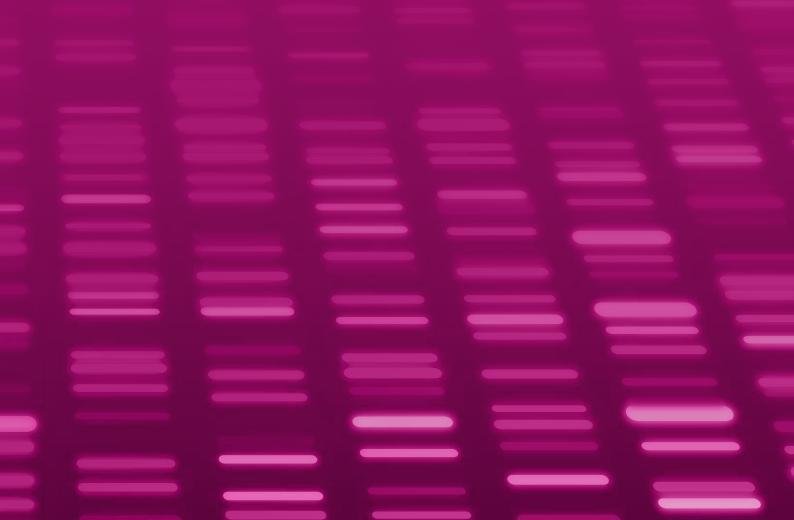


## **Prevent Breast Cancer**

## **Annual Report and Financial Statements**

For the year ended 31 March 2023



## **Contents**

#### Trustees' Annual Report

Foreword from Lester Barr MBE	3
A Message from our Chairman	5
About Us	6
Charitable Activity	8
Our Research Programme	10
Our Philosophy	11
Research Strategy	12
Research Plans for 2023-2024	
Current Research Projects	15
The National Breast Imaging Academy	18
Supporting Patients and Professionals at the Nightingale Centre	20
Awareness of Breast Cancer	22
Addressing Health Inequalities	24
Our Year in Review	2 <i>6</i>
Strategic Aims and Objectives	32
Financial Review	34
Structure, Governance and Management	38
Reference and Administrative Details	4C
Statement of Trustees' Responsibilities	42
Financial Statements	
Independent Auditor's Report	44
Statement of Financial Activities	47
Balance Sheet	48
Statement of Cash Flows	5C
Notes to the Financial Statements	51

### Foreword from Lester Barr MBE

The year 2023 has been a big one for me, as it was the year I decided to step aside from my role as Chairman of Prevent Breast Cancer. We have a fantastic team of Trustees, fundraisers and researchers and it is with great pleasure that I have handed over the role of Chairman to Eamonn O'Neal.

However, I am not stepping away entirely!

The charity and the research team have achieved a great deal over the last 25 years and we will be publishing a booklet in lay language to explain where we are up to. I have been amazed at how much has been achieved already as we work towards the longterm vision of complete breast cancer prevention. As you know, the problem cannot be solved overnight and we still have much work to do, so I will therefore continue to be part of the team focussing on the research that still lies ahead.

I'm delighted to say that we have now been able to reopen our pipeline of new research projects. Under the leadership of Dr Emma Woodward and Professor Gareth Evans, we can announce that two exciting new projects related to BRCA gene mutations are planned. The first of these will start shortly, and is a search for hidden mutations around the BRCA genes. There are still many families affected by familial breast cancer in whom we have not yet been able to find a known gene mutation. It looks as if some of these hidden mutations occur in an area known as non-coding DNA, and this requires a different type of research to discover them. We hope this will be enormously fruitful in our goal of identifying every single genetic abnormality that can lead to breast cancer, so that more families in the future can be given early warning.

As well as this, we have also awarded a further five research grants this year, which you can read more about in the report later on. These look at different potential ways of preventing breast cancer, each of which is important in its own way.

Finally, I would like to pay tribute to the enormous role that our Directors of Research, Professors Tony Howell and Gareth Evans have played over the last three decades in setting up genetic

research, family history clinics, large clinical trials and pioneering research in the field of breast cancer prevention. They have been of enormous personal support, and support to the whole of the Prevent Breast Cancer team. Like myself, they are handing over these roles now to the next generation of researchers, and we look forward to working closely with Cliona Kirwan, Emma Woodward, Sacha Howell, Hannah Harrison, Rob Clark, Andrew Gilmore, James Harvey, Ashu Gandhi, Michelle Harvie and many others as they lead our research efforts for the future. Tony and Gareth will continue to support the team in their roles as Medical Research Patrons. The team is stronger than ever, and we look forward to the future with optimism.

Lester Bar (D Burn)

Lester

Co-founder and Honorary
President of Prevent Breast Cancer



## A Message from our Chairman

I was delighted to accept a position as a Trustee of Prevent Breast Cancer in 2022, at a time when our family was experiencing its own breast cancer journey. I was also highly honoured to be voted in as Chairman at the beginning of 2023 and I hope Prevent Breast Cancer will benefit from my experience as a charity Trustee and chair in other areas.

As part of the development of the charity, we arranged and attended an independently moderated event which concentrated on governance, strategic development and the ongoing effectiveness of the Board. It was acknowledged during that session that the Board remains fully committed to the charity's objects and the growth of the charity as we deliver our objects. Following the strategic review, to consolidate and enhance the current governance arrangements, we created a structure within which there are new, delegated committees to oversee specific areas of activity and to further support the executive's operational commitments. This has had the added benefit of empowering Trustees in respect of chairing the committees, building upon and benefitting from individual experience and expertise.

The refreshed Board structure has allowed the charity's co-founder, Lester Barr MBE, to fulfil our succession planning aspirations. Remaining as a Trustee, Lester now also holds the title Honorary President, having stepped aside as Chairman. Co-founder Pam Glass, whilst also remaining as a Trustee, has become Honorary Vice-President. I feel these honorary positions reflect our gratitude for the significant work that Lester and Pam have done over the past 26 years.

This year has seen further work in seeking and securing funding for the National Breast Imaging Academy (NBIA), which remains our capital campaign focus. To that end a number of stakeholder networking events have been held, including one at The House of Commons, co-hosted by Mike Kane MP, Member for Wythenshawe and Sale East. We are indebted to Mike Kane and his team for their ongoing and significant support.

I would like to thank the Trustees for their commitment, their wisdom and their dedication, all of which contribute to the safe and effective governance of the charity. I would also like to acknowledge the impressive work done by the Chief Executive, Nikki Barraclough, supported by her leadership team and colleagues, and thank her for her work, not only on a day-to-day operational basis, but also for her vision and planning implementation.

The Board is extremely grateful to all our supporters, patrons and ambassadors, who tirelessly remain loyal and make significant contributions to Prevent Breast Cancer in so many ways.



Eamonn O'Neal DL Chairman of Trustees





### **About Us**

#### The Need

- Breast cancer is the most common cancer in the UK
- Each year 55,920 people in the UK are diagnosed with breast cancer. Approximately 11,499 a year people lose their lives to the disease
- Breast cancer is the biggest cause of death in women aged between 35 and 49
- In the UK, rates of breast cancer in women have increased by 24% in the last 30 years
- In 2021, the government spent just 4.7% on preventive care and early detection of all diseases (excluding Covid pandemic management). We believe more needs to be done, which is why the research we undertake is absolutely vital

## Our Mission: Predict, prevent, protect

Prevent Breast Cancer's mission is to make breast cancer a preventable disease for future generations by funding ground-breaking research into the prediction and prevention of the disease. Breast cancer is the most common cancer in women in the UK. Each year over 55,920 individuals are diagnosed – that equates to 153 people a day. And every year we lose 11,499 people to this disease.

Prevent Breast Cancer is located in The Nightingale Centre and Prevent Breast Cancer Research Unit in Greater Manchester, the construction of which the charity raised £2 million for and which opened in 2007. The Centre houses the services of the Greater Manchester NHS Breast Screening Programme and Family History Risk and Prevention

Clinic. It also acts as a base for several of our researchers, whose innovative clinical studies aim to more accurately predict those at increased risk of breast cancer, so that preventative interventions can be offered to these women. Our home within the Centre ensures that there is a diverse cohort of breast cancer patients available to participate in our research.

Prevent Breast Cancer is predominately a research-based charity supporting projects related to the prediction, early diagnosis and prevention of breast cancer. A registered charity since 1997, since that time Prevent has awarded £4.9 million in grants to clinical and laboratory breast cancer prevention research and has contributed a further £3.64 million towards the running of the Centre and to prevention education and health awareness.

http://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breast-cancer https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthcaresystem/bulletins/ukhealthaccounts/latest





#### **Public Benefit**

Our Trustees are aware of the Charity Commission's guidance on public benefit. As the work of the charity and the funds it raises are entirely dedicated to research into breast cancer early diagnosis, screening and prevention, the Trustees are of the view that the charity meets the public benefit test criteria.

#### **Grant Making Policy**

Our grant making seeks to further the prediction, prevention and early diagnosis of breast cancer, particularly in terms of supporting the research team working within The Nightingale Centre and the Manchester Breast Centre. Prevent Breast Cancer is also a non-commercial partner of the National Institute of Health Research.

Grant applicants are required to complete a Prevent Breast Cancer grant application form and submit this to our Scientific Advisory Board (SAB), which assesses the scientific value and suitability for funding of each project. The Board is chaired by Professor Cliona Kirwan – a clinician scientist in surgical oncology and consultant oncoplastic breast surgeon.

Applications are assessed based on the research plan, clear relevance to breast cancer research, expected outcomes and the potential impact on breast cancer prevention. Applications which do not address Prevent Breast Cancer's criteria are not considered for funding, and the SAB makes a decision regarding eligibility of each application individually.

We have a rigorous system in place to review grant applications. Once received, each application above £30,000 is reviewed internally by a member of the SAB, who must be independent of the project. If deemed suitable, the application is then sent to at least two external reviewers, who are independent to Prevent Breast Cancer and the host institution. Each reviewer will complete a review form and give a final summary score. A project has to be achievable and the reviewer has to explain why a project is recommended.

Funding requests between £10,000 and £30,000 are

reviewed internally by three members of the Scientific Advisory Board, who are each independent of the project.

Applications must clearly address our core areas of prediction, prevention or early detection in order to be considered.

The expert reviews are then presented to the Board of Trustees, which takes the final decision on whether to provide funding. If the Chair or any other SAB member has a conflict of interest on an application, they are excluded from the discussion and decision-making process in order to ensure complete impartiality.

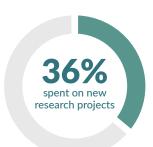
Funding requests of £10,000 and under – for small pilot projects, requests for consumables and/or equipment, or for a contribution to an existing active research study – will not be sent for peer review. They will be assessed for suitability by a member of the Scientific Advisory Board and a decision about whether to fund these requests will be made by the Board of Trustees.

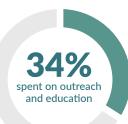
Prevent Breast Cancer does not fund experiments on animals.

## **Charitable Activity**

Over the past year, we have continued to raise funds to support our active research studies and generate income for the building of the National Breast Imaging Academy (NBIA). Alongside this, we have continued to operate our coffee bar at the Nightingale Centre, as well as developing our ongoing health promotion activity. This activity seeks to raise awareness of breast cancer signs, symptoms and risk factors and the importance of breast screening among women, aiming to reach as wide a cross section of society as possible.

## We spent £838,089 on Charitable Activity









The charity holds

£1,163,109

in restricted reserves for the building of a National Breast Imaging Academy and to fund two PHD projects specifically related to genetic research We awarded £259,172 to five new innovative pilot research projects

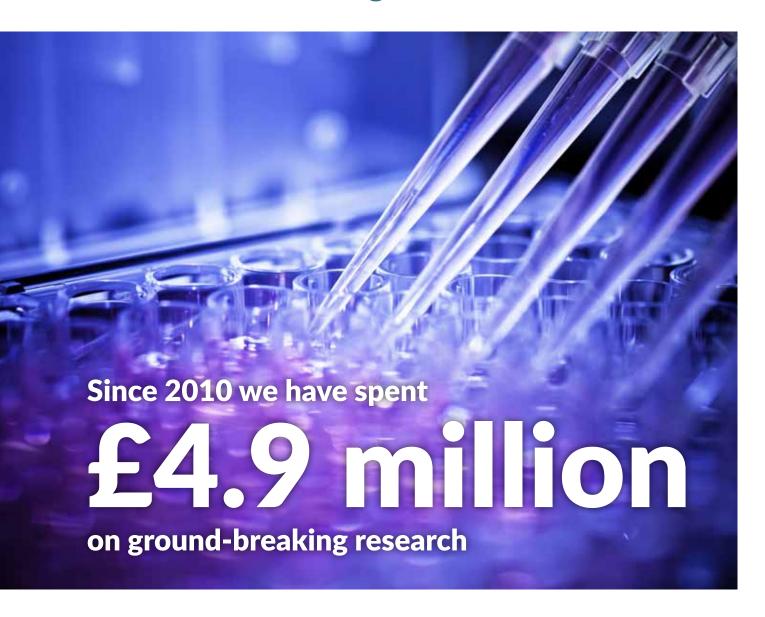




# over 300

pieces of media coverage for and about the charity, including on BBC 1, Sky News, BBC News and ITV.

## **Our Research Programme**



Our scientists have published

over 250

research papers in peer reviewed journals since August 2015

Our work is conducted in partnership with numerous highly regarded research facilities throughout the UK. Regionally, our researchers are part of a collaborative group of scientists and clinicians known as the Manchester Breast Centre. This virtual centre brings together leading experts who share our vision of making breast cancer a preventable disease. They collaborate nationally and internationally with world leaders in cancer prevention, enriching our work with their collective knowledge.

#### **Our Philosophy**

There are many labs and pharmaceutical companies around the world researching new drugs and treatments for breast cancer. For Prevent Breast Cancer, our philosophy is different - we believe that prevention is better than cure. Anyone who has been through the experience of breast cancer will tell you that treatments such as surgery and chemotherapy can be incredibly gruelling. Prevention and early diagnosis must be the way forward to minimise that trauma and to make sure everyone survives. For that reason, Prevent Breast Cancer is

the only UK breast cancer charity funding ground-breaking research solely aimed at preventing the disease for future generations.

The obvious place to start in our vision to prevent breast cancer is to address all the causes and risk factors one by one. But there is no one single easy way to do this because of these multiple risk factors all working together. Each risk factor has to be addressed one by one and in combination. Tackling the risk factors is the first challenge, but another important prevention strategy is early diagnosis through screening. Screening can pick up pre-cancer changes before an invasive cancer

has begun and can detect small breast cancers at Stage 1 before they become life-threatening. Included within this strategy is the concept of 'prediction'. We now have the technology to predict which women are at particularly high risk of the disease and so by offering regular screening to this group we can prevent or detect early many more cancers.

Another prevention strategy is to predict and then to prevent breast cancer in high-risk women through preventative risk-reducing drugs. There are already three drugs approved by NICE in the UK, each taken as a daily tablet, with more in the pipeline for approval.

## For these reasons, our research strategy is targeted and specialist and involves four main areas working in parallel:



## Genetic risk factors

Gene mutations and Single Nucleotide Polymorphisms (SNPS)



## Screening and early detection

Density research, screening techniques and risk prediction models



## Lifestyle and environmental risk factors

Diet, exercise, hormones, environmental chemicals



## Risk reducing drugs

Clinical and lab research using nonanimal models.

We call these our four pillars of research.

#### Predicting who is at risk

Women encounter a number of factors when it comes to their risk of developing breast cancer. At Prevent Breast Cancer, we want to further refine risk predicting mechanics so that women can be preventatively assessed and treated based on their personal risk of developing the disease.

In the past, you will have read that the average risk for a woman in the UK to develop breast cancer was "1 in 9", or "1 in 8", or even "1 in 7". These numbers are, in fact, somewhat misleading.

We now know that the risk of an individual woman getting breast cancer is a spectrum.

At one end of the spectrum are those women who are carrying a very high risk gene such as BRCA1 or BRCA2, whose risk can be as high as 80% (4 in 5 or 8 in 10) – which is effectively very close to one in one!

At the other end of the scale are women who, as a result of their genetics and lifestyle, have a low risk of around 1 in 50. Most women are somewhere in the middle, and in fact for the average woman who does not carry a highrisk gene fault and has no family history of breast cancer, the risk is probably around 1 in 20.

We are now in a position where we can fairly accurately predict an individual woman's risk of developing breast cancer in their lifetime. The most accurate method involves taking a gene test (of which there are two types - one for high and moderate risk genes, and one for common

genetic variants), having a low dose mammogram to assess breast density, and then assessing lifestyle issues - and this work has been one of the most important achievements of our research team over the last decade under the leadership of Professor Tony Howell and Professor Gareth Evans. Accurately predicting who is at risk of breast cancer is a very important step towards prevention of the disease.

#### **Research Strategy**

Breast cancer is not caused by any one factor. Rather, it seems to be a combination of the genes you are born with, the environment in which you grow up, and several lifestyle factors. For that reason, prevention research is not focused on any one thing – rather, it must cover a number of different areas.

As mentioned earlier, our four pillars of research are: -

Gene Research - This researches the major gene mutations that can cause breast cancer, and in addition looks at tiny gene variations called SNPs that can also have a major impact on risk.

Early Detection and Improved
Screening - Breast screening
through regular mammograms
already saves lives. Our research
into risk prediction suggests that
screening can be further improved
by targeting those at high risk.
It also raises the possibility of
being able to start screening at a
younger age. There are still several
problems to overcome, such as
the best technology to screen
women with high breast density,

and those of a younger age, and to detect those types of breast cancer which are difficult to see on a mammogram.

Lifestyle and Environmental Risk Factors - We know of several lifestyle factors, which are particularly prevalent in western countries, that increase risk. Research into how these risk factors can be modified could reduce risk for the whole population of the UK.

Risk Reducing Drugs - There are already three drugs (taken as a daily tablet) which are approved for breast cancer prevention in the UK: Tamoxifen; Anastrozole; and Raloxifene. These can be prescribed for women who are predicted to be at high risk, but each has side effects, and so our intention is therefore to continue looking for alternatives.



## In collaboration with the Manchester Breast Centre, Prevent Breast Cancer scientists are working towards achieving the following goals by 2030:

#### **Gene Research**

Investigating how gene mutations and variations can affect someone's risk of developing breast cancer.

- To identify all the remaining undiscovered high risk and intermediate risk genes
- To identify all the genetic variations (SNPs) linked to breast cancer in every ethnic group and community across the country and internationally
- To identify new tests for risk prediction, such as polygenic risk scores and new biomarkers.

## **Early Detection and Screening**

Identifying new and unique screening methods to ensure early and accurate diagnoses.

- To improve the accuracy of screening through new technology
- To improve early diagnosis for women with high breast density and for cancers missed by current technology
- To improve our understanding of why breast density increases the risk of developing breast cancer
- To develop tools that accurately predict an individual's risk of breast cancer
- To identify more targeted ways to provide breast screening adapted to an individual's predicted risk

- To improve uptake of screening, including by collaborating with the NHS and grassroots organisations
- To develop new approaches for screening and prevention in young women before the age of eligibility for breast screening (currently age 50 in the UK).

#### **Risk Reduction**

Research into risk factors that can be modified to lower breast cancer risk.

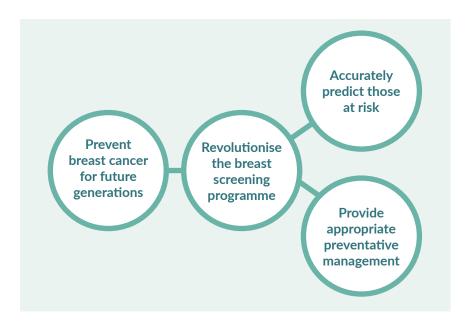
- To discover the mechanisms through which known risk factors impact the onset of breast cancer
- To identify mechanisms for reducing known risk factors, such as diet, exercise and lifestyle interventions
- To identify biomarkers of response to risk reducing measures

 To develop a lifestyle management programme that is effective in reducing risk of breast cancer.

#### **Preventative Drugs**

Investigating drugs that can be used to reduce the risk of breast cancer

- To develop models for testing new and re-purposed drugs for the purpose of prevention
- To identify tests of responsiveness to preventative drugs
- To support clinical trials of new or re-purposed drugs
- To promote the awareness of drugs currently available for prevention



## Research Plans for 2023-2024

In December 2022, the Trustees agreed to commit to five new innovative research projects, which the charity team is now proactively raising funds for.

Our funding call specifically asked for projects focussed on methods of improving breast screening and prevention strategies such as preventative drugs, lifestyle prevention and surgical prevention. Another area of interest remains breast cancer prevention and early diagnosis in under-served populations.

We also aim to make use of the legacy of £487,500 we received in 2022 – which is restricted to fund two PHD research projects into how the BRCA genes work and why they cause such a dramatic increase in breast cancers. This work will be supervised by Emma Woodward and Professor Gareth Evans and will form part of the Doctor Alan H. Gowenlock PHD Studentship Award. The first project under this programme has been confirmed, and will look for hidden mutations.

To date, the success of Prevent Breast Cancer's Research Strategy would not have been possible without the world-renowned Professors Tony Howell and Gareth Evans, who have both been instrumental in the success of the charity and have been principal investigators on numerous Prevent Breast Cancer funded research projects. We are delighted to offer them both the title of Honorary Research Patrons.

#### **Research Projects**

#### **Gene Research**

## Breast cancer in younger women

This study aims to improve risk estimates for breast cancer in younger women, for whom cancer is typically more aggressive and has differing risk factors to postmenopausal breast cancer. Using genetic testing and investigating the relationship between a person's inherited genetic makeup and their tumour infiltrating lymphocytes (TILs), this study hopes to develop a new polygenic risk score, which will aid the development of new therapies that harness the immune system and improve outcomes for younger breast cancer patients.

**Project Lead:** Dr William Tapper, University of Southampton.

## The Search for Hidden Mutations –

part of the Doctor Alan H. Gowenlock PHD Studentship Award.

It has been known for many years that breast cancer can run in families. A breakthrough came in the 1990s when gene research successfully mapped out all of the DNA encoded within human cells and discovered the genes most frequently causing these familial breast cancers - BRCA1 and BRCA2.

Since then, we have found other breast cancer genes as well (PALB2, PTEN, TP53, ATM, CHEK2). But a problem remains. There are still families with multiple breast cancers in the family tree for whom all the gene tests are negative; their underlying gene fault remains undiscovered. It seems like there should be a BRCA3, but it has proved elusive. Prof Gareth Evans, Professor of Clinical Genetics (Prevent Breast Cancer Research Unit, Manchester) recently concluded that no BRCA3 gene would ever be found. Instead, in his opinion, the undiscovered gene mutations might be hidden somewhere within or around the genes we already know about.

Recent research in Manchester had already discovered such hidden breast-cancer-causing DNA mutations in three breast/ ovarian cancer families. So where might these undiscovered mutations be hidden? Standard DNA testing looks at all the DNA code that is used as instructions to make the proteins within our cells. The instructions are bundled together in separate chunks called 'exons'. These chunks of DNA are separated from each other by segments of non-coding DNA called 'introns'. The gene is like an instruction manual: the exons are the chapters, and the introns are where the page is turned between each chapter. These introns, and other non-coding areas of DNA, were once thought to be useless 'junk DNA'.



As each year passes, more is being discovered about this DNA and it turns out that the so-called junk DNA is not junk at all, but in fact has many important roles in controlling how genes are regulated. Standard DNA testing just looks at the exons. DNA mutations within non-coding areas such as introns are hidden from testing: and that is where the recent discovery of cancer-causing mutations has been made, in non-coding DNA just in front of the first exon of BRCA1.

The search is on now for other hidden DNA mutations. This new research will take place in the labs of Miriam Smith and Emma Woodward at the University of Manchester, with the aim of finding more mutations in noncoding DNA. This will directly help in the diagnosis of breast and ovarian cancers in families where no mutation has yet been found. The research also aims to establish how the DNA intron mutations affect the gene and stop it from working, which could eventually lead to new treatment strategies.

**Project Leads:** Dr Miriam Smith and Dr Emma Woodward, University of Manchester.

## Early detection and screening

## Predicting outcomes using microsimulation

This project looks at improving early detection and breast cancer screening by using microsimulation to predict outcomes of stratified screening. Microsimulation are computerised analytical tools that can perform analysis. The models

can be used to answer complex questions about screening without the need for costly and impractical clinical trials. This research has the potential to fine-tune the stratification of screening based on breast density, building on current trials investigating screening strategies in women with high breast density.

**Project Leads:** Dr Elaine Harkness and Professor Sue Astley, University of Manchester.

#### Lifestyle and Environmental Risk Factors

## Alcohol consumption and increased breast cancer risk

This project will build on our previous research and investigate the best ways to increase awareness of the link between alcohol and breast cancer. We will identify specific tools to help middle aged women drink less, including positive ways to frame health messages. The project will consist of a public advisory group to review past findings, a survey to rate potential intervention content, a prototype version of the intervention to be tested and a wide-reaching public communication strategy.

**Project Lead:** Dr Emma Davies, Oxford Brookes University

#### **Risk Reducing Drugs**

## Effects of preventive tamoxifen on high-risk breast microenvironment

In this study, we will compare the make-up of breast tissue from women in clinical trials before and after they take preventative drugs, to find markers of whether women are responding or not. This research will enable us to better understand why preventative drugs are only effective in about half of high-risk women. As a result, we will be able to better tailor preventative treatment to individuals, which could mean that many women are spared from unnecessarily experiencing tamoxifen's challenging side effects.

**Project Lead:** Dr Andrew Gilmore, University of Manchester.

## Investigating prevention using a human tissue ex-plant model

Our previous research developed an ex-plant model (small tissue fragments based on the human breast) which allows fragments of human breast tissue to be cultured in the lab. This follow-on project will carry out in-depth studies to investigate if our ex-plant models maintain key cell types, gene-expression and respond to treatment when compared to matching samples from clinical prevention trials. This lab-based model, when fully verified, will provide a platform to test new prevention treatments for women who are at a high risk of breast cancer.

**Project Lead:** Dr Hannah Harrison, University of Manchester.

## The National Breast Imaging Academy

Our solution to the national workforce shortages in breast imaging



There is an increasing need for breast imaging services caused by both a drive to achieve earlier diagnoses for cancer patients, and a severe workforce shortage.

Almost 15% of radiographer and radiologist posts in the UK are vacant. Coupled with that, by 2025, 38% of breast radiologists, 49% of breast clinicians and 40% of doctors are expected to retire. Workforce shortages within breast imaging lead to delays in breast cancer diagnosis, the closure of breast centres, and reduced recruitment to research studies.

Due to the lack of radiologists, several breast centres across the country have closed, including Salford and Stockport within Greater Manchester. This has placed even greater pressures on the remaining units and created an urgent need for a solution.

The pandemic also created a backlog of almost 1.5 million screening appointments, which has massively increased the pressure on an already under-resourced service. The Government recently pledged £10 million to deliver 29 new breast cancer screening units within the NHS, but this does not address the shortage of trained staff to carry out the screening and the lack of training space in the form of mammography and ultrasound rooms.

Our top priority, therefore, is to build the **National Breast Imaging Academy (NBIA)** to address these serious problems.

As the first truly multidisciplinary breast imaging academy in the UK, the NBIA will allow us to:

- Deliver high-quality, pioneering, and cost-effective training in excellent training facilities
- Raise the profile of careers within breast imaging
- Create local jobs and widen access to careers in breast imaging through an apprenticeship scheme aimed at those from more diverse backgrounds
- Reduce waiting times to address the backlog of screening appointments
- Create additional capacity for research into breast cancer diagnosis and treatment
- Train a sustainable workforce able to meet current and future needs and ensure that thousands more women get a quicker diagnosis and access potentially lifesaving treatment.

NHS England has committed to fund the staffing and revenue costs for the National Breast Imaging Academy (NBIA) and has awarded approximately £10 million over the last 6 years in recognition of the severity of the issues facing breast services. The NBIA project team has also secured an NHS England revenue award for the hire and maintenance of specialist medical equipment that would be used within the NBIA.

Phase one of the new building will contain two ultrasound rooms and two mammography training rooms, resulting in a 30% uplift in imaging capacity and

30% increase in training space. The increase in service capacity means an extra **13,000** patients can be seen per year. We have also decided to enhance the NBIA project by converting a former film store in our current building into a new training space at a cost of £411,020, the full amount of which has been donated by a charitable foundation.

In 2022, NHS England (previously Health Education England) commissioned an External Economic Evaluation into the NBIA, predicting that over a 10-year period the new training initiatives will produce a £50 million saving to the health economy. Crucially, by significantly alleviating the crisis facing the breast imaging workforce and preventing delays in breast cancer diagnosis and treatment, we will save lives.

A cost review was recently undertaken and the costs of Phase one of the build increased slightly from £3.5 million to £3.83 million. The increase was due to the inflation rate on building supplies. So far, we have raised £2.01 million. This includes pledged income, which will be accounted for once the fundraising target has been achieved; income raised by Manchester Foundation Trust Charity; and funding secured directly by the National Breast **Imaging Academy Team from** NHS England, which amounts to £739,000.

## Supporting Patients and Professionals at the Nightingale Centre

The Nightingale Centre and Prevent Breast Cancer Research Unit sees thousands pass through its doors each year: approximately 18,500 new patients referred by their GP after presenting with symptoms, 13,000 follow-up patients and 2,600 family history clinic patients. Many of those who attend appointments are accompanied by a family member or close friend. Furthermore, over 100 NHS staff work from the Centre.

We know that for the thousands of people who pass through The Nightingale Centre each year, attending appointments can be extremely daunting. For that reason, we pride ourselves on trying to make every visit to The Nightingale Centre as stress-free as possible. As a charity, we have introduced some non-clinical areas in the main reception, including a welcome desk, gift shop and coffee bar.

"Over 11,310 hot drinks sold to NHS staff and patients waiting for appointments; a 54% increase to the prior year thanks to a steady return to face-to-face appointments – an encouraging step closer to prepandemic activity" Coffee shop income for the year was £59,160 – a 42% increase from the previous year. This year also saw the reopening of the Welcome Desk and Shop after Covid, and we have begun plans to refurbish and enhance the space, which will be implemented later in 2023.

We have been running the coffee shop in The Nightingale Centre since it opened in 2007. The coffee bar is open weekdays from 9.30am until 4pm, serving food and drinks, providing an essential service for NHS staff and patients.

Our Welcome Desk and Gift
Shop has leaflets and information
about us as a charity and breast
awareness. There is also an array
of items to browse whilst patients
wait for their appointments,
offering a welcome distraction
while also raising money and
awareness for the charity. We offer
a selection of cards, homeware,
merchandise and clothing, with all
money raised contributing towards
our charitable activities. The items
found in the shop can also be
purchased on our website.



#### **Our Amazing Volunteers**

Both the coffee shop and the Welcome Desk are run by our amazing team of 37 dedicated volunteers. This helps us to keep costs down, but also means that our volunteers can speak to those visiting the centre, as many of them have had their own experiences of breast cancer affecting them or their loved ones.

We are incredibly grateful to our team of volunteers for all they do and for always going above and beyond to support the charity.

"I feel that I can support the charity best by giving up my time to help out at the coffee bar each week. The interaction with customers makes me understand what they are going through just by listening".

Judith. Prevent Breast Cancer volunteer since 2017

## Awareness of Breast Cancer signs, symptoms and risk factors and the importance of breast screening

Two recent **reports** published by the The Royal College of Radiologists (RCR) have made for a distressing read. One looked specifically at cancer care and the other at the clinical radiology workforce.

They warn that cancer patients face worsening NHS delays and the prospect of more gruelling treatment due to NHS staff shortages.

Indeed, a poll of all 60 directors of the UK's cancer centres by The RCR found a staggering 95% felt NHS staff shortages were leading to longer waiting times for appointments and delays in cancer treatment, including the prospect of more gruelling treatment thanks to a delayed start.

Over the years, demand for breast imaging has increased at a much faster rate than staffing numbers, placing very significant pressures on the breast imaging workforce.

## What we achieved in 2022-2023

In the last year, we have received over 100 enquiries and delivered more than 50 Health Hour talks to over 4,000 people from companies, community groups, schools, and universities, both in person and online. In our talks, we discuss breast cancer signs, symptoms, risk factors, the importance of breast screening and our research.

We believe that breast awareness should start from a young age, so we have been focusing on delivering talks to students in Year 11 and sixth form. These talks are important to dispel common myths, such as breast cancer only affecting women. We have also delivered talks to national and international companies and have received excellent feedback. One company's feedback described our Health Hour talks as 'a fantastic, intimate, honest and pragmatic conversation around breast cancer screening and a risk-based approach to breast cancer'.

Another stated that 'many women were moved and inspired by the work that Prevent Breast Cancer does and will now be more vigilant around their own breast health'.

As well as Health Hour talks for schools and companies, our charity has delivered talks at key events such as Wythenshawe International Women's Day in March, attended by 200 people and organised by Mike Kane MP for Wythenshawe and Sale East, and the Rowan Empowering Women Network events in December 2022 and March 2023, where we spoke to around 170 influential female leaders in UK business and industry.

During Breast Cancer Awareness Month (BCAM), we work to raise awareness on a national scale through social media campaigns and working closely with the NHS in Greater Manchester to deliver a targeted on-the-ground campaign to raise awareness of the importance of breast screening and encourage women to book and attend their screening appointments.

 $\underline{\text{https://www.rcr.ac.uk/posts/rcr-launch-2022-workforce-census-reports}}$ 

We teamed up with Manchester Airports Group to run a campaign where our **Breast Awareness Bus** visited seven sites in areas where breast screening uptake is particularly low, including some of the most deprived areas of Manchester. 1,200 people engaged with the bus – over 50% of whom were from ethnic communities – and 3,500 pieces of breast awareness literature were handed out.

Over the past 12 months we have invested in a new website, which launched in March 2023. Due to the pandemic, very little investment had been made in updating our previous website and it was important to update to a new site to make it more user friendly and to ensure that we were keeping up to date with the latest technology and integrations. The new website is much easier to navigate on any device and has a simplified structure. It also gave the team an opportunity to create new content and expand on existing content, ensuring that the website is as informative as possible for anyone concerned about their risk of breast cancer and wanting to find more information.

10.4%

increase in users to our website



#### Our Highest Performing Social Media Posts

Feel them on the First Look out for your invite World Cancer Day

## Most popular pages

Signs and Symptoms
The Nightingale Centre
Causes and Risk Factors
Blog on 'Is breast pain
a sign of cancer?'

We continued to develop our library of videos and now have over 50 health information videos covering a variety of topics linked to breast cancer, from diagnosis through to treatment, including breast cancer in men. We filmed our expert clinicians and scientists talking about their key subjects and these videos serve as a useful tool on our website and YouTube channel, allowing us to signpost people who contact the charity asking for information. To date, these videos have been viewed over 8,000 times and are a widely shareable resource that will help many people now and in the future. The two most viewed videos during the year were 'What happens at a mammogram' and 'Hormones and the menopause'. We recognise the importance of keeping these videos up to date and we will continue to film new videos, particularly those featuring supporters, whose stories help other women.



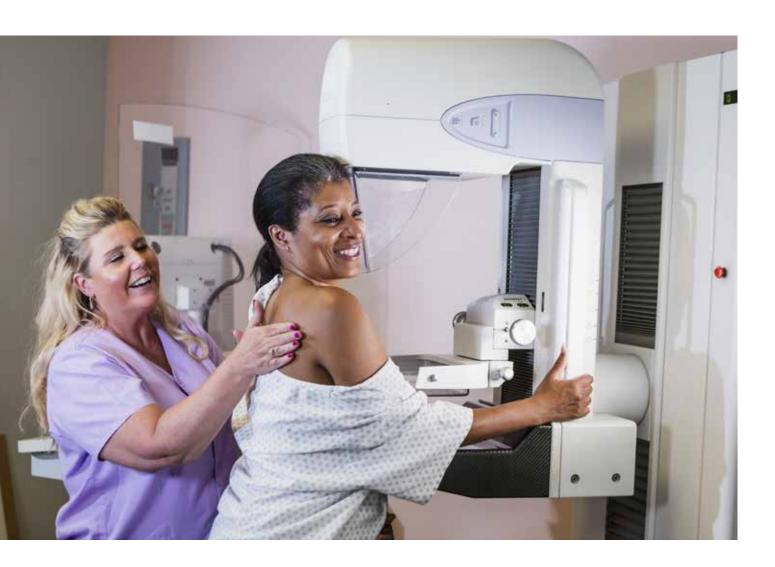
What should you expect from your breast screening



What happens at a mammogram

## **Addressing Health Inequalities**

In the United Kingdom, breast cancer survival rates have improved over the last decade due to advances in treatment, greater breast awareness and early detection, made possible by the NHS screening programme. However, women from ethnic communities are at greater risk than white women of being diagnosed with later stage and more aggressive breast cancer, meaning that their survival rates are lower. Similarly, women from socially deprived areas have poorer breast cancer outcomes.



Whilst breast clinic referrals have increased by 100% in the last decade, screening uptake among women from ethnic communities and those living in socially deprived areas remains poor. Previous research into why uptake is lower has highlighted three key areas: lack of knowledge; lack of access; and cultural factors.

The COVID-19 pandemic resulted in a dramatic reduction in screening uptake nationwide. Although general trends indicate that screening uptake is slowly returning to pre-pandemic levels, this is not the case in the areas with highest levels of deprivation. In Manchester, screening uptake actually decreased from 53.2% in 2021 to 49.5% in 2022, making it one of the lowest percentages in England and 15.8% lower than the national average, based on NHS statistics.

#### **Our Plans**

Health inequalities have always been a key concern for Prevent Breast Cancer. Inequalities which existed prior to the pandemic have been exacerbated. We have started to take action and have carried out and planned a number of activities to address health inequalities. There is still far more to be done and this will be one of our main priorities for the foreseeable future.

In January 2023 we formally established a Health Inequalities Committee to explore how we can continue to address health inequalities across socioeconomic and ethnic groups, with the aim of improving engagement with marginalised communities and

ultimately reduce breast cancer mortality. The interventions proposed by the group are to be mainly targeted across the North West of England, specifically in areas with poor engagement with health services. However, some of these initiatives may also be suitable for adoption across the UK.

The Committee is chaired by Prevent Breast Cancer Trustee, Dr Mary Wilson and members include our Chief Executive, and Head of Communications, as well as representatives from the communities we aim to engage with, other experts including the NHS Breast Screening Improvement Leads for Greater Manchester, breast care medical professionals interested in promoting this cause, marketing professionals and women with lived experiences of breast cancer. The Committee meets quarterly before the Trustees meeting in order to update the Trustees on its progress. The Committee is currently developing its strategy and will continue forge links with other groups undertaking research in these areas to try and further understand the barriers to engagement with health services and the interventions that may be utilised to overcome them.

## Asian Women's Health Awareness

South Asian women have been consistently identified as having lower breast screening uptake rates -as low as 29% in some areas.

We are in the process of completing a video advert to encourage more women of South Asian backgrounds to attend breast screening and address the health inequalities that may be contributing to low screening uptake.

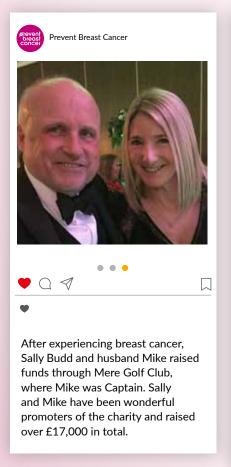
We have recorded versions of the video in Bengali and Urdu, and we are planning to advertise on Asian and other TV channels for a 4-week advertising campaign. Once complete, we would also look to promote the advert through our YouTube and Facebook channels and our website. This project was delayed by Covid, but we are hoping to launch the campaign before the end of 2024.

## Our Year in Review: 2022/23

We are so very grateful to each and every person who has supported Prevent Breast Cancer, whether through fundraising, donations, volunteering, promotion, research or professional support. The charity relies on your support and we would like to offer our heartfelt thanks to you all.

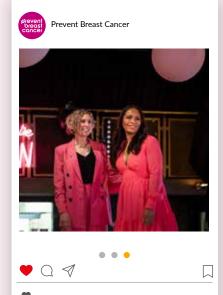
Here's just a flavour of the many incredible things our supporters have achieved this year.

### **April to June**

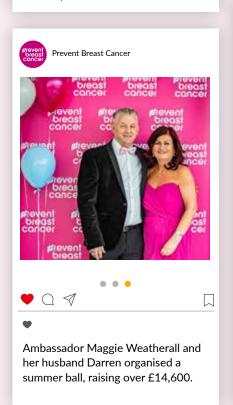








Ambassador Rebecca Hartley and Saving Grace Events organised a sparkling Pink Ribbon Brunch raising over £5,400.





♥ Q ◀ □

Our brilliant Great Manchester 10K

Runners raised over £16,000.



Auditors Alliotts continued to support the charity. A team of 15 took on the gruelling 24 hour Three Peaks Challenge, raising over £5,440. To date, their fundraising for Prevent

Breast Cancer now exceeds £55,000.



Our Jubilee lunch and garden party in the grounds of one of our supporters saw guest treated to a delicious three course menu specially created for the occasion by a master chef, raising over £4,300.



Bryn Ladies Circle held their annual fundraiser and raised over £10,000.



Prevent Breast Cancer

MT Finance organised an event at Villa Park, which saw 32 finance industry professionals step into a Premier League stadium for the day. Their event 'Every Goal Counts' raised over  $\pm 4,000$  with MT Finance donating  $\pm 200$  for every goal scored.



### **July to September**



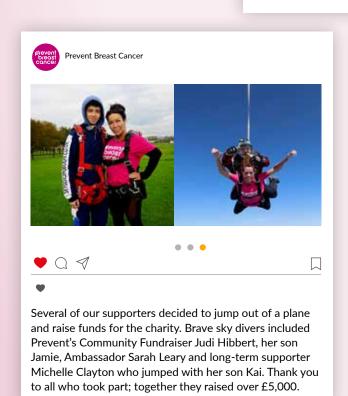


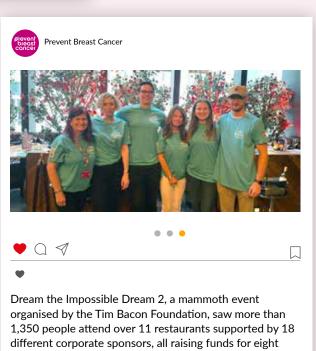
Cancer as the charity for its annual

'Style in the City' event: afabulous, fun filled lunch with a Club Tropicana theme, which raised over

£2,400.







## **October to December**

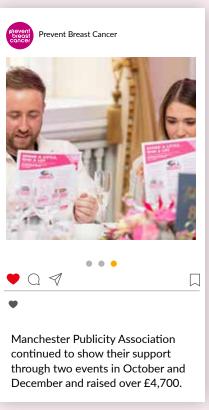




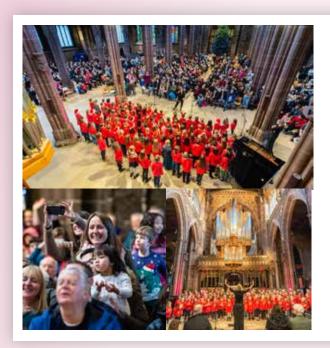
Our amazing ambassador Roisin Lawlor and husband Chris were part of our London Marathon team, Chris's 13th fundraising challenge for Prevent Breast Cancer! Their fundraising has included half marathons, a triathlon, 'The Boob Hike' and organising a Ball, and they have raised in excess of £20,000 to date.













Over 600 people joined us at Manchester Cathedral for our annual Christmas celebration, a fun filled, festive afternoon of live music and entertainment, raising over £8,000. And, keeping with the Christmas theme, our Christmas Cards generated over £15,400.







We successfully launched our Charity of the Year partnership with The Empowering Women's Network, an initiative created by Rowan Executive Search and Louise Stephenson. All funds raised will support the National Breast Imaging Academy.



We were honoured to co-host an important dinner for just 20 guests at the Houses of Parliament. Jointly arranged with Mike Kane MP for Wythenshawe and Sale East, our guests enjoyed a delicious meal whilst learning more about our important campaign to build a National Breast Imaging Academy.

## January to March



Raising over £6,300



Champneys and Elemis organised a

delicious afternoon tea at Mottram

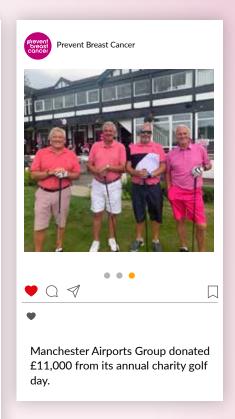
over £1,400 and the Champneys

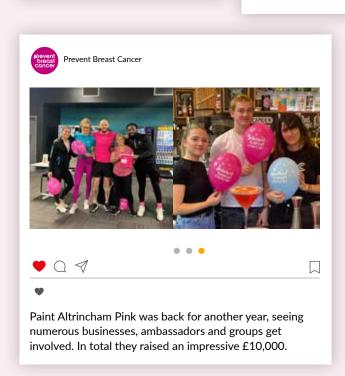
Charitable Foundation presented a

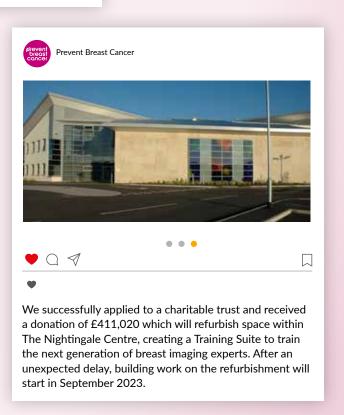
cheque for £10,000 to support our

Hall Hotel. The event raised

vital work.







## **Strategic Aims and Objectives**

#### 2022-2023

Governance & Structure	
Undertake a Board Effectiveness Review	Completed
Review investment strategy to ensure that we are maximising the potential from the funds we hold, whilst ensuring our portfolio remains low to moderate risk:  Re-invest the £80,000 taken from investments in 2020  Invest a percentage of the legacy we have received to fund gene PHDs and associated work  Set up Charity Aid Foundation Deposit Account	Completed
Write and implement our Equality, Diversity & Inclusion Statement	In progress
Continue with recruitment of charity team in line with revised organisation chart, to future proof and grow the charity	In progress
Invest in database and look at integration with different platforms and websites	In progress
Research	
Fund new research projects in December 2022	Completed
Meet with researchers to review research strategy and establish what have we achieved so far and where are we going	Completed
mplement plan for expenditure of gene PHD fund, in line with legator's wishes	In progress
Review grant funding process	Completed
Services to Patients and to The Nightingale Centre	
Refurbish the shop and welcome area	In progress
Once the above is complete, review branding and visibility of the charity in the reception area of The Nightingale Centre	In progress
Continue to lead on the capital campaign to build the National Breast Imaging Academy (NBIA)	In progress
Health Awareness & Education	
Work with Patron, Margo Cornish, on her 2022 campaign to raise awareness of breast cancer across Greater Manchester	Completed
Revisit health inequalities work including Asian Women's Health Awareness advert and aim to establish a sub-group specifically focused on health inequalities	In progress
Continue to develop and to promote our Health Hour Talks, approaching schools and companies	In progress
mplement new website using more modern version of WordPress	Completed
Income Generation	
Working with MFT Charity, achieve a fundraising target of £3.8 million to build the NBIA	In progress
Balance the above with raising funds for new research projects, health promotion activity and for the general, core need of the charity	In progress
Grow income from companies and secure new corporate partnerships and/or Charity of the Year op- portunities	In progress
Implement a long-term monthly donor strategy and increase the number of regular donors – unable to do in 2021-2022	In progress
Develop major donor strategy	In progress
Organise two face-to-face supporter stewardship events: -  Thank You Evening  Research Update Evening	In progress

#### 2023-2024

#### **Governance & Structure**

Review our governing documents

Continue to review the organisational policies including an updated Equality Diversity and Inclusion policy and write and implement policies on the environment and menopause.

Implement new Risk Register model

Organise cyber security training

Review employee benefits package

Review different platforms and processes to look at integration to improve efficiency

Implement an updated process to capture information for impact reporting

#### Research

Plan a Breast Cancer Prevention Conference, which is likely to take place in September 2024

Organise a Research Evening for the charity's supporters with a spotlight on what we have achieved so far and what still needs to be done

Review grant funding process and update grant application form to make it more user friendly

Work with our researchers to improve dissemination of their research and communication of its success both internally and externally

#### Services to Patients and to The Nightingale Centre

Finish the shop refurbishment, invest in new ethically sourced merchandise and where possible work with local suppliers

Invest in new screens to display important and engaging information to patients waiting for their appointments

Continue to lead on the capital campaign to build the National Breast Imaging Academy (NBIA)

Recruit new volunteers for our coffee bar and refurbished shop

#### **Health Awareness & Education**

Apply for funds for a Health Inequalities Officer who will develop and implement a strategy for future campaigns.

Work with a health communication agency to produce a multifaceted campaign to engage with women about breast awareness and the importance of attending routine screening. A key objective will be to capture data, which can inform future outreach campaigns.

Finish Asian Women's Health Awareness advert and work with the Health Inequalities Committee to agree a timeline to run the campaign

Continue to collaborate with Close to Home Productions, a female led theatre company who have written and produced 'Identities' a play about breast cancer. Be part of their tour by providing information about the charity and breast cancer awareness to audiences and community groups, as well as sitting on their Post-Show Q&A panel.

Develop our library of video content by editing existing videos to provide subtitles in various languages

#### **Income Generation**

Continue to work with MFT Charity, achieve a fundraising target of £3.8 million to build the NBIA

Balance the above with raising funds for new research projects, health promotion activity and for the general, core need of the charity

Continue to grow income from companies and secure new corporate partnerships and/or Charity of the Year opportunities

Implement the monthly donor strategy

Develop Major Donor Strategy with board of Trustees

Continue to grow our successful Ambassador programme and build on the success of our Paint Towns Pink campaign

Diversify income and increase brand awareness through digital fundraising and promotional activity – Strategy driven by analytics and data.

### **Financial Review**

This year has been transformational for Prevent Breast Cancer, as we have spent considerable time reviewing our fundraising strategy and future proofing the charity. We have completed a successful Board Effectiveness Review, inducted new Trustees, appointed a new Chair and introduced a committee structure. We have also invested in the charity team, establishing a Senior Leadership Team to support the Chief Executive Office and to strengthen fundraising.

- Total income is £1,448,751, compared with £1,130,017 in the previous year.
- We received a hugely significant donation from a charitable trust totalling £411,020, which accounts for 28% of the income raised. Income from Trusts and Foundations exceeded £507,300.
- Income from donations and legacies remains strong and totalled £209,988.
- Community and Corporate income continued to grow, seeing a 164% and 73% increase on the previous year's activities.
- Income from Sport Events and Challenges continued to grow, increasing by 34% from the previous year.
- Gifts-in-Kind grew by 199% largely due to the dedication of This is Digital who provide their expertise in SEO and PPC as a pro-bono service.

Our strategy of saving costs, balanced with taking advantage of all opportunities available to us to generate income has been effective, propelling the charity through an incredibly difficult time. Thanks to this, we have exceeded what we thought would be achievable.

50% of our income in the previous year was from legacies received. This was largely due to the £487,500 we received to establish the "Doctor Alan H. Gowenlock PHD Studentship". This was exceptional for the charity and – although legacy income was significantly lower in 2022-2023 – we still received a gift of £55,284.

Income Generated	
Trusts & Foundations	£507,390
Donations & Legacies	£209,988
Sport Challenges	£173,111
Community Activity	£168,656
Corporate Fundraising	£135,451
Gifts-in-Kind	£56,800
Charitable Activity - Coffee Bar	£59,160
Various events and fundraising activity	£46,892
Gift Aid	£41,307
Merchandise	£32,661
Investment Income, Bank Interest and other	£17,336
Total Income	£1,448,751

We offer our heartfelt thanks to our supporters across the UK who continue to fundraise and support the charity.

#### **Our Expenditure for 2022/23:**

Consistent with other years, our charitable activities constitute the vast majority of expenditure, with other costs kept at a minimum. During the year under review, Prevent Breast Cancer spent £838,089 on charitable activities.

There is £1,163,109 held as restricted income and carried forward to 2023-2024 for future charitable expenditure.

The key components of our charitable activities are research, raising funds to build a National Breast Imaging Academy, supporting the patients and providing services at The Nightingale Centre, communicating health messages about breast cancer and addressing health inequalities.

The below charts outline the breakdown of our Charitable Activity for the year 2022/2023 and future charitable expenditure held as restricted reserves.

How we spend our funds	
Charitable Activities	£838,089
Cost of Raising Funds	£290,591
Merchandise Costs	£9,178
Investment Management Fee	£6,008
Total Expenditure	£1,143,866
Future Charitable Expenditure Restricted Reserves	
Gene Research PHDs	£487,500
Training Suite (Refurbishment of existing space)	£411,020
National Breast Imaging Academy Capital Build	£237,703
Asian Women's Health Awareness Campaign	£16,786
	£16,786

#### **Reserves Policy**

The Directors and Trustees believe that the charity should hold financial reserves, because it does not receive statutory funding and is entirely dependent on donations from the public and fundraising activities. This is inevitably subject to variation year to year. In addition, it requires the ability to continue operating and honouring grant commitments, should there be falls in income. By following this policy prior to the pandemic, we have been able to spend more on research projects than our net charity income.

Prevent Breast Cancer takes a prudent approach to our finances, maintaining an appropriate level of free reserves to mitigate against the inherent uncertainties of annual fundraising and any significant and unexpected falls in income, such as Covid-19, to ensure core activities can continue.

As of 31 March 2023, the charity holds reserves of £1,728,828, of which £1,163,109 are restricted funds. 42% of restricted reserves are to fund the Doctor Alan H. Gowenlock PHD Studentship projects, 35% will fund the refurbishment of existing space to create a Training Suite and 20% are for the National Breast Imaging Academy.

Designated funds amount to £182,042, the majority of which has been allocated to the National Breast Imaging Academy (£150,000), and to invest in the database and refurbishment of the charity offices and shop (£28,992).

The Trustees aim to keep in reserve six to nine months of core costs to guard against a worst-case scenario where the charity receives no income from any of its sources. These costs cover our office staff, support costs, critical fundraising activity and governance. They total £275,189 for six months.

Free reserves are £380,977, excluding the designated funds (in 2022 free reserves were £351,950) at the year-end so, based on this policy, the charity holds in reserve just over eight months' core costs.

#### **Fundraising Costs Policy**

The Trustees are committed to keeping the costs of our fundraising office as low as possible in order to maximise the income available for research projects and other charitable activities. The financial statements that follow demonstrate that most fundraising costs relate to essential items such as running successful fundraising events and campaigns, or stock purchased for trading.

In summary, we raised a total of £1,448,751 from donations and legacies, fundraising events, trading activities, funding from trusts, foundations and investments. We spent £838,089 on our core charitable activities and research grants, with a further £1,163,109 held in restricted reserves for future charitable expenditure.

#### **Fundraising Approach**

During the past year, the charity did not use fundraising agents and did not receive any complaints about our fundraising activities. The charity is a member of the Fundraising Regulator, and the fundraising team follows the Fundraising Regulator's Code of Practice. We strive always to act ethically and responsibly, using best practice when communication with our supporters, and we strictly adhere to General Data Protection Regulations (GDPR) processes in relation to data use.

#### **Investment Policy**

Prevent Breast Cancer investment objective is to invests funds not immediately required in order to produce the best financial return within an acceptable level of risk, with a spread of liquidity to ensure that assets are available to meet cash flow requirements. In accordance with our ethical policy, we ensure our investments do not conflict with our aim of breast cancer prevention.

The Trustees have appointed Brewin Dolphin, an experienced firm of investment advisers, to manage our investments on a discretionary basis. The investment portfolios are managed in accordance with our Investment Policy. In 2022 a decision was made to diversify a proportion of funds into a number of different places, in order to earn some income from interest-paying bank accounts and from stock market investments.

The principle agreed was that funds that we would need to draw on within a short time frame should be kept within the banking system, and funds that we were unlikely to need within the few years, but that are restricted for future research and capital projects could be invested in the stock market with Brewin Dolphin. The Trustees are satisfied with the investment performance and that it is in line with the investment objective set. The assets experienced a decrease in value by £35,150 during this financial period, reflecting the global pessimism around business growth and activities. While this outcome was not optimal, the charity remains confident in the management of its diversified portfolio by Brewin Dolphin and we are optimistic that future performance will improve.





# Structure, Governance and Management

#### **Governing Documents**

Prevent Breast Cancer is registered as a charitable company limited by guarantee constituted under a Memorandum of Association, and is a registered charity numbered 1109839. The management of the charity is the responsibility of the Directors and Trustees who are elected and co-opted under the terms of the Memorandum and Articles of Association.

#### **Appointment of Trustees and Induction**

New Trustees are nominated by Trustee Board members, invited to attend and observe at least two Board meetings and to meet with the Chief Executive, interviewed by a panel of Trustees for that purpose and appointed where they have the necessary skills to contribute to the charity's strategic leadership and development.

On appointment they receive an induction pack, which comprises a range of information to support them in their new role. This encompasses the charity's strategy, structure, financial performance and forecast and an overview of Trustee's legal obligations. The pack includes governing documents and other relevant documentation available from the Charity Commission e.g., CC3 – The Essential Trustee and CC20 – Charity Fundraising: A Guide to Trustees' Duties. All new Trustees are introduced to the charity's staff team.

#### **Organisation**

Following a successful Board Effectiveness Review, which was undertaken by an independent expert and completed in December 2022, the following changes were agreed and formally ratified by the Board.

- Trustee Board meetings will now be held on a quarterly basis, with Trustees taking part in subcommittees between each meeting.
- The following sub-committees were adopted: -
  - Finance & Audit Committee
  - Risk & Compliance Committee
  - People Committee
  - Health Inequalities Committee (which will co-opt members who are not Trustees).
- Eamonn O'Neal was appointed as the new Chairman.
- Honorary titles of President and Vice-President were given to Lester Barr and Pam Glass respectively.
- The role of Trustees will include an expectation to commit to membership of at least one subcommittee. The Chair of the Board is a member of each committee, 'ex officio'.
- A length of tenure of the Chair of Trustees was agreed to be three years with an option to be reappointed for a further three years.
- The length of tenure for existing Trustees and of new Trustees was also formally agreed.

The charity is currently in the process of updating its governing documents to reflect the above changes.

Prevent Breast Cancer has 10 Trustees who meet quarterly to review the fundraising, trading and finance team's performance in raising funds for research into breast cancer prevention. According to the governing documents, the maximum number of Trustees can be 25 and the minimum number is four. Each member of the Trustee Board contributes a different area of expertise including medical, commercial, HR and public sector knowledge and experience. Two of the Trustees are directors of the dormant trading subsidiary. The Chief Executive Officer has been appointed by the Trustees to manage the day-to-day operations of the organisation.

#### **Related Party Transactions**

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine (Trustee) is a director. The estimated value of such services is £2,800 (2022: £2,800) and therefore an equivalent amount has been included within gifts in kind.

Fees of £nil (2022: £716) were paid to JMG Legal Ltd. This firm is considered a related party as Joe Glass (a Director of JMG Legal) is married to Trustee, Pam Glass and he is also the Company Secretary. Fees of £1,122 (2022: £nil) were paid to Original Funbags. This company is considered a related party as Tammy Hopla (director of Original Funbags) is also a Trustee.

All Trustees are required to complete a Register of Interest form annually. Any connection between a Trustee and key personnel or organisations is disclosed to the full Board of Trustees in the same way as any other contractual relationship with a related party. The Board adheres to our Conflict of Interest Policy to protect the integrity of Prevent Breast Cancer's decision-making process, to enable stakeholders to have confidence in the charity's reliability, and to protect the integrity and reputation of volunteers, staff and Directors.

#### **Pay Policy for Senior Staff**

The Board of Trustees and the senior management team comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity. All Trustees donate their time and do not receive remuneration. Details of related party transactions are disclosed in notes 9 and 26 of the accounts.

The pay of the senior staff is reviewed annually by the People Committee and usually increased in accordance with salary scales set by the Board. Salaries are benchmarked against pay levels in the third sector, taking into account the type of charity, location, annual income and the number of employees.

#### Risk Management

The Trustee Board is committed to maintaining a strong risk management framework. The aim is to ensure that Prevent Breast Cancer makes every effort to manage risk appropriately by maximising potential opportunities, whilst minimising the adverse effects of risks.

The charity's risk policy is used to support our internal control systems, enabling the charity to respond to operational, strategic, and financial risks regardless of whether they are internally or externally driven.

#### Risk policy objectives:

- To confirm and communicate the charity's commitment to risk management
- To establish a consistent framework and protocol for determining appetite for and tolerance of risk and for managing risk
- To assign accountability to management and staff for risks within their control and provide a structured process for risk to be considered, reported and acted upon throughout the organisation.

A risk register covering key strategic risks is maintained and reviewed at least twice a year by the Risk and Compliance Committee – more frequently where risks are known to be volatile. A more detailed operational risk register will be maintained in aspects where this is considered appropriate, taking account of the impact of potential risk and the cost benefit of the exercise.

The charity will continue to regularly review and monitor the effectiveness of its risk management framework and update it as appropriate.

In 2022-2023, the Trustees assessed the major risks to which the charity is exposed, in particular those related to the operations and finances of the charity and were satisfied that systems are in place to manage exposure to the major risks.

The charity receives no statutory funding and is dependent entirely on the donations and fundraising activities of its staff, volunteers and supporters. Therefore, the ratio of income to expenditure is constantly highlighted as a key risk as we need to ensure we can continue to fund our ongoing charitable activities and research projects. The Trustees ensure that this risk is minimised by following the Reserves Policy, outlined on page 35.

### **Reference and Administrative Details**

The Trustees, who are also the directors for the purpose of company law, and who served during the year and up to the date of signature of the financial statements were:

L Barr - Chairman

P S Glass

**D** Harris

T Hopla (appointed September 2022)

J Humphris (appointed November 2022)

K James (resigned September 2023)

C Lee-Jones

C J Levine - Treasurer

J Lovell (resigned November 2022)

E O'Neal

S Saleh

Dr M Wilson

**Key Management Personnel** N Barraclough - Chief Executive Officer

E Mellor - Head of Communication and Campaigns

J Ruth - Head of Income Generation

J Coleman-Reed - Head of Operations

Secretary J M Glass

Company Registered Number 04831397

Charity Registered Number 1109839

Registered Office Prevent Breast Cancer Research Unit

The Nightingale Centre Wythenshawe Hospital Southmoor Road Manchester M23 9LT



**Auditors** Alliotts LLP

Chartered Accountants and Business Advisors

Friary Court 13-21 High Street

Guildford Surrey GU1 3DL

**Bankers** Royal Bank of Scotland Plc.

> 38 Mosley Street Manchester M2 3AZ

**Solicitors** Gunnercooke LLP

> 53 King Street Manchester M2 4LQ

# Statement of Trustees' Responsibilities

The Trustees, who are also the directors of Prevent Breast Cancer Limited for the purpose of company law, are responsible for preparing the Trustees' Annual Report and the Financial Statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company Law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that year.

In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation.

The Trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the Trustees are aware:

- There is no relevant audit information of which the charitable company's auditors are unaware, and
- The Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

The Trustees' Annual Report was approved by the Board of Trustees.

Eamonn O'Neal DL
Eamonn O'Neal DL (Dec 4, 2023 17:19 GMT)

Eamonn O'Neal - Chairman

Date: 04/12/2023

# Independent Auditor's Report

#### **Opinion**

We have audited the financial statements of Prevent Breast Cancer Limited (the 'charity') for the year ended 31 March 2023 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and the notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2023 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

#### **Basis for opinion**

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

#### Other information

The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. The Trustees are responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

# Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 require us to report to you if, in our opinion:

- the information given in the financial statements is inconsistent in any material respect with the Trustees' Annual Report; or
- sufficient accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records; or
- we have not received all the information and explanations we require for our audit.

#### **Responsibilities of Trustees**

As explained more fully in the statement of Trustees' responsibilities, the Trustees, who are also the directors of the charity for the purpose of company law, are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, the Trustees are responsible for assessing the charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

### Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 144 of the Charities Act 2011 and report in accordance with the Act and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of noncompliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud, is detailed below.

# Extent to which the audit was considered capable of detecting irregularities, including fraud

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including

fraud and non-compliance with laws and regulations, was as follows:

- the engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities and skills to identify or recognise non-compliance with applicable laws and regulations;
- we identified the laws and regulations applicable to the charitable company through discussions with Trustees and other management, and from our knowledge and experience of the sector;
- we focused on specific laws and regulations which we considered may have a direct material effect on the financial statements or the operations of the charitable company, including the Companies Act 2006, the Charities Act 2011, the Charities SORP, taxation legislation, data protection, anti-bribery, employment, environmental and health and safety legislation;
- we assessed the extent of compliance with the laws and regulations identified above through making enquiries of management and inspecting legal correspondence; and
- identified laws and regulations were communicated within the audit team regularly and the team remained alert to instances of non-compliance throughout the audit.

We assessed the susceptibility of the charitable company's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- making enquiries of management as to where they considered there was susceptibility to fraud, their knowledge of actual, suspected and alleged fraud;
- considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.

#### Audit response to risks identified

To address the risk of fraud through management bias and override of controls, we:

- performed analytical procedures to identify any unusual or unexpected relationships;
- reviewed all transactions listed;
- assessed whether judgements and assumptions made in determining the accounting estimates were indicative of potential bias; and
- investigated the rationale behind significant or unusual transactions.

In response to the risk of irregularities and noncompliance with laws and regulations, we designed procedures which included, but were not limited to:

- agreeing financial statement disclosures to underlying supporting documentation; and
- enquiring of management as to actual and potential litigation and claims.

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of noncompliance. Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the Trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion. A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: http://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

#### Use of our report

This report is made solely to the charity's Trustees, as a body, in accordance with part 4 of the Charities (Accounts and Reports) Regulations 2008. Our audit work has been undertaken so that we might state to the charity's Trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's Trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Stephen Modien

Stephen Meredith BA FCA DChA (Senior Statutory Auditor) for and on behalf of Alliotts LLP

Date: 08/12/2023

Chartered Accountants Friary Court 13-21 High Street Guildford Surrey GU1 3DL

Alliotts LLP is eligible for appointment as auditor of the charity by virtue of its eligibility for appointment as auditor of a company under section 1212 of the Companies Act 2006.



### **Statement of Financial Activities**

### including income and expenditure account for the year ended 31 March 2023

		Unrestricted funds	Restricted funds	Total	Unrestricted funds	Restricted funds	Total
		2023	2023	2023	2022	2022	2022
	Notes	£	£	£	£	£	£
Income from:							
Donations and legacies	3	767,705	548,360	1,316,065	451,958	555,921	1,007,879
Charitable activities	5	59,159	-	59,159	41,634	-	41,634
Other trading activities	6	56,191	-	56,191	72,938	-	72,938
Income from investments	4	17,336		17,336	7,566		7,566
Total income		900,391	548,360	1,448,751	574,096	555,921	1,130,017
Expenditure on:							
Expenditure on raising funds	7	305,777		305,777	148,644		148,644
Charitable activities	8	762,805	75,284	838,089	324,897	44,142	369,039
Total expenditure		1,068,582	75,284	1,143,866	473,541	44,142	517,683
Net gains/(losses) on investments	14	(35,150)		(35,150)	5,306		5,306
Net (outgoing)/incoming resources before transfers		(203,341)	473,076	269,735	105,861	511,779	617,640
Gross transfers between funds		22,787	(22,787)		57,433	(57,433)	
Net movement in funds		(180,554)	450,289	269,735	163,294	454,346	617,640
Fund balances at 1 April 2022		746,273	712,820	1,459,093	582,979	258,474	841,453
Fund balances at 31 March 2023		565,719	1,163,109	1,728,828	746,273	712,820	1,459,093

The statement of financial activities includes all gains and losses recognised in the year.

All income and expenditure derive from continuing activities.

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

# **Balance Sheet**

### as at 31 March 2023

			2023		2022
	Notes	£	£	£	£
Fixed assets					
Tangible assets	15		2,700		1,272
Investments	18		1		1
		_	2,701	_	1,273
Current assets					
Stocks	16	23,157		14,848	
Debtors	17	35,162		30,735	
Investments	19	794,241		543,384	
Cash at bank and in hand		1,248,127		987,541	
		2,100,687	_	1,576,508	
Creditors: amounts falling due within one year	20	(289,642)	_	(118,688)	
Net current assets			1,811,045		1,457,820
Total assets less current liabilities		_	1,813,746	_	1,459,093
Creditors: amounts falling due after more than one year	21		(84,918)		-
Net assets		=	1,728,828	=	1,459,093
Income funds					
Restricted funds	23		1,163,109		712,820
Unrestricted funds					
Designated funds	25	182,042		393,050	
General unrestricted funds		383,677	_	353,223	
			565,719		746,273
		_	1,728,828	_	1,459,093
		=		=	



The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 March 2023, although an audit has been carried out under section 144 of the Charities Act 2011.

The directors acknowledge their responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The members have not required the company to obtain an audit of its financial statements under the requirements of the Companies Act 2006, for the year in question in accordance with section 476.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the Trustees on 04/12/2023



E O'Neal - Chairman Trustee

Company registration number 04831397

# **Statement of Cash Flows**

# for the year ended 31 March 2023

			2023		2022
	Notes	£	£	£	£
Cash flows from operating activities					
Cash generated from operations	29		534,582		575,412
Investing activities					
Purchase of tangible fixed assets		(1,943)		(1,104)	
Purchase of investments		(280,000)		-	
Proceeds from disposal of investments		-		(2,151)	
Investment income received		7,947		2,208	
Net cash used in investing activities			(273,996)		(1,047)
Net cash used in financing activities			-		-
Net increase in cash and cash equivalents			260,586	_	574,365
Cash and cash equivalents at beginning of year			987,541	_	413,176
Cash and cash equivalents at end of year		-	1,248,127		987,541

### **Notes to the Financial Statements**

#### 1. Accounting policies

#### **Charity information**

Prevent Breast Cancer Limited is a private company limited by guarantee incorporated in England and Wales. The registered office is The Nightingale Centre, Wythenshawe Hospital, Southmoor Road, Manchester, M23 9LT.

#### 1.1 Accounting convention

The accounts have been prepared in accordance with the Companies Act 2006 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (as amended for accounting periods commencing from 1 January 2019). The charity is a Public Benefit Entity as defined by FRS102.

The financial statements are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest £.

The financial statements have been prepared under the historical cost convention. The principal accounting policies adopted are set out below.

#### 1.2 Going concern

At the time of approving the financial statements, the Trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the Trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

#### 1.3 Charitable funds

Unrestricted funds are available for use at the discretion of the Trustees in furtherance of their charitable objectives.

Restricted funds are subject to specific conditions by donors as to how they may be used. The purposes and uses of the restricted funds are set out in the notes to the financial statements.

#### 1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations and trading income are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingentasset.

#### 1.5 Expenditure

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 generating funds 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 charity and include project management carried out in house.

Overheads have been allocated on the basis of actual spend by activity.

#### **Grants**

Grants payable are charged in the year when the offer is made, except in those cases where the offer is conditional, such grants being recognised as expended resources when the conditions attaching are fulfilled. Grants offered subject to conditions which have not been met at the yearend are treated as designated funds and are not accrued as expended resources.

On occasions funds are raised that relate to specific grants that have been awarded in the previous year from unrestricted funds, or for multi-year grants that have been awarded in an earlier year. The funds raised are restricted funds and transfers between funds are made to ensure that the restricted funds are used for their intended purpose.

#### 1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Computers 20% straightline

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in the statement of financial activities.

#### 1.7 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

A subsidiary is an entity controlled by the charity. Control is the power to govern the financial and operating policies of the entity so as to obtain benefits from its activities.

#### 1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

#### 1.9 Stocks

Stocks are stated at the lower of cost and estimated selling price less costs to complete and sell. Cost comprises direct materials and, where applicable, direct labour costs and those overheads that have been incurred in bringing the stocks to their present location and condition. Items held for distribution at no or nominal consideration are measured the lower of replacement cost and cost.

Net realisable value is the estimated selling price less all estimated costs of completion and costs to be incurred in marketing, selling and distribution.

#### 1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

#### 1.11 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

# 2. Critical accounting estimates and judgements

In the application of the charity's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

#### **Critical judgements**

#### **Current asset investments**

All investment assets at year end are categorised as current asset investments. The Trustees have given consideration as to how the investment portfolio is used in the future and believe that the the portfolio is more likely to be utilised/liquidated within a period of one year.

#### Premises costs

The charity utilises office space without payment of rent at the Wythenshawe Hospital. The value of this gift in kind is deemed to be nil as the Trustees are not able to quantify an appropriate equivalent rent.

3 Donations and legacies	Unrestricted funds 2023	Restricted funds 2023	Total 2023	Unrestricted funds 2022	Restricted funds 2022	Total 2022
	£	£	£	£	£	£
Donations and gifts	655,621	548,360	1,203,981	392,064	26,261	418,325
Legacies receivable	55,284	-	55,284	31,114	529,660	560,774
Government grants	-	-	-	9,780	-	9,780
Donated goods and service	es 56,800		56,800	19,000		19,000
	767,705	548,360	1,316,065	451,958	555,921	1,007,879

Funds of £350,000 formally pledged towards the building cost of the National Breast Imaging Academy have not been recognised as income and therefore are not included in restricted funds to 31st March 2023 as they are conditional on the target of £3.83 million being reached to finance the project. To date, £2.01 million has been pledged or donated towards the project and the charity is confident that the remaining funds required will be raised within the next 12 months. Costs incurred applying for the pledged donations have been accounted for in this financial year.

4	Income from investments	Unrestricted funds 2023 £	Unrestricted funds 2022 £
	Interest from investments	11,007	7,523
	Interest receivable	6,329	43
		17,336	7,566
5	Charitable activities Patient Care and Services to the Centre	2023 £	2022 £
	Coffee Bar Income	57,846	40,270
	Donations to the Coffee Bar	1,313	1,364
		59,159	41,634

6	Other trading activities	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Total 2022 £
Fur	draising events	23,530	-	23,530	30,544
Me	rchandise sales	32,661		32,661	42,394
Otł	ner trading activities	56,191		56,191	72,938
For	the year ended 31 March 2022	72,938	-		72,938
7	Expenditure on raising funds			2023 £	2022 £
	Fundraising and publicity				
	Events, income generation and promoti	on costs		52,515	27,936
	Fundraising agents			140,039	49,950
	Staff costs			77,203	45,585
	Support costs			20,834	11,064
	Fundraising and publicity			290,591	134,535
	Trading costs				
	Merchandise costs			9,178	8,751
	Investment management			6,008	5,358
				305,777	148,644



8	Charitable activities	Patientcare /Nightingale Centre	Outreach and Awareness	Publicising research and results	Research grants	Total 2023	Total 2022
		£	£	£	£	£	£
	Staff costs	154,373	120,047	4,920	-	279,340	188,299
	Charitable expenditure	59,770	137,074	6,710	-	203,554	124,284
		214,143	257,121	11,630	-	482,894	312,583
	Grant funding of activities (see note 10)	-	-	-	271,860	271,860	12,198
	Share of support costs (see note 11)	20,686	24,837	1,124	26,261	72,908	35,614
	Share of governance costs (see note 11)	2,958	3,552	161	3,756	10,427	8,644
		237,787	285,510	12,915	301,877	838,089	369,039
	Analysis by fund					<del></del>	
	Unrestricted funds	203,815	244,198	12,915	301,877	762,805	
	Restricted funds	33,972	41,312			75,284	
		237,787	285,510	12,915	301,877	838,089	
	For the year ended 31 March 2022						
	Unrestricted funds	139,600	155,454	15,982	13,861		324,897
	Restricted funds	11,581	32,561				44,142
		151,181	188,015	15,982	13,861		369,039
						-	

#### 9 Trustees

None of the Trustees (or any persons connected with them) received any remuneration during the year, one Trustee was reimbursed their travelling expenses for a total of £104 (2022-£nil).

10 Grants payable	2023	2022
	£	£
Grants to institutions:		
University of Manchester	189,527	-
Oxford Brookes University	29,772	-
University of Southampton	39,871	-
Manchester University Hospital Foundation Trust	12,690	12,198
	271,860	12,198

Grants payable is comprised of grants awarded to fund research into four key pillars: Gene Research, Early Detection and Improved Screening, Lifestyle and Environmental Risk Factors and Risk Reducing Drugs.

#### Grants awarded in the year were for the following projects: -

#### **Gene Research**

Breast cancer in younger women - £39,871 (this project also fits into Early Detection and Improved Screening pillar)

#### **Early Detection and Improved Screening**

Predicting outcomes using microsimulation - £30,000

#### **Lifestyle and Environmental Risk Factors**

Alcohol consumption and increased breast cancer risk - £29,772

#### **Risk Reducing Drugs**

Effects of preventive tamoxifen - £59,564

Investigating prevention using a human tissue ex plant model - £99,963

#### **Research Salary**

Funding towards one weekly session of a Professor Tony Howell's clinical and research time - £12,690

More information about the above projects can be found on pages 15-17.



11 Support costs	Support costs	Governance costs	2023	2022
	£	£	£	£
Staff expenses	6,334	-	6,334	2,369
Staff training	4,561	-	4,561	3,422
Printing and stationery	3,178	-	3,178	3,215
IT/website costs	10,829	-	10,829	7,769
Insurance	3,472	-	3,472	3,012
Bank and Streamline charges	12,602	-	12,602	10,399
Legal and professional charges	28,562	974	29,536	10,726
Other office costs	18,280	-	18,280	866
Payroll	2,800	-	2,800	2,800
Depreciation	516	-	516	84
Audit fees	-	10,260	10,260	8,826
Accountancy	-	1,800	1,800	1,834
	91,134	13,034	104,168	55,322
Analysed between				
Fundraising	18,227	2,607	20,833	11,064
Charitable activities	72,907	10,427	83,334	44,258
	91,134	13,034	104,168	55,322

#### 12 Employees

Number of employees The average monthly number of employees during the year was:		
	2023 Number	2022 Number
Administration	1	2
Operations	1	4
Charitable Activity	7	3
Generating Funds	4	3
	13	12
The full time equivalent for employees during the year was:		
	2023 Number	2022 Number
Administration	1	2
Operations	1	2
Charitable Activity	6	4
Generating Funds	4	3
	12	11
Employment costs	2023 £	2022 £
	£	£
Wages and salaries	322,164	215,812
Social security costs	27,274	13,635
Other pension costs	7,105	4,437
	356,543	233,884
The number of employees whose annual remuneration was £60,000 or more were:		
	2023 Number	2022 Number
£60,000 - £70,000	1	



#### 13 Taxation

The charity is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or section 252 of the Taxationof Chargeable Gains Act 1992 to the extent that these are applied to its charitable objects.

14	Net gains/(losses) oninvestments	Unrestricted funds 2023 £	Unrestricted funds 2022 £
	Revaluation of investments	(35,150)	(14)
	Gain/(loss) on sale of investments	-	5,320
		(35,150)	5,306
15	Tangible fixed assets		Computers £
	Cost		
	At 1 April 2022		2,679
	Additions		1,943
	At 31 March 2023		4,622
	Depreciation and impairment At 1 April 2022		1,407
	Depreciation charged in the year		515
	At 31 March 2023		1,922
	Carrying amount At 31 March2023		2,700
	At 31 March 2022		1,272
16	Stocks	2023 £	2022 £
	Finished goods and goods for resale	23,157	14,848

17	Debtors	2023 £	2022 £
	Amounts falling due within one year:		
	Trade debtors	503	7,748
	Other debtors	23,855	20,000
	Prepayments and accrued income	10,804	2,987
		35,162	30,735

18	Fixed asset investments			Other investments
	Cost or valuation			
	At 1 April 2022			1
	At 31 March 2023		_	1
	Carrying amount			
	At 31 March 2023			1
	At 31 March 2022		=	1
			2023	2022
Oth	er investments comprise:	Notes	£	£
Inve	estments in subsidiaries	27	1	1

#### Fixed asset investments revalued

Other investments are held at historical cost whilst the listed investments are held at their fair value.



19	Current asset investments					2023 £	2022 £
	Listed investments					794,241	543,384
Inclu	ided in current asset investmen	ts is £25,160 (2)	022: £17,646)	of cash held v	vithin the portfo	olio.	
20	Creditors: amounts falling d	ue within one ye	ear			2023 £	2022 £
	Other taxation and social se	curity				5,138	4,333
	Trade creditors					41,397	54,149
	Grants payable					182,161	22,119
	Other creditors					4,444	2,841
	Accruals and deferred incom	ne				56,502	35,246
						289,642	118,688
21	Creditors: amounts falling d	ue after more th	an one year			2023 £ 84,918	2022 £
21		ue after more th  Unrestricted funds 2023	Restricted funds 2023	Total 2023	Unrestricted funds 2022	£	
	Grants payable  Analysis of net assets	Unrestricted funds	Restricted funds		funds	£ 84,918  Restricted funds	£ - Total
	Grants payable  Analysis of net assets	Unrestricted funds 2023	Restricted funds 2023	2023	funds 2022	Restricted funds 2022	£ - Total 2022
	Grants payable  Analysis of net assets between funds  Fund balances at 31 March	Unrestricted funds 2023	Restricted funds 2023	2023	funds 2022	Restricted funds 2022	£ - Total 2022
	Grants payable  Analysis of net assets between funds  Fund balances at 31 March 2023 are represented by:	Unrestricted funds 2023 £	Restricted funds 2023	2023 £	funds 2022 £	Restricted funds 2022	£ Total 2022 £
	Grants payable  Analysis of net assets between funds  Fund balances at 31 March 2023 are represented by: Tangible assets	Unrestricted funds 2023 £	Restricted funds 2023	2023 £ 2,700	funds 2022 £ 1,272	Restricted funds 2022	£ Total 2022 £
	Grants payable  Analysis of net assets between funds  Fund balances at 31 March 2023 are represented by: Tangible assets Investments Current assets/(liabilities)	Unrestricted funds 2023 £  2,700 1 647,936	Restricted funds 2023 £	2023 £ 2,700 1 1,811,045	funds 2022 £ 1,272	Restricted funds 2022 £	£ Total 2022 £ 1,272
	Grants payable  Analysis of net assets between funds  Fund balances at 31 March 2023 are represented by: Tangible assets Investments	Unrestricted funds 2023 £	Restricted funds 2023 £	2023 £ 2,700 1	funds 2022 £ 1,272	Restricted funds 2022 £	£ Total 2022 £ 1,272

#### 23 Restricted funds

The income funds of the charity include restricted funds comprising the following unexpended balances of donations and grants held on trust for specific purposes:

	Movement in funds M						Movemen	Movement in funds		
	Balance at 1 April 2021 £	Incoming resources	Resources expended £	Transfers £	Balance at 1 April 2022 £	Incoming resources	Resources expended £	Transfers £	Balance at 31 March 2023 £	
Asian Women's Health Awareness Project	16,786	-	-	-	16,786	-	-	-	16,786	
Breast cancer awareness videos	-	2,200	2,162	-	38	210	(248)	-	-	
Research Salary	-	1,200	-	(1,200)	-	-	-	-	-	
Clotting and Breast Density	-	44,160	-	(44,160)	-	-	-	-	-	
BRCA2 and PALB2	-	11,853	-	(11,853)	-	22,787	-	(22,787)	-	
Forget-me-not2	-	220	-	(220)	-	-	-	-	-	
BRCA Gene PHD Research	-	487,500	-	-	487,500	-	-	-	487,500	
Addressing Health Inequalities	-	10,000	-	-	10,000	100	-	-	10,100	
Outreach and Awareness (Health Promotion)	-	30,399	30,399	-	-	38,564	(38,564)	-	-	
Building a National Breast Imaging Academy (NBIA)	236,767	(38,271)	-	-	198,496	39,207	-	-	237,703	
NBIA Fundraising Campaign	4,921	6,660	11,581	-	-	19,804	(19,804)	-	-	
Creating a Breast Imaging Training Suite	-	-	-	-	-	411,020	-	-	411,020	
Defining the Effects of Preventative Tamoxifen	-	-	-	-	-	10,000	(10,000)	-	-	
Alcohol Consumption and Breast Cancer	-	-	-	-	-	4,168	(4,168)	-	-	
Awareness event at House of Commons	-	-	-	-	-	2,500	(2,500)	-	-	
	258,474	555,921	44,142	(57,433)	712,820	548,360	(75,284)	(22,787)	1,163,109	

Transfers between funds are made to represent amounts where expenditure for restricted causes has been recognised in unrestricted funds prior to the incoming related resources.

#### 23. Restricted funds

#### **AWHA** projects

The Asian Women's Health Awareness Campaign will research how to better promote the importance of breast screening to ethnic minority communities from South Asia. This work was paused due to the pandemic but will be continued in the next financial year.

#### Breast cancer awareness videos

To develop a library of video content covering a range of breast cancer related topics.

#### **Research Salary**

Funding towards one weekly session of Professor Tony Howell's clinical and research time.

#### **Clotting and Breast Density**

Previous research funded by Prevent Breast Cancer found that there is a relationship between DCIS (ductal carcinoma in-situ), a common precancerous condition, and blood clotting caused by fibroblasts. Following on from this, our research team are examining whether the fibroblasts in high-density breast cells create a wound-like environment which increases clotting and causes normal breasts to develop cancer and benign cases of DCIS to become invasive.

#### **BRCA2 and PALB2**

Gene research studying a new biological mechanism called "epigenetic silencing" whereby gene abnormalities that greatly increase a woman's risk of getting breast cancer may be left undetectable by standard gene testing.

#### Forget-me-not 2

An early detection and screening research project, which will study the progression of breast cancer in patients with DCIS (ductal carcinoma in-situ), in order to better understand over-diagnosis.

#### **BRCA Gene PHD Research**

Restricted income received from a legacy will enable the Prevent Breast Cancer scientists to continue their research into how the BRCA genes work and why they cause such a dramatic increase in breast cancers.

#### Addressing Health Inequalities

Funds to enable the charity to develop its strategy and expand its outreach work and communication campaigns aimed at communities around Greater Manchester where uptake of breast screening is low.

#### **Outreach and Awareness (Health Promotion)**

Activity (in person and online) which seeks to raise awareness of breast cancer signs, symptoms and risk factors and the importance of breast screening among women.

### Building a National Breast Imaging Academy (NBIA)

A capital project to raise funds to build a National Breast Imaging Academy (NBIA), which will be attached to The Nightingale Centre and Prevent Breast Cancer Research Unit in Manchester. More information about this project can be found within the Trustees' Annual Report.

#### **NBIA** fundraising campaign

Funding secured to assist with the research and planning phase required to launch and operate our capital campaign which aims to raise funds to build a National Breast Imaging Academy (NBIA).

#### **Creation of a Breast Imaging Training Suite**

Refurbishment of existing space within The Nightingale Centre to create a multi-functional training suite, which will form part of the wider National Breast Imaging Academy programme.

#### **Defining the Effects of Preventative Tamoxife**

Research to compare the make-up of breast tissue from women in clinical trials before and after they take preventative drugs, to find markers of whether women are responding or not to the intervention.

#### **Alcohol Consumption and Breast Cancer**

Study to investigate the best ways to increase awareness of the link between alcohol and breast cancer risk in middle-aged women.

#### **Awareness Event at House of Commons**

Event co-hosted by MP Mike Kane to raise awareness of the charity and the need for a National Breast Imaging Academy.

#### 24 Operating lease commitments

2023 2022 £ £

At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:

Within one year	1,498	2,393
Between two and five years	3,369	1,196
	4.867	3.589

#### 25 Designated funds

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

_	Balance at 1 April 2021 £	Expenditure £	Transfers £	Balance at 1 April 2022 £	Expenditure £	Balance at 31 March 2023 £
Research salaries	12,198	(9,148)	-	3,050	-	3,050
NBIA	150,000	-	-	150,000	-	150,000
Database & refurbishments	-	-	40,000	40,000	(11,008)	28,992
Grants			200,000	200,000	(200,000)	
	162,198	(9,148)	240,000	393,050	(211,008)	182,042

The designations are £150,000 to the funding of the NBIA project, a designation of £3,050 towards the funding of a research salary and £28,992 towards improvements to the centre and database processes.

#### 26 Related party transactions

2023 2022 £ £

Remuneration of key management personnel
The remuneration of key management personnel is as follows.

Aggregate compensation

181,964 103,979

During the year fees of £nil (2022: £716) were paid to JMG Legal Ltd. This firm is considered a related party as Joe Glass (a Director of JMG Legal) is married to Pam Glass and is also the Company Secretary. No creditor remained outstanding at the year end (2022: Nil).

During the year fees of £1,122 (2022: £nil) were paid to Original Funbags. This company is considered a related party as Tammy Hopla (director of Original Funbags) is also a Trustee of Prevent Breast Cancer. No creditor remained outstanding at the year end (2022: £nil).

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine is a director. The estimated value of such services is £2,800 (2022: £2,800) and therefore an equivalent amount has been included within gifts in kind.

#### 27 **Subsidiaries**

Details of the charity's subsidiaries at 31 March 2023 are as follows:

Name of undertaking	Registered office	Nature of business	Class of shares held	% Held Direct Indirect
Prevent Breast Cancer Trading Company Limited	England	Dormant	Ordinary	100.00

#### 28 Analysis of changes in netfunds

The charity had no debt during the year.

29	Cash generated from operations	2023 £	2022 £
	Surplus for the year	269,735	617,626
	Adjustments for:		
	Investment income recognised in statement of financial activities	(13,953)	(7,566)
	Gain on disposal of investments	-	(5,320)
	Fair value gains and losses on investments	29,141	14
	Investment charges	6,008	5,358
	Depreciation and impairment of tangible fixed assets	515	84
	Movements in working capital:		
	(Increase) in stocks	(8,309)	(3,702)
	(Increase)/decrease in debtors	(4,427)	113,070
	Increase/(decrease) in creditors	255,872	(144,152)
	Cash generated from operations	534,582	575,412

















breast cancer















#### **Prevent Breast Cancer**

The Nightingale Centre and Prevent Breast Cancer Research Unit Wythenshawe Hospital Southmoor Road Manchester, M23 9LT

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