



Conal's Christening



Anna at the top



Snowdon walk



Superbaby!



Zoey's British 10k

# Overview

**Antiphospholipid syndrome (APS)** is a life-threatening autoimmune disease that causes the blood to clot too quickly.

APS can cause low-grade symptoms including headaches and migraines, memory problems, joint pain and fatigue. It can also trigger potentially fatal symptoms such as deep vein thrombosis (DVT), blood clots on the lung, strokes and heart attacks.

In pregnancy, APS is the most important treatable cause of recurrent miscarriage and can increase the chance of stillbirth up to five times; it is also associated with other complications such as pre-eclampsia, low weight babies and premature births.

As of yet, we simply don't know why people develop APS, why some patients go on to have blood clots while others don't, why some women (but not all) have pregnancy problems and why some people are affected by symptoms more than others – vital research is needed before we can answer these questions.

However, we do know that being diagnosed as early as possible and treated correctly seems to have a direct bearing on how well people will feel in the future.

The national charity, APS Support UK, aims to achieve earlier diagnosis and offer support to anyone affected by APS through awareness, education and research.



*The world at my feet*



*A family outing...*



*Well-deserved bubbles!*

## Introduction and Message from the Chair

APS Support UK may be a small charity but thanks to our supporters, volunteers and team we continue to make progress in supporting patients and raising awareness of antiphospholipid syndrome (APS).

This year the charity launched two important medical education tools that aim to help busy doctors learn more about APS. The average length of time it takes for patients to receive a diagnosis of APS is currently three years, and the purpose of both these online training courses is to try and speed up this process. We will be busy promoting the courses over the next couple of years, and hope that we can raise the profile of APS among general practitioners.

We prioritised primary healthcare and focussed on courses for GPs following feedback from APS patients. We will continue to aim to raise awareness of APS amongst specific groups within the medical community and, again, ask the patients which areas they feel should be prioritised.

The charity team expanded in 2017 with a new part-time staff member starting with us in October and the role of APS Awareness Outreach worker role created. In addition, we have started recruiting for new trustees and hope to have one or two new faces on the board in 2018.

Next year should be an exciting year for the charity as we will be in a position to not only continue to fund important research through our family fundraising committee, the Louise Gergel Fellowship, but establish our first-ever Research Fund. The latter has been made possible by the extraordinary fundraising efforts of one particularly supporter to whom we are extremely grateful.

We know there is still much to be done and that funding will always be a challenge, but the charity is building on firm foundations and is determined to make a difference.



**Baroness Estelle Morris**  
Chair of APS Support UK

## Our Mission

APS Support UK aims to achieve earlier diagnosis and offer support to anyone affected by antiphospholipid syndrome (APS) through awareness, education and research.

As APS is a significantly under-recognised and under-diagnosed condition, our charity is determined to raise the profile of APS wherever possible.

# Early diagnosis **saves lives**

## Our Objectives

We aim to achieve our mission through these core objectives:

- raising awareness of APS in the medical community
- offering information and understanding to anyone affected by APS
- supporting research into APS

Although we are a small charity, we punch well above our weight and have achieved much so far; we always do our utmost to help those affected by antiphospholipid syndrome (APS).



*Working hard...*



*...to get there!*

## Are You Aware of APS?

Antiphospholipid syndrome (APS) is a life-threatening autoimmune condition that can cause strokes, heart attacks, DVTs and blood clots in the lungs.

In pregnancy, APS is the most important treatable cause of recurrent miscarriage, and it also associated with stillbirth, pre-eclampsia and premature babies.

**1 IN 6**  
STROKES

under the age  
of 50 are caused  
by APS

**1 IN 6**  
HEART  
ATTACKS

under the age  
of 50 are caused  
by APS

**3**  
YEARS

is the average  
time it takes for a  
diagnosis of APS

“

Earlier diagnosis  
and treatment  
of this common  
blood condition  
could prevent  
heart attack,  
stroke, DVT and  
miscarriage. ”

**34**  
YEARS

the average age a  
person is diagnosed  
with APS

**3**  
MISCARRIAGES

before women are  
tested for APS

**5**  
TIMES

the increased risk  
of stillbirth for a  
woman with APS

**EARLY  
DIAGNOSIS**

can prevent  
devastating  
consequences

**LUPUS**

is commonly  
associated with  
APS

# How we achieved our objectives:

## Raising awareness of APS in the medical community

### Launch of first Royal College of GPs online training course

Following extensive research with patients, other small charities and practising GPs, we launched the first-ever Royal College of GPs eLearning course on antiphospholipid syndrome in March 2017.

APS Support UK funded the £19,404 online course which can be accessed for free by all healthcare professionals, medical trainees and students throughout the UK.

The training course was developed by General Practitioners (GPs) working with our APS experts, under the guidance of the Royal College of GPs (RCGP). The RCGP will host the course on their website for two years until March 2019. It takes 30 minutes to complete, is free to register and 0.5 Continuing Professional Development points will be awarded on successful completion.

We already knew that, on average, it takes three years for someone to be diagnosed with APS but the results of our patient GP Awareness survey conducted in 2016 established the immediate need to focus on GP education. Also, we simply had to listen when 99% of the participants said it was important for our charity to raise awareness of APS to GPs!

Being a GP in today's NHS is not an easy task, appointment times are short, demand is very high and there has been an extraordinary growth in medical knowledge. We know that many of our patients have experienced difficulties in gaining a diagnosis or receiving treatment, and believe this online training course will really help raise awareness of APS in primary care.

### Creation of MIMS medical learning module

The Monthly Index of Medical Specialities (MIMS) has been providing healthcare professionals with information on prescription medicines since 1959, and MIMS Learning provides an educational website for GPs and other healthcare professionals.

In 2017, one of our medical trustees, Professor Anisur Rahman together with Dr Salma Ahmed, a GP from Tower Hamlets in London, wrote and produced the MIMS Learning module for the diagnosis and management of antiphospholipid syndrome. The module takes an hour to complete and provides 1.00 learning credits.

After completing this online module, healthcare professionals should be better able to:

- Recognise possible cases of antiphospholipid syndrome (APS)
- Understand the results of blood tests for antiphospholipid antibodies
- Manage APS in patients with previous thrombosis
- Manage pregnancy in patients with APS

As with the GP eLearning course, we believe that this primary education tool will help patients receive an earlier diagnosis of APS and that people will receive the best treatment possible.

### APS Awareness Outreach

We created a new role of an APS Awareness Outreach worker in 2017 and this part-time member of staff gave a talk entitled 'Living with APS – a patient's perspective' to the Institute of Biomedical Science Congress at the Birmingham International Conference Centre in September. The talk was very well received and we have been asked to speak at future events.

Offering information and understanding to anyone affected by APS



Kirsty Birney

## How we achieved our objectives:

### Offering information and understanding to anyone affected by APS

#### World APS Day

The APS community is growing, both here in the UK and globally so, on 9th June 2017 we held the first-ever World APS Day in conjunction with APS organisations from America, Spain, Canada, the Philippines, and the Netherlands to help foster international relations.

Our charity produced some pro bono infographics that were shared on social media as part of a global awareness campaign aimed at raising understanding of antiphospholipid syndrome and its impact on patients' lives.

World APS Day was a resounding success and the initiative reached over 80,000 people through our Facebook site alone.

#### LUPUS UK News and Views

Lupus is often the autoimmune condition most closely associated with APS; the first ever group of patients found to have antiphospholipid antibodies (aPL) were lupus patients.

Approximately 30%-40% of lupus patients have aPL, and around 15% of these people develop antiphospholipid syndrome which increases their risk of clotting.

Our charity has enjoyed close links with LUPUS UK for a number of years and they published two articles about APS in the 2017 summer edition of their News and Views magazine. The first was written by our medical trustee, Anisur Rahman, and the second by Thomas McDonnell, an APS researcher at University College London.

#### Patient leaflets

We produced a new patient leaflet with updated information from medical experts about antiphospholipid syndrome. The aim of this leaflet is to provide reliable information for anyone affected by APS. The leaflet is available on our website and in hard copy by request.

#### Arthritis Research UK booklet

The charity, Arthritis Research UK, contacted us at the end of 2017 to ask for our input for their new APS booklet. These booklets will be available from their website and will also be distributed throughout the UK in hospitals and clinics.

We assisted in two ways: by our medical trustee, Professor Anisur Rahman, giving expert advice about the condition and by the charity office reviewing the content for lay people. We also provided four APS patient case studies from our website – thank you to these brave patients for agreeing to share their stories to help raise awareness.



Eddie Mackay



Ann Sumra



Sangi Patel

# How we achieved our objectives:

## Supporting research into APS

### New Research Fund

Thanks to the extraordinary fundraising efforts of one particular supporter, Phil Godfrey who sadly lost his wife to APS, the charity was in a financial position to start awarding small grants to APS researchers.

We, therefore, established the principles to develop a Research Fund that will be managed by a Peer Review Panel comprising prominent APS specialists who will be able to offer their expert opinion on grant applications which, by their very nature, are often scientific and complex.

We are fortunate to have internationally renowned APS experts steering the panel. In addition to our Medical Vice Chairs, Professors David D'Cruz and Anisur Rahman, Dr Hannah Cohen, who was recently promoted to Professor of Haematology at University College London, has kindly agreed to Chair the panel.

To assist with the launch of the Research Fund, LUPUS UK kindly gave us permission to use their grant procedure guidelines so we have a good foundation to build ours on. The Research Fund should be up and running by late 2018.



Hard hats at the ready...



United we run!



Thank you Neil



Winchester winners

**Rivaroxaban in Stroke Patients with APS (RISAPS) trial**

Professor Hannah Cohen was awarded a grant from Arthritis Research UK in 2017 to carry out a trial looking at the suitability of rivaroxaban for APS patients who have had strokes—to be known as the RISAPS (Rivaroxaban in APS Patients with Stroke) trial.

As with the Rivaroxaban in APS (RAPS) trial, our charity manager has agreed to be the layperson on the Trial Steering Committee of this research project. The trial is due to start in 2018 and the charity will be assisting with the recruitment process.



*The Great APS Bake Off*



*Baildon Rugby Club are go!*



*What a woman!*



*Yorkshire Three Peaks*

# Our Impact in 2017



## Our Impact in 2017

How we help people with APS

### Website



It's a great website for us APS sufferers and one I have encouraged my employer to read so they can understand!

Emily

Over half of our website visitors were based in the UK, but we also helped people in America, Canada, Australia, Ireland, India, Brazil, Spain, New Zealand and South Africa.

The Symptoms of APS were the most popular pages, followed by our Living with APS section, then the Newly Diagnosed page and the APS Specialists Directory.

**33,858 visitors  
to our website**

### Social media

We've reached more people than ever before using social media.



**938,824 views  
increase of 14% 'Likes'  
from 4455 to 5070**

### Directory of APS doctors in the UK

We were very encouraged to see that the APS Specialists Directory is so useful for patients as it has taken time to build this unique national collection of over 130 APS doctors: in 2017 we added a further 17 consultants to the list thanks to patients sharing their information with us.



*Jump for joy*



**68,911 impressions  
increase of 6% from  
1449 to 1531**

# Our Impact in 2017

## Supporting Patients

We cannot provide specific medical advice as we would be negligent to do so, but we can signpost and guide patients so they feel less isolated and confused. We want to make people feel part of the APS community by offering reliable information and support.

Our social media sites provide people with up-to-date information about APS, and allow them to ask questions and discuss their health concerns both with the charity and other people. Patients now tend to contact us directly via email or social media, but we do also receive and answer telephone enquiries so are able to offer support in a variety of ways to suit everyone. We answered around 100-150 patient enquiries a month in 2017.

## Newsletter and e-shot

We send a newsletter three times a year to the 300 or so Friends of the charity, and a free e-shot containing important news and updates to a mailing list of around 2,000 at least six times a year.

## INR self-testing machine loan scheme

We run a small loan scheme where we lend patients an INR self-testing machine for a number of months. This is because the machines may not always be suitable for people with APS so could be an expensive wasted outlay at £300. The six machines in our scheme have all been donated thanks to other patients and their families.

## Collaboration

As we are such a small charity, our impact is strengthened through collaboration with other charities and campaign movements. In 2017 we were involved with the following charities, organisations and campaigns:

- Prescription Charges Coalition
- Thrombosis UK
- International Society on Thrombosis and Haemostasis
- World Thrombosis Day
- LUPUS UK
- Anticoagulation UK
- SANDS – Stillbirth and Neonatal Death Society
- Miscarriage Association
- Babyloss Awareness Week
- Stroke Association
- Different Strokes
- World Stroke Day
- World Prematurity Day
- National Migraine Centre
- Migraine Trust
- National Migraine Week
- APS Foundation of America
- Spanish APS Association
- APS ACTION

## Feedback from our Community

“

I am actually in tears now, I have been listened to for the first in more than a decade. After miscarriage number eight I asked to be sterilised. No follow up, no treatments, no answers after that. Thank you for being there and doing what you do x.

”

*Celine*

“

I am finally getting the help I need. This organisation is brilliant for information.

”

*Barbara*

“

This charity's website is amazing, informative and very user friendly. Highly recommend this Facebook page and its website for providing reliable, credible information you can trust.

”

*Tracey*

“

I love knowing there are others out there that relate to what I'm going through. Thank you, love this group.

”

*Mindi*

“

After suffering a thrombosis I was diagnosed with APS. Since then I try to learn as much about APS as possible. Together we can help to make this rare disease more visible and so there is more research. Thank you very much for your website!

”

*Alfonso*

“

Amazing organization. All the information was helpful and was important for me to understand more about this condition. Keep up the good work. We need you!

”

*Sofia*

“

Being newly diagnosed, I felt very alone. Even my doctor couldn't tell me much. I have found this group very helpful and supportive. I feel like I have someone to talk to that understands what I am going through. Thank you for being there.

”

*Linda*

# Thanks for all your Help and Support

We would like to say a huge thank you to everyone who has supported us throughout 2017. This includes generous donors, fabulous fundraisers, people buying from our online shop, patients sharing information about their experiences and doctors, charity ambassadors raising awareness of APS, the authors of articles in our newsletters and e-shots and every single person involved in the APS community.

We manage to keep our professional expenses down thanks to the pro bono services of a proof reader, two graphic designers, a solicitor and web designer. These experts all have links to APS and save the charity thousands of pounds every year.

We are also very lucky to have two leading APS experts as our Medical Advisors who write all our medical material and who are able to contact their peers, if necessary, on specific APS subjects.

We are very grateful to all of you as this has meant that APS Support UK has been able to continue helping people who are affected by antiphospholipid syndrome.



*We are so lucky...*



*...like these...*



*...to have supporters...*



*...on our side!*

## Legal and Administrative Information

Charity Registration Number:	1138116
Company Registration Number:	07268671
Date of Incorporation:	2010
Financial Year:	1st January 2017 - 31st December 2017
Registered Office:	The Orchard White Hart Lane Basingstoke Hampshire RG21 4AF
Trustees/Directors of the Organisation:	Baroness Morris of Yardley (Chair) Dr John Wolffe (Treasurer) Mrs Lynne Kirwin (Chief Executive) Professor David D'Cruz Professor Anisur Rahman Dr Andrew Pearson
Bankers:	Natwest Lambeth North Branch 91 Westminster Bridge Road London SE1 7ZB
Independent Examiner:	Mr Chahir Maizi FMAAT FCIE Independent Examiners Ltd Sovereign Centre Poplars Walberton West Sussex BN18 0AS

# Structure, Governance and Management

APS Support UK is a registered charity which was incorporated on 1st June 2010 and is governed by its memorandum and articles of association. APS Support UK is the trading name and working title of the Hughes Syndrome Foundation.

The trustees for the purposes of charity law and under the Company's articles are known as members of the Board of Trustees. As the charity is a company limited by guarantee, the trustees are also known as directors of the company.

The Board of Trustees meet four times a year to provide strategic direction and areas of activity for the charity. The trustees who served during the year are listed above.

When a vacancy occurs on the Board of Trustees, the Board will take the opportunity to review the skills sets of trustees, to identify specific skill sets that would strengthen the Board's overall effectiveness. New trustees are recruited via our newsletters/website or professional organisations such as Reach.

All trustees give of their time freely and no trustee remuneration was paid in the year. Trustee expenses amounted to £15.00 in 2017. Trustees are required to disclose all relevant interests and will withdraw from decisions where a conflict of interest arises.

Day-to-day operations and administration are delegated to the Management Team who provide regular reports to the trustees on performance and operations.

# Financial Review

## Risk Assessment

The trustees actively review the major risks which the charity faces on a regular basis and believe that maintaining the free reserves stated, combined with the annual review of the controls over key financial systems carried out on an annual basis will provide sufficient resources in the event of adverse conditions. The trustees have also examined other operational and business risks which they face and consider the systems in place for the day-to-day operation of APS Support UK to be appropriate to our current size, but are aware that as the charity grows we will need to develop and implement procedures and reporting regimes to mitigate the risks associated with running a charitable company.

## Reserves Policy

The trustees have decided to introduce a Designated Reserve in the Annual Accounts for 2017 onwards. The reserve will protect the charity from the risk of unforeseen emergency or other unexpected need of funds and illustrates to Trustees, Donors, Creditors, Employees, Beneficiaries and others that the charity is adequately financially equipped to meet its existing and planned commitments and obligations.

The Trustees acknowledge their general legal duty to spend income within a reasonable time of receipt and to do so in the charity's best interests and hence it is not the Charity's policy to hold excessive reserves above and beyond those that are prudent. Our reserve policy is in accordance with the provisions of CC19.

The Designated Reserve will demonstrate that:

- We hold sufficient funds to match the Trustees' plans.
- We are financially strong enough to continue operations over the next year.
- We would be able to meet our financial obligations and commitments if the charity were to close.

## The Calculation:

The Designated Reserve calculation will be made by the Charity Treasurer and agreed by the Charity Trustees.

The level of reserve will be reviewed and agreed at the date of the Annual Accounts submitted to the Charity Commission.

The level of reserve can be reviewed and adjusted at any time as agreed by the Trustees.

The reserve is made from Unrestricted Funds and is set at the highest of three measures:

1. The anticipated cost of agreed Trustees plans.  
This is the agreed forecast expenditure over the following year plus any agreed obligations and commitments that may extend beyond the year.
2. The charity's average annual expenditure of the previous five years as reported to the Charities Commission. This calculation may only be ignored if the trustees were to decide to permanently reduce the level of charity operations from previous years. In this case, the Trustees will provide a full explanation.
3. The cost of closure. This is the Trustee's assessment of current obligations and commitments if the charity were to be closed as soon as possible.

The Trustees reserve the right to agree a different reserve calculation at any time. Where a different calculation is used, the Trustees will provide full workings and full reasons in a note to the Annual Accounts submitted to the Charity Commission for that year.

# Financial Review

## Results for the Year

APS Support UK's total income in 2017 amounted to £74,903 compared to £102,008 the previous year – a decrease of around 27%. This decrease stems from the fact that, in 2016, we saw a huge increase of 120% in fundraising mainly due to support for the campaign to raise funds for the GP eLearning module. However, compared to 2015 when the income was £78,460, there is only a slight decrease of 4%.

Donations to the charity (excluding Gift Aid) increased by 21% from £23,207 in FY16 to £28,096 in FY17, while donations to the restricted Louise Gergel Fellowship memorial fund fell by 57% from £9,108 in FY16 £3,945 in FY17. Also, we did not receive any grants in 2017.

Subscriptions to the charity remained stable with a very slight increase of 0.5% from £5,593 in FY16 to £5,620 in FY17 while sales fell by 47% from £3,398 in FY16 to £1,788 in FY17; this is due to the fact that we launched new wristbands in 2016 and that fewer people bought Christmas cards in 2017.

The expenditure for charitable activities decreased by 25% from £81,903 in FY16 to £60,986 in FY17, this was mainly because we spent £20,404 on education and grants in 2016. With this aside, expenditure has remained stable for the last few years at around £60,000.

The net assets of the charity remain stable at £176,023 with a slight increase of 7% from £162,106 in FY16, with £55,438 restricted for research purposes.

### Restricted funds

The Louise Gergel Fellowship raised £3,945 throughout 2017 and we now have a total of £43,438 in this memorial fund that is restricted for research purposes only.

The charity also received £12,000 from private donors who requested that these funds be restricted to the new Research Fund we will be setting up in 2018. So, overall, we have £55,438 in restricted funds.

### Designated Funds

The income funds of the charity include the following designated funds which have been set aside from unrestricted funds by the trustees for specific purposes:

We designated and spent £251 for equipment for the new part-time Information and Support Officer who started in October 2017.

As stated in the Reserves Policy, the trustees have decided to introduce a Designated Reserve in the Annual Accounts for 2017 onwards so the amount of £77,000 can now be found listed under Designated Funds.

# Statement

## Financial Activities for the year ended 31st December 2017

### INCOMING RESOURCES

Income Resources From Generated Funds	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Donations & Legacies	3a	19,326	-	12,000	31,326	39,557
Activities for Generating Funds	3b	38,703	-	3,945	42,648	60,981
Investment Income	3c	809	-	-	809	926
Other Incoming Resources	3d	120	-	-	120	544
<b>TOTAL INCOMING RESOURCES</b>		<b>58,958</b>	<b>-</b>	<b>15,945</b>	<b>74,903</b>	<b>102,008</b>

### RESOURCES EXPENDED

Cost of Generating Funds	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Costs of Charitable Activities	4a	52,503	251	787	53,541	76,035
Cost of Generating Funds	4b	3,263	-	-	3,263	4,088
Governance Costs	4c	4,182	-	-	4,182	1,780
<b>TOTAL RESOURCES USED</b>		<b>59,948</b>	<b>251</b>	<b>787</b>	<b>60,986</b>	<b>81,903</b>

### RESOURCES EXPENDED

	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Net Incoming/ (Outgoing) Resources		(990)	(251)	15,158	13,917	20,105
Total Funds Brought Forward		114,655	7,171	40,280	162,106	142,001
Transfer Between Funds	5 & 6	(70,080)	70,080	-	-	-
<b>TOTAL FUNDS CARRIED FORWARD</b>		<b>43,585</b>	<b>77,000</b>	<b>55,438</b>	<b>176,023</b>	<b>162,106</b>

## Balance sheet as at 31st December 2017

	Notes	Unrestricted Funds	Restricted Funds	31st December 2017 TOTAL	31st December TOTAL 2016
<b>Fixed Assets</b>					
Tangible Assets	2	-	-	-	-
<b>Current Assets</b>					
Debtors & Prepayments	8	-	-	-	-
Cash at Bank and in Hand	7	121,650	55,438	177,088	163,156
<b>TOTAL CURRENT ASSETS</b>		121,650	55,438	177,088	163,156
Creditors: due within one year	9	1,065	-	1,065	1,050
<b>NET CURRENT ASSETS</b>		120,585	55,438	176,023	162,106
<b>TOTAL ASSETS less current liabilities</b>		120,585	55,438	176,023	162,106
<b>NET ASSETS</b>		120,585	55,438	176,023	162,106

### FUNDS OF THE CHARITY

	Notes	Unrestricted Funds	Restricted Funds	31st December 2017 TOTAL	31st December TOTAL 2016
General Funds		43,585	-	43,585	76,035
Designated Funds	5	77,000	-	77,000	7,171
Restricted Funds	6	-	55,438	55,438	40,280
		120,585	55,438	176,023	162,106

The Directors are satisfied that for the year ended on 31st December 2017 the charitable company was entitled to exemption from the requirement to obtain an audit under section 477 of the Companies Act 2006 and that no member or members have required the company to obtain an audit of its accounts for the year in question in accordance with section 476 of the Act. However, in accordance with section 145 of the Charities Act 2011, the accounts have been examined by an Independent Examiner whose report appears on page 19.

The Directors acknowledge their responsibility for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of accounts.

The accounts have been prepared in accordance with the provisions in Part 15 of the Companies Act 2006 applicable to companies subject to the small companies regime and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008).

The Directors acknowledge their responsibility for ensuring that the company keeps proper accounting records which comply with section 386 of the Act and for preparing financial statements which give a true and fair view of the state of affairs of the company as at the end of the financial year and if its profit and loss for the financial year in accordance with the requirements of sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to accounts, so far as applicable to the company.

## Notes to the financial statements for the year ended 31st December 2017

### 1. ACCOUNTING POLICIES

#### Basis of Preparation & Assessment of Going Concern

##### Basis of Preparation

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant notes. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2015) - (Charities SORP - FRS102) and the Charities Act 2011.

The Charity meets the definition of a public benefit entity under FRS102. Assets and liabilities are initially recognised at historical cost unless otherwise stated in the relevant accounting policy notes.

##### Assessment of Going Concern

Preparation of the accounts is on a going concern basis. The trustees consider that there are no material uncertainties about the Charity's ability to continue as a going concern.

##### Transition to FRS102

This is the first year the Charity has presented its results under FRS102 and Charity SORP (FRS102). The trustees have considered whether in applying the accounting policies required by FRS 102 and the Charities SORP FRS 102 a restatement of comparative items was not needed. No restatements of the previous period results were required.

#### Incoming Resources

##### Recognition of Incoming Resources

These are included in the Statement of Financial Activities (SOFA) when:

- the charity becomes entitled to the resources;
- the trustees are virtually certain they will receive the resources; and
- the monetary value can be measured with sufficient reliability

##### Incoming Resources with Related Expenditure

Where incoming resources have related expenditure (as with fundraising or contract income) the incoming resource and related expenditure are reported gross in the SOFA.

##### Grants and Donations

Grants and Donations are only included in the SOFA when the charity has unconditional entitlement to the resources.

##### Tax Reclaims on Donations and Gifts

Incoming resources from tax reclaims are included in the SOFA at the same time as the gift to which they relate.

##### Contractual Income and Performance Related Grants

This is only included in the SOFA once the related goods or services has been delivered.

##### Gifts in Kind

Gifts in kind are accounted for at a reasonable estimate of their value to the charity or the amount actually realised. Gifts in kind for sale or distribution are included in the accounts as gifts only when sold or distributed by the charity. Gifts in kind for use by the charity are included in the SOFA as incoming resources when receivable.

## Notes to the financial statements for the year ended 31st December 2017

### Volunteer Help

The value of any voluntary help received is not included in the accounts but is described in the trustees' annual report.

### Investment Income

This is included in the accounts when receivable.

### Expenditure and Liabilities

#### Liability Recognition

Liabilities are recognised as soon as there is a legal or constructive obligation committing the charity to pay out resources.

#### Governance Costs

Include costs of the preparation and examination of statutory accounts, the costs of the trustees' meetings and cost of any legal advice to trustees on governance or constitutional matters.

#### Grants with Performance Conditions

Where the charity gives a grant with conditions for its payment being a specific level of service or output to be provided, such grants are only recognised in the SOFA once the recipient of the grant has provided the specified service or output.

#### Grants Payable without Performance Conditions

These are only recognised in the accounts when a commitment has been made and there are no conditions to be met relating to a grant which remain in control of the charity.

#### Support Costs

Support costs include central functions and have been allocated to activity cost categories on a basis consistent with the use of the resources, eg. allocating property costs by floor areas, or per capital, staff costs by the time spent and other costs by their usage.

#### Tangible Fixed Assets

Tangible fixed assets for use by the charity, these are capitalised if they can be used for more than one year, and cost at least £1,000. They are valued at cost or, if gifted, at the value to the charity on receipt.

### Investments

Investments quoted on a recognised stock exchange are valued at market value at the year end. Other investment assets are included at trustees' best estimate of market value.

### Depreciation Expenses

Depreciation is calculated at a rate to write off the cost of tangible fixed assets over their estimated useful lives. The rates applied per annum are as follows:

#### 2. TANGIBLE FIXED ASSETS

The Charity held no fixed assets investments during this or the previous financial period.

There are no annual commitments under non-cancelling operating leases and no capital commitments. (2016: None)

## Notes to the financial statements for the year ended 31st December 2017

### 3. INCOMING RESOURCES

a) Donations & Legacies	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Gifts & Donations	5 & 6	13,397	-	-	13,397	32,315
Gift Aid Tax Recovered		5,929	-	-	5,929	5,242
Grants Received		-	-	12,000	12,000	2,000
		19,326	-	12,000	31,326	39,557

b) Activities for Generating Funds	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Fundraising Income		31,304	-	3,945	35,249	51,990
Membership Renewals		5,620	-	-	5,620	5,593
Stock Sales		1,779	-	-	1,779	3,398
		38,703	-	3,945	42,648	60,981

c) Investment Income	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Interest		809	-	-	809	926
		809	-	-	809	926

d) Other Incoming Resources	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Sundry Income		120	-	-	120	544
		120	-	-	120	544

## Notes to the financial statements for the year ended 31st December 2017

### 4. RESOURCES EXPENDED

a) Costs of Charitable Activities	Notes	Unrestricted Funds £	Designated Funds £	Restricted Funds £	TOTAL 2017 £	TOTAL 2016 £
Equipment Costs	5	-	251	-	251	769
Events & Activities	6	-	-	-	-	4,074
Gifts & Grants	6	-	-	-	-	21,554
Insurance Costs		628	-	-	628	-
Office Costs		2,694	-	-	2,694	1,052
Publicity & Advertising		2,248	-	-	2,248	1,525
Rent Costs		3,840	-	-	3,840	3,728
Salaries & N.I	10	42,991	-	-	42,991	42,083
Sundry Expenses		102	-	787	889	1,250
		52,503	251	787	53,541	76,035

b) Costs of Generating Funds	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Fundraising Costs	6	1,595	-	-	1,595	2,328
Stock Purchases		1,668	-	-	1,668	1,760
		52,503	251	787	53,541	76,035

c) Governance Costs	Notes	Unrestricted Funds	Designated Funds	Restricted Funds	TOTAL 2017	TOTAL 2016
Bank Charges	6	-	-	-	-	216
Legal & Professional Fees		3,117	-	-	3,117	514
Independent Examiners Fee	9	1,065	-	-	1,065	1,050
		4,182	-	-	4,182	1,780

## Notes to the financial statements for the year ended 31st December 2017

### 5. DESIGNATED FUNDS

	Notes	Balance 01-Jan-17 £	Income £	Expenditure £	Transfers £	Balance 31-Dec-17 £
Office Equipment		7,171	-	251	(6,920)	-
Designated Reserve Fund	15	-	-	-	77,000	77,000
		7,171	-	251	70,080	77,000

The designated funds of the charity are wholly represented by cash reserves and are to be expended as specified above.

### 6. RESTRICTED FUNDS

	Notes	Balance 01-Jan-17 £	Income £	Expenditure £	Transfers £	Balance 31-Dec-17 £
Louise Gergel Fund		39,493	3,945	-	-	43,438
Day		787	-	787	-	-
Research Fund		-	12,000	-	-	12,000
		40,280	15,945	787	-	55,438

The restricted funds of the charity are wholly represented by cash reserves and are to be expended as specified above.

### 7. CASH AT BANK AND IN HAND

	31-Dec-17 £	31-Dec-16 £
Cash at Bank & in Hand	177,088	163,156
	177,088	163,156

### 8. DEBTORS & PREPAYMENTS

	31-Dec-17 £	31-Dec-16 £
Sundry Debtors	-	-
	-	-

### 9. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	31-Dec-17 £	31-Dec-16 £
Independent Examiners Fees	1,065	1,050
	1,065	1,050

## Notes to the financial statements for the year ended 31st December 2017

### 10. STAFF COSTS AND NUMBERS

	2017	2016
Gross Wages and Salaries	39,429	38,703
Employer's National Insurance Costs	3,215	3,380
Pension Contributions	347	-
	42,991	42,083

Employees who were engaged in each of the following activities:	2017 Total	2016 Total
Activities in furtherance of organisation's objects	2	2

The charity operates a PAYE scheme to pay all employed members of staff and no employees received emoluments in excess of £60,000. (2016: None)

### 11. RECONCILIATION OF MOVEMENT ON CAPITAL AND RESERVES

The Company is Limited by Guarantee and is a Charity registered with the Charity Commission number 1138116 and is not, therefore, subject to Corporation Tax and does not have a Share capital.

	2017	2016
Profit / Deficit for the financial year	13,917	20,105
Other Recognised Gains	-	-
	13,917	20,105
Balance Brought Forward	162,106	142,001
Closing Funds at 31st December 2017	176,023	162,106

### 12. PAYMENTS TO DIRECTORS AND RELATED PARTIES

No payments were made to Directors or any persons connected with them during this financial period. No material transaction took place between the charity and a Director or any person connected with them.

### **13. RISK ASSESSMENT**

The Directors actively review the major risks which the charity faces on a regular basis and believe that maintaining the free reserves stated, combined with the annual review of the controls over key financial systems carried out on an annual basis will provide sufficient resources in the event of adverse conditions. The Directors have also examined other operational and business risks which they face and confirm that they have established systems to mitigate the significant risks.

### **14. PUBLIC BENEFIT**

The charity acknowledges its requirement to demonstrate clearly that it must have charitable purposes or 'aims' that are for the public benefit. Details of how the charity has achieved this are provided in the Directors report. The Directors confirm that they have paid due regard to the Charity Commission guidance on public benefit before deciding what activities the charity should undertake.

### **15. RESERVES POLICY**

The trustees have decided to introduce a Designated Reserve in the Annual Accounts for 2017 onwards. The reserve will protect the charity from the risk of unforeseen emergency or other unexpected need of funds and illustrates to Trustees, Donors, Creditors, Employees, Beneficiaries and others that the charity is adequately financially equipped to meet its existing and planned commitments and obligations.

The Trustees acknowledge their general legal duty to spend income within a reasonable time of receipt and to do so in the charity's best interests and hence it is not the Charity's policy to hold excessive reserves above and beyond those that are prudent. Our reserve policy is in accordance with the provisions of CC19.