Northern Ireland. Many of the pieces represented the areas from which the clients came and also their memories. Pieces of art have been proudly displayed in various locations including premises used by the stroke schemes. It is hoped that some pieces will be displayed in the new NICHSA headquarters.

Woman’s Heart
As a result of the Woman’s Heart Campaign and the appointment of the Woman’s Heart Nurse, women from areas of high deprivation across Northern Ireland will now be offered blood pressure and cholesterol measurement free of charge. It is hoped that over the coming years the numbers of women afflicted by heart disease will fall as we deliver both early detection services and information about prevention.
Once again we have enjoyed a successful year of fundraising with £1.7 million being raised for our work.

**Legacy Income**

The highlight of the fundraising year would have to be the £880k which the Association received from legacies – the second year in a row that we received in excess of £700k. The success of our legacy campaign highlights not only the confidence and faith that the general public have in the Association but also the fact that we continue to have a high profile in terms of service provision, campaigning on health issues and research.

**Donations in Lieu of a Loved One**

The concept of donating money to NICHSA in lieu of flowers is also continuing to expand, with over £240k being contributed in this way. As a result of this high level of interest, we are now offering a special flower, the Treasured Memories Rose, to bereaved friends and families. This gives people the opportunity to remember a loved one with a lasting floral tribute, while at the same time helping others. The rose can be purchased only through the Association and all money raised will be used to fund our services.

As always, we are extremely grateful to our network of Fundraising Support Groups, which raised more than £240k for the first time in their history. The Support Groups, together with our colleagues in the Stroke Clubs, Stroke Schemes, Cardiac and Respiratory Groups continue to act as the foundation stone for winning support for our cause. The fundraising team is immensely grateful to every group in every corner of Northern Ireland for their continuing friendship, support and hard work.

The Corporate and Business sector has also demonstrated its continuing commitment by supporting our work. We are particularly grateful to Phoenix Natural Gas and the Northern Bank. We are also delighted with the support from companies through Give as You Earn, with over £125k being received.

The year was also marked by some very successful Special Events. One particular highlight was the Woman’s Heart Gala Ball, which netted £25,000 for our work. Its success was in no small part due to Don Allen OBE, who chaired the Gala Ball Committee, and Peter Lavery, who continues to be a tremendous supporter of NICHSA. I would like to pay special tribute to them both.
NICHSA Annual Accounts
Year ended 31st March 2004 – Expenditure Analysis

INCOMING RESOURCES

<table>
<thead>
<tr>
<th>Description</th>
<th>£</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEGACIES</td>
<td>867,579</td>
<td>34.2%</td>
</tr>
<tr>
<td>DONATIONS</td>
<td>382,551</td>
<td>15.1%</td>
</tr>
<tr>
<td>NEW OPPORTUNITIES FUND</td>
<td>303,757</td>
<td>12.0%</td>
</tr>
<tr>
<td>GRANTS &amp; CONTRACTS</td>
<td>295,409</td>
<td>11.7%</td>
</tr>
<tr>
<td>SUPPORT GROUPS</td>
<td>241,910</td>
<td>9.5%</td>
</tr>
<tr>
<td>DONATIONS IN LIEU OF FLOWERS</td>
<td>237,881</td>
<td>9.4%</td>
</tr>
<tr>
<td>HEALTH SCREENING</td>
<td>77,945</td>
<td>3.1%</td>
</tr>
<tr>
<td>OTHER RESTRICTED FUNDING</td>
<td>49,500</td>
<td>2.0%</td>
</tr>
<tr>
<td>INVESTMENT INCOME</td>
<td>45,711</td>
<td>1.8%</td>
</tr>
<tr>
<td>OTHER INCOME</td>
<td>31,114</td>
<td>1.2%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,533,357</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

RESOURCES EXPENDED

<table>
<thead>
<tr>
<th>Description</th>
<th>£</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>STROKE SERVICES</td>
<td>482,212</td>
<td>21.8%</td>
</tr>
<tr>
<td>FUNDRAISING &amp; APPEALS</td>
<td>387,700</td>
<td>17.5%</td>
</tr>
<tr>
<td>NEW OPPORTUNITIES FUND PROJECTS</td>
<td>334,710</td>
<td>15.1%</td>
</tr>
<tr>
<td>RESEARCH</td>
<td>293,837</td>
<td>13.3%</td>
</tr>
<tr>
<td>CORPORATE SERVICES</td>
<td>238,655</td>
<td>10.8%</td>
</tr>
<tr>
<td>PRIMARY CARE</td>
<td>171,342</td>
<td>7.7%</td>
</tr>
<tr>
<td>ADVOCACY</td>
<td>99,568</td>
<td>4.5%</td>
</tr>
<tr>
<td>CARDIAC SERVICES</td>
<td>66,385</td>
<td>3.0%</td>
</tr>
<tr>
<td>OTHER RESTRICTED FUNDS</td>
<td>37,738</td>
<td>1.7%</td>
</tr>
<tr>
<td>LOSS ON DISPOSAL OF ASSETS</td>
<td>30,745</td>
<td>1.4%</td>
</tr>
<tr>
<td>COUNSELLING &amp; WELFARE</td>
<td>23,964</td>
<td>1.1%</td>
</tr>
<tr>
<td>RESPIRATORY SERVICES</td>
<td>22,924</td>
<td>1.0%</td>
</tr>
<tr>
<td>DEPRECIATION</td>
<td>21,965</td>
<td>1.0%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,211,745</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

In the published accounts the income is shown net of a loss on the sale of fixed assets of £30,745. For clarity this is included in this schedule as resources expended.
Our Members

31st March 2005

Patron
Dorinda, Lady Dunleath

President
Dr WG Hastings CBE

Governance Board
Chairman
Dr R Lowry OBE

Honorary Treasurer
Mr I Lindsay

Members of Council
Mr D Allen OBE
Prof J Allen
Mr J Anderson
Dr N Armstrong
Sir Pat Armstrong KBE
Mr J Bell
Mr J Caldwell
Mr T Carney
Mrs C Cassidy
Mr A E Cecil
Mr J Collins
Mr E Davis
Dr M Donnelly
Mr G Duffy
Dorinda, Lady Dunleath
Mrs A Dunlop
Mr D Dunlop
Prof A Evans
Mr W Gibson
Ms R Glenn
Mr G Greenfield
Mr H Goodman OBE
Mrs M Graham
Prof B Hannigan
Dr I Hassan
Dr W Hastings CBE
Mrs A Hayes
Ms G Henry
Dr E Hodkinson
Mr H Hughes TD
Mr E Kavanagh
Mr P Lavery
Mr I Lindsay
Dr R Lowry OBE
Mr D Magill MBE
Dr J MacMahon
Mr E McCartan
Mrs J McCusker (up to 18/02/05)
Rev J McDowell
Ms C Mcltroy
Mr L Mcllvor
Mr A McKinley
B McLaughlin CBE
Mr M McLoughlin
Ms G McMacken
Miss E McNair OBE
Dr C Mulholland
Prof P Nicholls
Mr H O’Kane
Prof C O’Neill
Dr M Power
Dr J Purvis
Prof P Reilly
Mr G Roberts
Dr M Shields
Mrs E Sowney
Mrs D Stevenson
Prof J J Strain
Mrs M Taggart MBE
Mrs W Taggart
Dr F Tracey
Dr T Trinick
Dr T Trouton
Dr M Varma
Prof D Walsh
Mr C Warmington
Mrs J Whisodes OBE
Mrs C Wright (up to 7/10/04)

Senior Management Team
Chief Executive
Mr Andrew P Dougal OBE

Director of Health
Mrs Myrtle Neill

Director of Corporate Services
Mr John McCreary

Director of Fundraising
Mr Denny Elliott

Scientific Research Grants Committee

Chairman:
Prof Walter Holland CBE, London School of Economics
Dr Eric Brunner, University College London
Dr Avril Drummond, University of Nottingham
Prof Stuart Elborn, Belfast City Hospital
Dr Ivan Wiggam, Belfast City Hospital
Prof Hugh McKenna, University of Ulster
Prof Bernadette Hannigan, University of Ulster
Prof Deirdre Walsh, University of Ulster
Dr Pascal McKeown, Queen’s University Belfast
Prof Sean Strain, University of Ulster
Prof Alun Evans, Queen’s University Belfast
Prof Frank Dobbs, University of Ulster
Dr Karen Bailie, R&D Office Northern Ireland
Dr Ian Bradbury, University of Ulster
Dr Gary McVeigh, Queen’s University Belfast

We are also very grateful to those who voluntarily assist in the post implementation evaluation of research projects.

Scientific Research Grants Committee members give a very considerable amount of time and expertise to contribute to the objective assessment of research grant applications. Independent peer reviewers also donate their time and expertise to provide objective assessments of proposed projects.
By the time she’s 60 heart disease might be a thing of the past.

Every year in Northern Ireland, almost 10,000 people die of a chest, heart or stroke related illness. Over the past 60 years, we have worked tirelessly to alleviate the suffering of clients, funded research in our local hospitals and universities and helped to provide vital facilities and support. To continue our work, we rely heavily on legacies and voluntary donations. All money raised is spent helping people right here in Northern Ireland. With your help, more and more people can look forward to a healthy future.

Because your legacy is their future.

www.nichsa.com

For a leaflet on leaving a legacy to NI Chest Heart & Stroke Association please phone: 028 9032 0184 Alternatively, ask your solicitor for a leaflet.
The Northern Ireland Chest Heart & Stroke Association:
6th Floor Chamber of Commerce House
22 Great Victoria Street
Belfast
BT2 7LX

Tel: 028 9032 0184
Fax: 028 9033 3487

Helpline: 08457 697 299

Web: www.nichsa.com
Email: mail@nichsa.com

Please note this is our temporary address until July 2006

Our new address will be:
21 Dublin Road
Belfast
BT2 7HB

Telephone and fax number will remain unchanged.