

Annual Report and Financial Statements

For the year end 31 March 2022



**ANTHONY
NOLAN**

saving the lives
of people with
blood cancer

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Trustees, Strategic Leadership Team, Supporters and Advisors

Patron

Olivia Colman CBE

Life President

Simon Dyson MBE

Board of Trustees

Chair

Nicola Horlick

(appointed Chair on 22 July 2021)

Ian Krieger

(until 22 July 2021)

Vice Chair

Carol MacKinnon

Chair of the Audit and Finance Committee

Carol MacKinnon

Chair of the Governance and Risk Committee (Est 20 January 2022)

Martin Laws

Chair of the Nominations Committee (Previously known as the Governance, Nominations and Remunerations Committee prior to 20 January 2022)

Nicola Horlick

Trustees

Mike Altendorf ⁴

Dr Leanne Armitage ⁵

Dr Susan Conroy ⁵

Nicola Horlick ^{1 2 3 4}

Dr James Kustow

Martin Laws ^{1 2 3 4}

Carol Mackinnon ^{1 3 4}

Matt Miller ⁵

Mark Ritson

Dr Ann Robinson ^{3 4}

Simon Spyer ²

Olivier Zucker ^{1 6}

¹ Audit and Finance Committee Member

² Governance and Risk Committee Member

³ Governance, Nominations & Remuneration Committee Member (until 20 January 2022)

⁴ Nominations Committee Member (appointed 20 January 2022)

⁵ Appointed as Trustee 20 January 2022

⁶ Retired as Trustee 27 July 2022

External Medical Advisor

Professor Charles Craddock CBE

Strategic Leadership Team

Chief Executive

Henny Braund MBE

Chief Bioinformatics and Immunogenetics Officer

Professor Steven Marsh

Chief Digital and Information Officer

Danny Attias

(until 24 September 2021)

Laura Phillips

(Interim 2 September 2021 – 31 March 2022)

Mark Reid

(Interim appointed 3 May 2022)

Chief Engagement and Marketing Officer

Terence Lovell

Chief Financial Officer

Ian Deans

Chief Medical and Scientific Advisor

Professor Antonio Pagliuca

Chief Operating Officer

Nicola Alderson

Chief Strategy Officer

Hugh Allen

Anthony Nolan

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Administrative Address

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England And Wales Charity

Registration Number

803716

Scotland Charity Registration Number

SC038827

Company Registration Number

02379280

Company Secretary

Samantha Durling

Independent Review Board for Cell and Gene Therapies

Chair

Dr Laura Machin

Senior Lecturer in Medical Ethics at Lancaster University

Co-Chair

Salmah Ahmed

Director of Quality and Regulation at Anthony Nolan

Consultants

Dr Victoria Potter

Haematology Consultant at King's College Hospital NHS Foundation Trust

Dr Emma Nicholson

Haematology Consultant at Royal Marsden Hospital NHS Foundation Trust

(until September 2021)

Professional Advisors

Independent Auditors

BDO LLP

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London W1U 7EU

Bankers

Barclays Bank plc

1 Churchill Place, London E14 5HP

Solicitors

Bates Wells

10 Queen Street Place,

London EC4R 1BE

Investment Manager

Smith & Williamson

Investment Management

25 Moorgate, London EC2R 6AY

Chair's introduction

Our commitment to give as many people with blood cancer and blood disorders a chance of life has only strengthened, as we strive to represent and listen to our patients across every aspect of our work.

It was a great honour to be appointed Chair of the Trustees of Anthony Nolan in July 2021. My eldest daughter was diagnosed with leukaemia in 1989 when she was only two years old. Having relapsed twice, she eventually received a bone marrow transplant at Great Ormond Street Hospital when she was eleven through a donor sourced from Anthony Nolan. Sadly, she died a few months after the transplant but my admiration for Anthony Nolan's work has always remained. I know that she would have wanted me to help the charity.

Saving and improving lives

Anthony Nolan's aim is to save the lives of everyone who needs a stem cell transplant, and to ensure that they have the best possible quality of life. When the pandemic first took hold in early 2020, we did not anticipate that the effects would last for so long. I have been amazed by the way the team has dealt with this extremely difficult situation and, despite the obstacles that have constantly been put in their way, ensured patients received the stem cell transplants that they so desperately need to give them a chance of recovery. I would like to congratulate everyone at Anthony Nolan who worked so hard to make this possible.

A key issue for patients during the pandemic was priority access for vaccinations, giving them the best chance of being protected against COVID-19. Our team worked closely with the Joint Committee on Vaccination and Immunisation with great success. There was concern that cancer patients were being left behind at the height of the pandemic and we arranged for patients and carers to talk to MPs and MSPs as part of our **Stop Patients Being Left Behind** campaign. Patients' stories were also a cornerstone of a report, produced following a joint enquiry of the All-Party Parliamentary Group (APPG) on Stem Cell Transplantation and Advanced Cellular Therapies, and APPG on Blood Cancer, urging the government to ensure patient services were equipped to recover.

It's our patients voices that drive and form so much of our work. What patients have told us about their experiences, including diagnosis, treatment, and recovery, that has been the catalyst for change, and helped all patients receive the right information about protection and support.

Our team did a brilliant job in overcoming these obstacles, allowing our patients to receive treatment.

One of our main aims as a charity is to make sure that everyone, irrespective of their ethnic and social background, has access to the treatment that they need to save and improve their lives. Tissue types are defined by genetics, for which ethnicity plays a key role. We need to continue our work to include more donors from diverse ethnic backgrounds on our register in order to help more patients to overcome their disease. As well as looking to have a greater ethnic diversity amongst our donors in the UK, Anthony Nolan is working closely with other countries to help build their own registers, providing a greater chance of finding the best possible donor match for our patients from minority ethnic groups in the UK, as well as helping patients in their country too. Alongside the register, we have also continued to add to our cord blood bank, which means we can help even more patients receive a stem cell transplant if they can't find an unrelated donor match.

Looking ahead

I would like to thank my predecessor, Ian Krieger, for the guidance and counsel that he gave to the Strategic Leadership Team during his time as Chair of Anthony Nolan. I would also like to thank Lionel Cashin, Sir Peter Robinson, and Brian Turner CBE, who retired as Trustees during the year and whose dedication to the charity over very many years was greatly appreciated. In the current year, Olivier Zucker and Simon Spyer will be retiring from the Board and I would like to thank them for their valued contributions over the years that they have been involved with the charity. In particular, I would like to thank Olivier for the guidance that he has provided to the Trustees in relation to the Charity's investments.

I am delighted to welcome Leanne Armitage, Susan Conroy, and Matt Miller to the Board, and they are already making a significant contribution to the organisation. During the recruitment process to find our new Trustees, we made sure that we advertised the posts widely so that the leadership of the charity better reflects the diversity of our patients and supporters.

In September last year, we began work on our next five-year organisational strategy with the overarching aim of saving more lives and giving our patients the best quality of life. We started the process with a joint session of the Board and Strategic Leadership Team, and we are looking to agree the strategy later this year, with a view to implementing it in 2023.

I would like to congratulate the team at Anthony Nolan again for the fortitude and perseverance that they have shown over the course of the pandemic. Henny Braund MBE, the CEO, and her senior team have shown incredible leadership and everyone at Anthony Nolan has played a part in the success of the organisation during this unprecedented period and I am extremely grateful.



Nicola Horlick

Nicola Horlick
Chair

The year in numbers

Throughout 2021/22 our lifesaving work has continued to thrive. Here, we put the results of that work into numbers:



1,365

patients were given a second chance of life.

Our patients

23,872

engagements with our Patients Services team across phone, email, Facebook, and Patients and Families Forum.

70

patients, family members, and nurses accessed our Telephone Emotional Support Service.

5,065

downloads and requests for our patient information booklets.

10

healthcare posts funded, 5 Clinical Nurse Specialists and 5 Clinical Psychologists.

288

patient grants provided, totalling £78,000.



876,130

potential donors active on the Anthony Nolan stem cell register.

(At the end of 2021/22)

Our stem cell donors

41,202

people signed up to the stem cell register.

6,136

people were recruited by volunteer student groups Marrow.

17%

of potential donors on the stem cell register have their CMV statuses processed and recorded (145,000 donors).

16,000

CMV statuses were processed by our labs.

12%

of new potential donors are from minority ethnic backgrounds.



£9M

was raised and donated by our dedicated supporters and partners.

Our supporters

421m +

times our online press and media have been seen, carrying key messages about who we are, what we do, and the difference we make.

220,000+

people now follow us on social media.

1,083

people took on a challenge event for Anthony Nolan.



over

24,000

transplants facilitated since the organisation began in 1974.

Our operations

575

journeys were taken by 55 volunteer couriers to transport stem cells between donors and patients in need.

68

published scientific journal articles were written or contributed to by Anthony Nolan Institute Researchers.

165

cord transplants facilitated for UK and international patients.

26

countries received stem cells for patients from Anthony Nolan donors.

373

provisions of adult stem cells, cord blood or cord tissue to external researchers or organisations for cell and gene therapy services.

What we do

Anthony Nolan saves the lives of people with blood cancer and blood disorders. We do this by connecting people in need of a stem cell transplant with incredible strangers ready to donate their stem cells.

This has been the core of Anthony Nolan's work since the organisation first began in 1974. Today, our lifesaving operations extend far further. We combine this immediate lifesaving function with ground-breaking research, emerging cell therapy treatments, and specialised patient services. We also advocate for our patients to make sure they receive all the support and services they need, and use the insight from our work to influence policy and practice.

Working together, we give three people a second chance of life every day.

Our vision

To save and improve the lives of everyone who needs a stem cell transplant.

We're still driven by the same cause which inspired Shirley Nolan to found the organisation, when she was searching for a matching donor for her son Anthony.

Our Values

Every day, we live and breathe our values to ensure that we can deliver the best for everyone. From transplant patients, to partners, supporters, and employees. Five values guide our work, which commit us to always be:

- Accountable
- Passionate
- Patient focused
- Innovative
- Improving every day

A year of change

2021/22 has been another year of uncertainty and adjustment. The world looks very different from when we first set our strategy: **Together, We Can Save Lives** in 2019.

In collaboration with our trustees, employees, patients, donors and supporters, we set our strategic direction across five aims:

Aim 1: Together, we can provide outstanding services for patients and the community.

Aim 2: Together, we can drive lifesaving research and turn it into action for patients.

Aim 3: Together, we can harness the collective power of our supporters to champion and enable our lifesaving work.

Aim 4: Together, we can be a stronger voice for patients to ensure they receive the best possible care.

Aim 5: Together, we can.

Part way into the execution of this strategy, the COVID-19 pandemic presented several challenges to address:

1. How could we continue to deliver outstanding services to our patients and the clinical community despite serious strain on NHS capacity, and significant changes to our operations?
2. How would the pandemic affect how we conduct research and how we engage with our partners?
3. How could we amplify the voices of our patients, ensuring that they are heard, protected, and supported to live quality lives despite the risks posed by COVID-19, and the restrictions they faced?
4. How could we meaningfully engage our community of supporters throughout lockdowns, and restrictions?
5. How could we deliver our strategy while most employees are working from home?

Taking this into account, last year, the Board agreed to extend this strategy by one year to 2023, providing stability in the medium term and allowing us to focus on delivering for our patients.

Since then, the continuing impact of Brexit, concerns around the cost of living, and the lingering presence of COVID-19 have presented unique challenges for the organisation, transplant community, and our patients. All of which have required us to respond with agility and innovation within a changing context.

However, the hallmark of a great strategy is being able to learn from and adapt to this changing environment.

Our strategy was designed with inevitable uncertainty in mind, enabling us to quickly respond to change and be instrumental in shaping the world around us, to promote the interests of our patients. So, in 2021, as we started to plan for the year ahead, we asked ourselves:

How can we emerge from the pandemic a more resilient and focused organisation, delivering an even greater impact for our patients?

This past year has presented us with opportunities to develop as one Anthony Nolan. There is so much more that we do today that we thought impossible just a few years ago. All of which has contributed to the achievement of our five strategic aims as outlined in our **Strategic Report**.

Such as:

- Maximising our influence as an international leader to ensure that global stem cell supply is resilient, while safeguarding donors.
- Harnessing opportunities to generate more income through our operational services, to reinvest into our lifesaving work.
- Working as a leader of the UK transplant community, bringing together policymakers, patients, and the clinical community to collaborate and find solutions.
- Striving to transform our digital capability and deliver a new website through our **Transform programme**, so that we can offer improved services to transplant centres, donors, patients, and our supporters, and make better use of data to support evidence-based decisions.
- Continuing to nurture an organisational culture that reflects and celebrates the diversity and inclusivity of Anthony Nolan, both for our people and in the ways they work.

Striving for better, for all

Our unwavering commitment is to provide our patients with equity of access to viable treatment options, to give them the best possible chance of survival and quality of life post-transplant.

However, despite the progress we have made in growing our donor register and undertaking extensive research, not every patient can find their lifesaving match.

The reality is that:

- Just 50% of adult patients survive the first five years after transplant.
- People from minority ethnic backgrounds are significantly less likely to find the best possible matching unrelated donor than people from White Northern European backgrounds.
- Undergoing a stem cell transplant can be an isolating and a financially draining experience for patients and their families. Currently, not every patient receives the support they desperately need.

These are all pressing issues, and we know we urgently need to address them. Anthony Nolan is uniquely placed to tackle these challenges, bringing a donor registry, world renowned expertise, service delivery, and powerful advocacy together in one organisation. We are committed to strive for better outcomes for every patient, at every stage of their transplant journey.

Using a three-pronged approach, over 2021/22 we have worked to:

Improve access to treatments

- Funding partnerships and promoting patient stories to encourage more people from minority ethnic backgrounds to join our register as potential donors. As crucial as this is, a broader approach is needed if we are to tackle the challenges above holistically. So, in addition to more targeted donor recruitment we are:
 - Banking a higher proportion of cord blood units donated by parents from minority ethnic backgrounds and promoting the use of cord as an effective treatment option in transplant centres.
 - Increasing the number of donors from minority ethnic backgrounds who supply cells for research, helping to increase the availability and accessibility of novel treatments in the future.
 - Supporting and working with registries around the world to increase the number of donors globally, giving more patients from minority ethnic backgrounds the chance of finding their optimal donor.

Improve access to care and support

- Expanding our team of funded Clinical Nurse Specialists (CNS), Clinical Psychologists (CP) and Adopted Posts who offer tailored and expert support to patients at every stage of their transplant journey.
- Working to ensure our suite of information and cord consent forms are accessible to more donors, patients, and their families, through translation and text to speech technology.
- Providing hardship grants to patients most in need of support with the costs associated with treatment and recovery.

Improve our understanding of what leads to a successful transplant and better quality of life

- Continuing to undertake and fund research to ensure that our services and register meet the needs of an increasingly diverse population.
- Scoping an initiative to gain a clearer understanding of the socioeconomic factors that influence the outcomes of treatment and quality of life.

None of this work would be possible without the incredible efforts of our employees, working with and being guided by the voices and experiences of patients – those at the heart of the work we do. Working together, along with our supporters and volunteers, we will continue to be an organisation where everyone is able to be involved in a meaningful way, so that we can achieve more for our patients in the future.

What we achieved in 2021/22

We continued working towards our vision to save and improve the lives of everyone who needs a stem cell transplant.

In 2021/22 we gave 1,365 patients a second chance of life in the UK and internationally. A number that was only possible due to an incredible amount of determination, ingenuity, and collaboration.

This year, we made real progress towards achieving our five strategic aims outlined in 2019.

Aim 1:

Together, we can provide outstanding services for patients and the clinical community

Anthony Nolan's work is centred around finding the best possible donor matches for patients, giving them the best possible chance of survival, and the highest standard of support throughout their transplant journey.

To achieve this aim, collaboration with patients and the clinical community is vital. We must truly understand their needs to co-design and fund services that fill gaps in patient care and reflect best practice.

We're working hard to explore and support the development of innovative treatments that will give patients more options and better outcomes.

What do we want the future to look like?

1. The **time to transplant will have been reduced**, meaning that patients receive the treatment they need in the fastest time possible, which is shown to improve survival outcomes.
2. More **patients will receive the care they need** throughout their transplant journey, thanks to our innovative services and advocacy.
3. We will be using our expertise and infrastructure to **support the development of innovative treatments for patients**.

What we achieved in 2020/2021:

1. Patients received the treatment they needed in the fastest time possible

Finding matching donors for patients requires complex and time-critical work. We're always working on understanding this process to find ways to reduce time to transplant and to improve the quality of matches.

- **We rolled out CMV (cytomegalovirus) testing at recruitment for all donors.** We also led a Donor Enrichment programme to encourage existing donors to test for CMV, to enhance our existing register. Matching CMV statuses of donors and patients significantly improves the chances of patient survival and decreases the risk of post-transplant complications. **Our register now contains the CMV status of 145,000 potential donors, approximately 17% of the total.** We will continue to expand the number of CMV statuses available on our register.
- We initiated our **Aspire programme** which will allow us to work in collaboration with transplant centres to streamline the services we deliver. It will help us better understand how we can improve these services, ensure that donated cells reach our patients in the fastest time possible, and remove any barriers to the selection of our donors.
- Initially used as an emergency response to pandemic restrictions, we rolled out **cryopreservation of adult stem cells** as a formal service for transplant centres and our commercial partners. This enables us to store fresh cells for longer periods of time and mitigate any delays in transportation.
- We continued to **promote the use of umbilical cord blood for transplantation.** Cord blood offers a crucial alternative for people without an unrelated donor match on the register, because the stem cells found in umbilical cords can adapt to a wide range of tissue types and are able to tolerate greater levels of mismatch. This helps to ensure more patients have a viable treatment option. Exploring the potential to develop 'off the shelf' treatments for patients remains a priority for our new strategy.
- Our Cord Support Programme helps UK transplant centres build confidence and expertise in using cord blood units for transplants. As a result, **the number of cords used for transplants in the UK has increased for the fourth year in a row, and this year, we collected our 10,000th cord!**
- We began work to create translated versions of our cord consent forms, so that more people will be able to comfortably understand the process of donation and be encouraged to donate their baby's umbilical cord. Material will soon be rolled out in Arabic, Farsi, Urdu, Bengali, and Kurdish, which are the most common languages requested from NHS translation services.
- We utilised Next Generation Sequencing (NGS) which enables our team to get stem cells from donor, to lab, to patient, quicker than ever before. NGS analyses DNA sequences with speed and accuracy, mapping, and matching genes one by one, meaning we can deliver lifesaving cells faster.

2. More patients received the care they needed throughout their transplant journey

We know that patients undergoing treatment need tailored support to navigate the unique challenges they face. From helping to manage the physical side-effects, to providing psychological and financial support, we are working hard to deliver the care our patients need, whenever they need it.

- **We awarded over £78,000 in financial grants to 288 applicants** between 2021 and 2022. These grants help with costs related to transplants, including travel to appointments and purchasing household equipment to reduce the risk of infection after transplant. In response to the pandemic, grants have been expanded to support people shielding or unable to work.
- With the easing of pandemic restrictions, **demand for support from our Patient Services team has increased**, as patients and their families try to fully understand changing advice and legislation. Now in its second year, our funded Telephone Emotional Support Service saw a 25% increase in referrals of people needing to talk to a trained professional about their experiences. Our Patient Helpline, email, and forums have seen similar increases in enquiries.
- Anthony Nolan's Clinical Nurse Specialists (CNSs) and Clinical Psychologists (CPs) continued to offer tailored and expert support to patients at every stage of their transplant journey. Over the course of 2021/22 we fully funded five CNSs and five CPs alongside 14 adopted posts covering a range of professions in the NHS through the Anthony Nolan Clinical Adoption Programme pilot, providing additional support and helping to develop new treatment pathways and clinical guidance.
- Working closely with patients, healthcare professionals and charity partners, we began to develop new resources for sickle cell patients. Stem cell transplants are increasingly offered as potentially curative treatment options and these resources aim to help patients understand the procedure. Sickle cell diseases are inherited conditions which disproportionately affect people from African and Caribbean backgrounds and often require a lifetime of pain management.
- To ensure everyone can access our support and information in a way that is meaningful for them, we have conducted an **accessibility audit and tested translation software on our patient information webpages**, which we will launch across the whole site in the coming year.
- We continue to **support improved clinical guidelines** in areas that directly impact patient outcomes. For example, we helped to write the British Society of Blood and Marrow Transplantation and Cellular Therapy's (BSBMTCT) guidelines on the management of COVID-19 in transplant centres, and we are developing a consensus statement on secondary cancer screening post-transplant as part of our work to improve access to post-transplant care.

3. We supported the development and expansion of innovative treatments for patients

Novel cell therapies, such as CAR-T therapy, where a patient's own immune cells are collected and modified to fight cancer cells, can be used to treat a range of conditions including blood cancer and blood disorders. We are using our expertise, reputation, and infrastructure to support the development and delivery of these novel treatments.

- We expanded the diversity of our research donors so that more people have the opportunity to shape treatments of the future. As part of our Cell & Gene Therapy Services, cells from Anthony Nolan research donors (in addition to cord blood and tissue collected through our cord blood programmes) are being used to **support the development of new cell therapies**. These living drugs will provide new treatment options for patients with blood cancer and blood disorders, as well as potential therapies for other conditions.
- We continued to build capacity and capability at our Cell Therapy Centre in Nottingham. Colleagues at the Centre are currently exploring the efficacy of using cryopreservation to store and preserve cells used in CAR-T therapy.

Aim 2:

Together, we can drive lifesaving research and turn it into action for patients

Our research has had a profound effect on patient's lives. But we know we have so much more to learn.

We aspire to be pioneers in discovering the full range of factors that influence the success of stem cell transplants and to be drivers of change by ensuring patients have access to the benefits of research sooner. To achieve this, we continue to work in partnership with the clinical community and with patients to ensure our research reflects their needs and ambitions.

What do we want the future to look like?

- 1.** We will understand more about the factors that influence the success of a transplant, and this will be reflected in clinical practice.
- 2.** More transplant patients, including children and young adults, will be participating in clinical trials, and the findings from these studies will improve treatment and care.
- 3.** The Anthony Nolan Research Institute (ANRI) will be a leading, action-focused platform for patients and the clinical research community, working together to achieve shared goals.

What we achieved in 2020/2021:

1. Increased our understanding of the factors that influence the success of a transplant

Despite pandemic restrictions, ANRI has continued to improve our understanding of stem cell transplantation across key research areas.

Finding the perfect match

- Our long-running Patient/Donor project monitors the progress of over 2,500 transplants, **identifying the factors that influence patient outcomes, survivorship, and therefore donor selection.**
- Despite disruption, we managed to maintain a recruitment level of 65% of patient/donor pairs who underwent an unrelated donor transplant facilitated by Anthony Nolan.
- Our Sequel Project has been accelerated, allowing us to **increase the number of genes we can sequence at any one time.** This project enabled time and cost savings through an optimised research typing system. We have made improvements in accuracy through changes to the sample multiplexing strategy for our new Pacific Biosciences (PacBio) Sequel technology.

Reducing post-transplant complications

- Our immunotherapy group looks at how stem cells rebuild the immune system after transplant, and how to find ways to **reduce post-transplant complications** like acute graft versus host disease (GvHD). In partnerships with researchers at the Banc de Sang I Teixits (BST) in Barcelona, we're working to develop an eye treatment to alleviate the painful symptoms of ocular GvHD using cord blood plasma.
- Alongside industry partners at ONK Therapeutics, we have been focussing on **harnessing the power of natural killer cells (NK)**, a type of white blood cell, which can target malignant cells and can be used to treat relapse in patients after transplant.

Translating research into practice

- To ensure that our register meets the needs of an increasingly ethnically diverse population, we continued to **use bioinformatics to gain insight into the rich genetic variation** in the UK donor registry, and to identify gaps that can inform our register enrichment activity and strategic **collaborations with international registries.**
- We began our Research Data Manager Pilot Project in June. This 12-month pilot project aims to demonstrate how **additional, on-the-ground support can improve access to up-to-date and accurate patient outcomes data**, enabling us to further advance the field of donor selection.
- Our Socio-economic Impact on Quality of Life (SeQoL) research project has been revised after being paused during the pandemic. Findings will help us to **better understand the impact of socioeconomic factors on patients' quality of life and experiences**, which will generate rich evidence to influence policy and practice change.

2. More patients participated in clinical trials to help improve the future of treatment and care

- In December 2021, the **IMPACT clinical trials partnership**, of which Anthony Nolan is a founding funder, formally concluded following a successful five-year pilot. Earlier in the year, it reached the impressive milestone of 1,000 patients recruited to the seven prospective studies open on the portfolio. A new initiative has now been launched to provide a financially sustainable model for the design and delivery of new transplant and blood cancer trials, reflecting the IMPACT model. Anthony Nolan is contributing funding to this initiative and will play a role in its strategic oversight.

3. Strengthened the Anthony Nolan research community

- **ANRI delivered 40 publications in 2021, with 19 currently published or due in 2022.** Six abstracts from our papers were selected for presentation at the European Immunogenetics & Histocompatibility conference in Amsterdam in May. A further 2,800 citations of Anthony Nolan papers were achieved in 2021, bringing our total citations over the last 40 years to 33,000. This is significant progress towards our aim to inform clinical practice that will improve patient outcomes, and also raises our profile as a science-led medical research charity.
- We received £232,000 in funding from the **Medical Research Council** (MRC) for our work in retaining young researchers during the pandemic. The funding aims to protect the pipeline and support of early career researchers and future research leaders.
- Several collaborative **academic and industry partnerships** have been secured this year. These include:
 - Edinburgh University – a project to develop biomarkers for enhanced cord blood selection, with a view to improving survival outcomes for recipients.
 - An EU Grant – a project to develop a cell therapy for treatment of sepsis as a post-transplant complication.
 - ONK Therapeutics – a biotechnical organisation seeking to develop cell therapy treatments for myeloma and other cancer sites.

Aim 3:

Together, we can harness the collective power of our supporters to champion and enable our lifesaving work

Together, we are at our most powerful. Working with our community of patients, families, donors, volunteers, and employees we can achieve far more than we could alone.

That is why it is important for more people to know about Anthony Nolan, believe in the impact we are making, and have the opportunity to get involved in a meaningful way.

The more people who are involved, the more lives we can save.

What do we want the future to look like?

- 1.** More people will know about the impact of Anthony Nolan, and working with our community of supporters, patients, and their families, we will have continued to develop exciting and compelling ways to get involved to save and improve more lives.
- 2.** More potential lifesavers will have joined our register, particularly those from our target groups, so that we can find more patients the matching donors they need.
- 3.** We will have increased funding through more diverse channels that can sustainably support our ambitious and lifesaving goals.
- 4.** We will unlock the power of technology and digital to drive meaningful engagement and deepen relationships with our supporters.

What we achieved in 2021/22

1. More people know about Anthony Nolan and are involved in our lifesaving work

We've been working hard to raise awareness of Anthony Nolan and our work, to inspire a more diverse group of people to join our community of supporters, to expand our reach across audiences, and to build stronger ongoing partnerships.

- Increasing **brand awareness, motivating more people to donate, and improving engagement with and understanding of our work** is key to growing our community of supporters. Our average overall brand awareness for 2021/22 was 51.5%, and consideration to donate was 11.3%.
- In December 2021, we launched our **AN50 campaign**, celebrating what would have been Anthony's 50th birthday. A new brand film that captured our charity's story and a significant brand moment saw our patron, Olivia Colman, chatting to Holly Cross who supported her son Rupert through his stem cell transplant. The campaign secured five mentions in the press, with a total reach of 3,697,822, and national features including the *Daily Mirror* and *Take a Break*.
- We developed audience-focused marketing plans across Patient Services and business to business (B2B) services and commenced work on a new content strategy to increase engagement.
- We set a new communications strategic plan and vision, which led to more focused and proactive multi-media moments, stories, and contents. National news coverage increased by 101% and national broadcast coverage increased by 250%. Notable campaigns included the **Nivea Men 'Dear Liverpool FC' campaign**, and Sam Astley's Euros 2020 story, itself earning 400 pieces of media coverage, and encouraging 1,500 people to sign up to the register.
- We had 942 volunteers supporting our work in 2021/22.

2. More potential lifesavers have joined our register

We continue to grow our register of lifesaving donors, with a particular focus on young men and people from a minority ethnic background, as part of a wider approach to meeting the needs of patients from minority ethnic backgrounds.

- The Anthony Nolan stem cell register grew to 876,130 potential stem cell donors, with 41,202 new donors added aged 16-30. The impact of the pandemic on face-to-face activity and the increasing costs and challenge of online acquisition hindered our ability to meet our original target of 55,000 new donors.
- This year, with the easing of restrictions, we were able to gradually begin to recruit at in-person events once more, and launched new software to capture donor information, driving efficiency, security, and enhanced data quality at recruitment events. Eighty per cent of new recruits signed up online this year, compared to 98% last year, showing that while things are returning to normal, the pandemic has changed how we approach donor recruitment.
- We supported patients and families through Patient Appeals to inspire potential donors to join the register, with particular focus on young men and people from minority ethnic backgrounds.

- We invested more to increase the number of potential donors from minority ethnic backgrounds through funding posts, roles, and better targeted recruitment work. This includes:
 - Providing more funding for the ACLT, including part funding a new role to better engage with the UK's Black community.
 - Funding two Pakistani community partners to join the NHS Blood and Transplant Community Investment scheme, helping community and faith organisations drive awareness and encourage members to join the register.
 - Continued to promote patient stories with appeals for specific ethnicities to join the register. For example, **Esha's appeal** saw the Sri Lankan community come forward with over 1,000 donors added to the register.
 - Ongoing digital recruitment activity focused on our **Equal Chance project** – an inspiring campaign targeting young people from minority ethnic backgrounds. Advertising through **The Receipts Podcast** also saw 77% of sign-ups from minority ethnic backgrounds
- We recommenced work in schools and universities through our Marrow and Hero Project programmes, where volunteers helped us to recruit 5,000 potential donors.
- Marrow, Anthony Nolan's incredible network of volunteer university student groups, played a vital role in recruiting potential donors from their universities through virtual and face-to-face events. Marrow's Jewish Swab week saw 886 new recruits fast-tracked to our register through digital data capture, complete with CMV statuses.
- Through our Hero Project, we educated 14,500 young people aged 16-18 about our work.

3. Raised funds through diverse channels

We continued to fundraise to support our lifesaving work. This year:

- Our supporters and partners raised £9m gross (£5.5m net) in 2021/22.
- We developed new engagement products such as the **310,000 Steps in May** online challenge, hosted on Facebook. We developed new online engagement products such as the 310,000 Steps in May Facebook Challenge. This raised over £200,000, although other similar challenges have brought varied results. We're excited to explore how best to increase participation and expand the potential of these events for our supporters.
- We are delighted to see the return of in-person activities. This year's London Marathon raised £529,000, 19% above target.
- Our BBC Lifeline Appeal raised £42,000 which included a generous £20,000 matched donation from our long-standing partner, RSM UK Foundation. Over 800,000 people watched the Appeal live.
- Despite increases to cost of living and the financial impact of the pandemic, our retention rate of regular givers was 90%, which was above our target of 85%.
- We received £821,000 from those who left us a lifesaving legacy in their wills, which exceeded our original projection by 26%.

4. We harnessed the power of technology to increase engagement and transform the supporter experience

Excitingly, our **Transform Programme** began its transition into business as usual. This ambitious initiative changes the way we interact with our supporters to deliver personalised, high-quality experiences. The programme will enable improvements to our ways of working, processes, systems and data meaning we can meet and exceed the needs and expectations of our supporters.

- We launched our brand-new supporter Customer Relationship Management (CRM) system, successfully delivered the first stage of our Audience Segmentation Project and began to work on building a single view of our supporters. This work helped us better understand our audiences and what drives them, so that we can better target our campaigns and retain donors and supporters over a longer period.
- We launched a new website in March 2021, and have continued to improve it since then, including consistent work on our Search Engine Optimisation (SEO). New features to make donating easier, such as Events Manager, and Google and Apple Pay have also been added. An accessibility audit informed future developments to help us reach wider audiences and improve user experience for all.
- Work continues to ensure that we are able to embed and maximise the benefits of the programme.

Aim 4:

Together, we can be a stronger voice for patients to ensure they get the best possible care

By using the powerful insight and evidence we gather through our services, research, and engagement with patients, we strive to influence policy and practice for the benefit of patients now and in the future.

What do we want the future to look like?

- 1.** We will have increased awareness and understanding of our work and its impact among the public, policymakers, and the clinical and research communities.
- 2.** We will have secured tangible changes to policy and practice, ensuring more patients receive the best possible care and treatment across the UK.
- 3.** We will be powerful advocates, using our expertise and voice to protect and promote the interests of patients – including in the development and application of innovative treatments.

What we achieved in 2021/22

1. Increased awareness and understanding of Anthony Nolan's work and impact

By collaborating with the public, policymakers, and the clinical and research communities, we can increase awareness and understanding of our work, and secure changes to policy and practice that benefit patients.

- Through our role as secretariat for the UK's Stem Cell Strategic Forum (UKSCSF), we have brought together patients, clinicians, aligned registry partners, researchers, and industry representatives to develop a long-term strategy for stem cell transplantation and advanced cell therapies. In 2021, we published an interim report setting out priorities and opportunities, laying foundations for the full report to be published in summer 2022. Previous reports from the Forum have been instrumental in driving improvement in patient outcomes, and we're confident the new report will serve as an impactful rallying-cry for continued progress.
- We're proud of the leading role we play in the stem cell transplant and advanced cell therapy community. This year we further strengthened our relationships with the British Society of Blood and Marrow Transplantation and Cellular Therapy (BSBMTCT), the IMPACT clinical trials network, the NHS England Bone Marrow Transplant Clinical Reference Group, and the Cell and Gene Therapy Catapult. Through these relationships, we can ensure the voice and experience of our patients are front-and-centre in policy development. We also strengthened our relationships with patient advocacy groups, including those on the Blood Cancer Alliance, to promote a unified and amplified patient voice.

2. Secured demonstrable changes to policy and practice that give more patients the best possible care and treatment

In 2020, we launched our organisation's influencing strategy, which has helped us to focus on policy priorities that will make the biggest difference to patients' lives.

Responding to the pandemic

- Our UK-wide **Stop Patients Being Left Behind** campaign shone a light on the lack of financial and practical support for immunocompromised people during the pandemic. As part of this campaign, we held a virtual day of action to raise awareness amongst Westminster and Holyrood parliamentarians and many took action to ensure the needs of immunocompromised patients were safeguarded.
- We secured **key changes in vaccination policy in order to better protect our patients.**
 - We successfully influenced the UK government to provide a third primary dose, and further booster doses, of the COVID-19 vaccine to immunocompromised people, including stem cell transplant and blood cancer patients. As many in this patient group do not receive strong protection against severe illness from vaccination, this is an important success.
 - We effectively advocated for the Joint Committee on Vaccination and Immunisation (JCVI) to recommend that family members and household contacts of high-risk patients also receive priority vaccination.

- We worked together with NHS England (NHSE) to ensure our patients can easily access revaccination post-transplant, due to the negating effect that a stem cell transplant can have on immunity.
- We successfully lobbied to clarify the criteria for priority access to COVID-19 treatments to ensure that non-malignant stem cell transplant recipients were also prioritised.
- Upon our request, NHSE agreed to include stem cell transplant recipients in the largest UK-wide study looking at vaccination efficacy against hospitalisation and death in cancer patients.
- We provided funding for the **OCTAVE clinical trial** which is evaluating the immune responses following COVID-19 vaccination in patients with immune-mediated inflammatory diseases such as cancer, inflammatory arthritis, or patients who are having a stem cell transplant. Early data indicated that 40% of people who are immunocompromised had lower antibody protection than healthy people following vaccination.
- We launched a joint inquiry of the All-Party Parliamentary Group (APPG) on Stem Cell Transplantation and Advanced Cellular Therapies, and the APPG on Blood Cancer, on **the impact of the pandemic on blood cancer services**. Informed by evidence from more than 70 patients, families, charities, and clinicians, the resulting report, *Scared & Forgotten*, **urges the government to ensure that blood cancer services are equipped to recover from the pandemic.**

Equity of access to treatments

- We have continued to implement recommendations from our 2021 report, *No Patient Left Behind*, which identified the barriers some patients face when accessing treatment and care. This includes improving access to personalised care and collecting better data on inequalities, and the retention of digital and remote care options for patients.
- We also launched a research project looking specifically at the experience and outcomes of patients from a minority ethnic background during the pandemic, to identify any differences in their support needs.

Improving access to good quality data

- To improve access to up-to-date and accurate outcomes data, we recruited a **Research Data Manager**, currently working in two hospitals.
- Alongside the APPG on Stem Cell Transplantation and Advanced Cellular Therapies and the Blood Cancer Alliance, we are working to **improve data capture on socioeconomic status, gender, ethnicity**, and other factors, at all stages of a patient's transplant journey.

3. Protected and promoted the interests of patients

We continued to be powerful patient advocates, using our expertise to promote the interests of patients across the UK.

- **Driving forward our post-transplant care pathway is our expert steering group**, involving representatives from all four nations and key allied health professionals. Priority projects are focusing on addressing geographical variations in access to secondary cancer screening, psychological care, and general late-effects support after transplant.
- We represented stem cell transplant and advanced cell therapy patients in the development of National Institute for Health and Care Excellence (NICE), Scottish Medicines Consortium, (SMC) and All Wales Medicines Strategy Group (AWMSG) guidance, including advocating for access to innovative new treatments such as CAR-T.

Aim 5:

Together, we can

Our strategy isn't just about what we want to achieve, it's about how we will achieve it as one Anthony Nolan team, working together.

We continue to work smartly, using the right tools to do our jobs and live our five values of being accountable, passionate, patient-focused, innovative, and improving every day.

By strengthening our infrastructure, capabilities, and capacities, while adapting to the challenges thrown our way, we will bolster our ability to achieve our ambitions into the last year of our strategy, and beyond.

What do we want the future to look like?

1. Our patients' thoughts, experiences, and voices shape our organisation and our work. Patient involvement is embedded in everything we do.
2. Anthony Nolan is connected to, forging, and brokering partnerships, with those who can help us achieve our aims.
3. Our income streams are diverse and healthy – we do better for less, we achieve value for money in all that we do.
4. Our organisational culture, structures, and capabilities help us achieve our ambition.
5. We harness the opportunities of data and digital, providing and utilising the right technology to improve efficiency and engagement across our work.
6. We generate quality data translated into actionable insights to strengthen evidence-based decision making.

What we achieved in 2021/22

1. We became a more patient-centred organisation, embedding patient and public involvement in every aspect of our work

- We aim to embed **Anthony Nolan Community Involvement (ANCI)** in every aspect of our work to create a mindset, culture, and infrastructure that fully involves our diverse community. For example, a panel of patients, donors, and supporters were involved in the selection of three new Trustees, Dr Leanne Armitage, Dr Susan Conroy, and Matt Miller who joined the Board in January. Our new trustees bring a wealth of experience across the science, healthcare and marketing sectors. The breadth of their skills, ages and backgrounds will bring new insight to the Board, which will play an integral role in driving our future ambition.

2. We strengthened connections beyond the organisation, forging partnerships with and between those best placed to help us achieve our aims

- As part of our strategy, we set an ambition to build a community of supporters and partners, all working towards collective goals, to achieve more for our patients and donors.
- We strengthened our close **working relationship with the British Society of Blood and Marrow Transplantation and Cellular Therapy (BSBMTCT)**. We are working to execute a joint plan to improve transplant data management, which will help us to identify areas for improvement and expand our evidence base for research.
- We established strong relationships with partners in the cell and gene therapy landscape. As detailed under **Aim 2** (page 17), we are working with ONK Therapeutics to harness the power of Natural Killer cells to fight infections associated with transplants from cord blood, with the aim of improving chances of survival for more patients.
- Our partnership with clinicians grew stronger this year. **The Anthony Nolan Clinical Retreat** took place in Birmingham in October 2021, bringing together clinicians to share and discuss the changing landscape of stem cell transplantations, ways to improve quality and accountability in data collection, to reflect on lessons from the pandemic for future practice, and priorities for stem cell transplant and cell therapies in the future.
- We continued to work closely with charitable partners, such as the Blood Cancer Alliance and the Association of Medical Research Charities (AMRC), to **ensure that the sector speaks with one powerful voice** on issues such as improving rates of early cancer diagnosis and patient access to clinical trials.
- We worked with partners and members of the NBTA (National BAME Transplant Alliance) to drive forward recruitment activity to engage more donors from minority ethnic backgrounds.

3. We diversified and grew our income streams and identified ways of doing more, and better, for less, to achieve value for money in all that we do

The continuing disruption of COVID-19 and Brexit meant we continued to adapt our approach to income generation and worked to identify savings across the organisation.

Changes to the fundraising landscape have taught us the importance of innovating to diversify our income streams and rebuild our supporter base.

- We retained and grew our relationship with our key partner, RSM, who continue to support us in funding volunteer couriers, patient grants, and working towards our goal of improving access to treatment and care.
- We continued to invest in the capacity, capabilities, and infrastructure needed to generate increased income from our operational services that we can reinvest into achieving more for our patients. This included **providing products and services that contribute to the development of new treatments** and building capacity in our laboratories to offer our typing services to industry partners. All this work is governed by a robust ethical, regulatory, and quality framework, and we ensure that all income is reinvested into our lifesaving work.

4. Created and strengthened the culture, structures, and capabilities necessary to achieve our ambitions

- This year we invested in a new employee platform (Hive) to effectively measure employee engagement and turn data into actionable insight, and to give our employees a chance to share feedback and contribute their ideas. This will help with our ambition to be an employer of choice. Feedback from our first survey showed demand for more opportunities for learning and development, so we invested in a new learning platform (inRehearsal) which provides hundreds of short, powerful classes at the click of the button, and allows employees to design their own unique learning journeys.
- Internally, our **Future of Work Programme** explored how our work, workforce, and workplaces may evolve with the increasing preferences for a mix of remote and in-office working. So far, the programme has provided insight into how transitioning to a hybrid way of working could operate by piloting initiatives, observing behaviour, and seeking feedback through colleague surveys.
- We introduced an **inclusive flexible public holiday** policy, enabling employees to celebrate the holidays of their choosing with friends and family.
- We evolved our wellbeing services to provide, a more holistic approach supporting financial, physical, and social wellbeing alongside mental health. Regular webinars, talks with pension providers, and financial experts were launched. Employees can also access up to nine months vocational wellbeing support as part of a partnership with Able Futures, who provide Access to Work mental health services on behalf of the Department of Work and Pensions.
- We are committed to **creating meaningful and sustainable change** through greater inclusion, diversity, and involvement. In the future, we will capture our donor's sex, as well as gender, when they are recruited to the register, and we have implemented a new policy to support employees with gender transition at work.

5. We provided the right technology and harnessed the opportunities of digital to improve efficiency, engagement, and experience in all aspects of our work.

- Our technology team worked hard to ensure our infrastructure and technology remained scalable, secure, accessible, and cloud based so that our systems are always up to date and our patient and donor data is kept secure. This year, we have worked to decommission legacy systems and **implement new systems that allow employees and partners to collaborate**, whether working from home or at one of our sites across the UK.
- With our partners at the World Marrow Donor Association (WMDA), we're working to build a framework to **develop a seamless 'search, match, and connect' infrastructure to improve global access to the best quality donors**, to ensure that more patients across the world can access lifesaving treatments.

6. Generated better quality data and translated it into actionable insights to strengthen our evidence base

- A key priority for the organisation is to ensure that more employees can access, and act on, insights drawn from our data, to **make certain that all decisions reflect evidence and provide the most impact for our patients**.
- We have worked to migrate our **data analysis function to a cloud-based platform**, to offer greater capacity for more individuals to benefit from the power of these tools.
- We have **built a strong data community across the organisation**, enabling the sharing of expertise and statistical data for insights and research, as well as peer support. We have also worked to improve data literacy across the organisation, offering employees access to apprenticeships and training to enable them to confidently engage with and draw insights from our data.

To 2023, and beyond

In the year ahead, our priorities are to:

- **Continue developing a register that meets current and future patient need** in terms of size, quality, typing, and composition.
- **Use data and insight to drive decision making**, ensuring we have the tools, systems, and skills in place to embed this at all levels and areas across the organisation.
- Continue to implement and progress the **Transform programme** to enable us to meet and exceed supporter expectations and drive value.
- **Work with partners to improve the quality and availability of patient data**, including clinical outcomes and patient quality of life. This will inform the development of our patient services and influence more personalised clinical services to support treatments
- **Diversify our income streams** to ensure our long-term sustainability and maximise our impact.
- Continue the **Aspire programme**, focussing on improving services and communication with transplant centres and donors, with a focus on opportunities to reduce time to transplant.
- Continue to implement our **inclusion, diversity, and involvement (IDI)** plan to ensure IDI is embedded in all areas of our work.
- Continue the work to migrate from our legacy technology application **SOLAR**, including the migration of the database to Oracle Cloud, as part of a multi-year programme of work which will be completed by the end of the next financial year.

Our next organisational strategy

Work to develop our new strategy is underway so that we can achieve even more for our patients. The development of this strategy will help drive forwards ambitious research goals, ensure we're at the cutting edge of developing treatments, and continually champion patients voices, ultimately meaning that we will do more, and be more, for our patients and community of supporters.

Financial review

With the economic, political and social challenges seen in 2021/22 and the continuing pandemic, the resilience and sustainability of Anthony Nolan's core income streams, business model around donor transplantations, and patient services has been crucial to our core financial performance. The Charity has actively managed the changing landscape around healthcare restrictions, border controls and transportation, as well as navigated the changing ability to fundraise at public events and the need for a more expansive online fundraising presence. Throughout, Anthony Nolan has been able to maintain reserve levels within our agreed policy.

The Board consider it prudent to hold a higher level of optimal free reserves in the short-term and continue to work with the Strategic Leadership Team to review reserves regularly. In particular, financial year 2022/23 will be a year of investment and growth as we outline an ambitious organisational plan for the next five years.

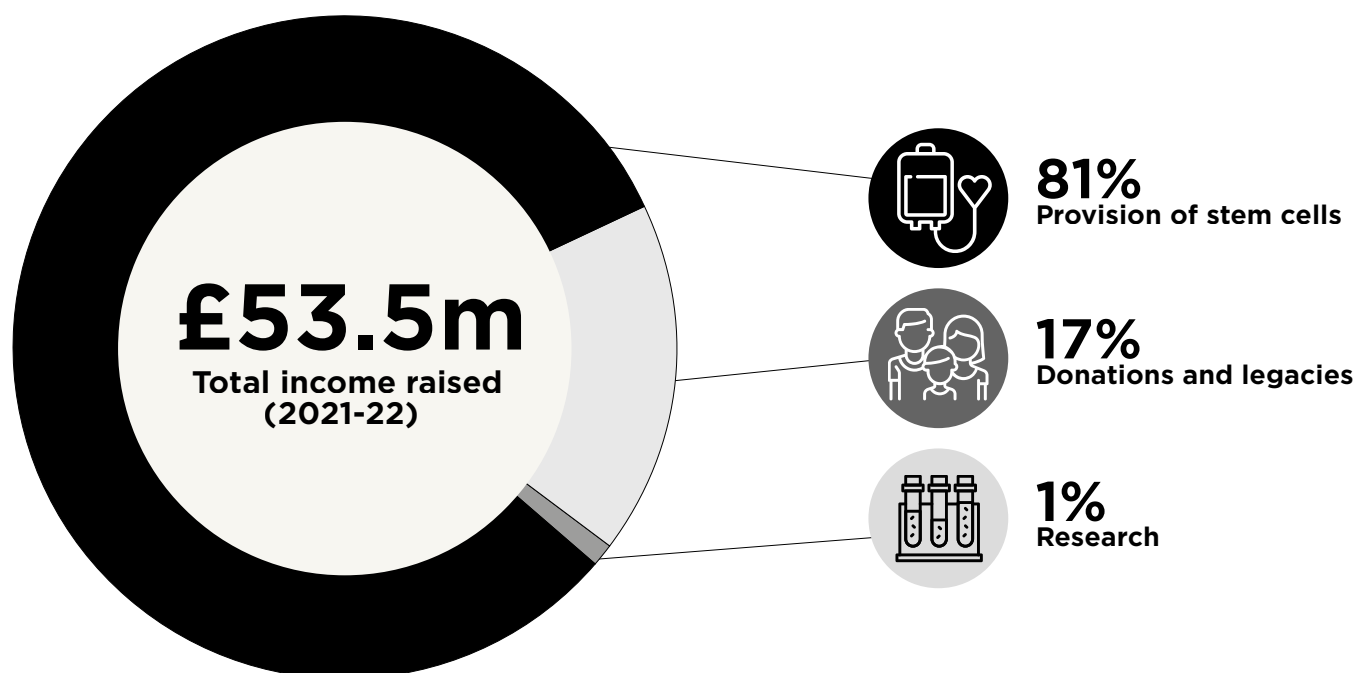
- Information on principal risks and uncertainties can be found on [page 59](#)
- Facilitated transplant donor provisions have increased by 79 (6%) to 1,422 in 2021/22 (2020/21: 1,343) and we have added a further 41,202 potential lifesavers to our stem cell register in 2021/22 (2020/21: 47,293).
- We continued to develop our cell and gene therapy and laboratory service offers by diversifying and expanding our portfolio of products and services.
- We also continued to invest more in our patient services, digital footprint, and research work, all of which further supports our aims of improving patient outcomes and saving more lives.

A surplus of £0.5m was recorded at net income (2021: £0.3m). Total funds in the year of £0.5m (2021: £0.6m). Free reserves (general funds net of designated funds and the net book value of fixed assets) decreased from £10.9m to £10.2m after capital investment in **Transform** of £0.8m in 2021/22.

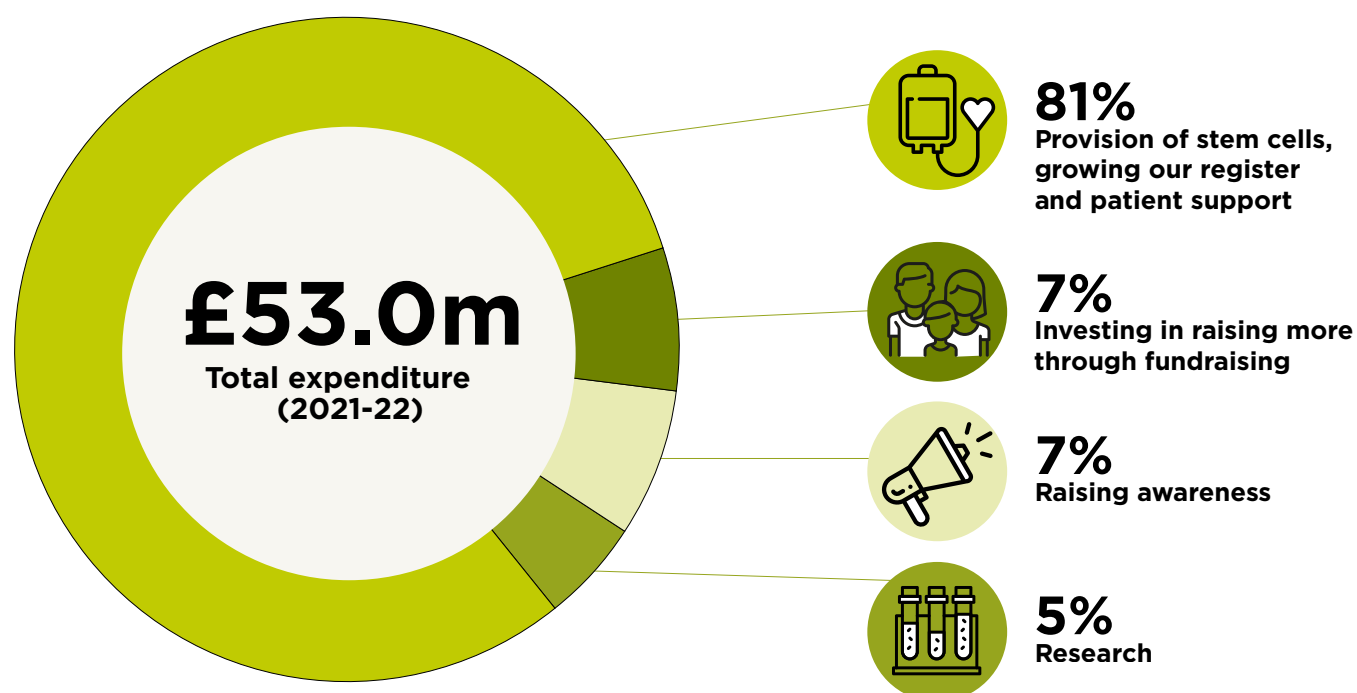
How we funded our work

Without vital funds, our lifesaving work wouldn't be possible.
Below details what we raised and spent to save more patients' lives.

What we received



What we have spent



Income and expenditure

Income including net gain on investments totalled £53.5m, an increase in the year of £2.2m (4.2%). Donor provision fees continued to be the main source of income for the charity, raising £43.8m (2020/21: £41.6m). The number of facilitated donor transplants increased by 6% in total and noticeably for export purposes, as a direct consequence of the recovery from the COVID-19 pandemic. Gross voluntary income increased to £9.0m from £8.8m in 2020/21 due to better online fundraising presence and legacies. Net voluntary income increased to £5.5m from £5.0m, benefiting from additional appeal funding. Gross voluntary income includes £6k (2020/21: £0.5m) from the Coronavirus Job Retention Scheme (CJRS) which ended 30 September 2021. We raised a further £25,000 from fundraising activities through our trading subsidiary Anthony Nolan Trading Limited (ANTL), making the total fundraising income £9.0m (2020/21: £8.3m). Total income through ANTL was £89,000 (2020/21: £320,000). In total our trading subsidiary generated operating profits of £9,000 (2020/21: £47,000) all of which were distributed to the charity in the year.

Total expenditure was £53.0m, an increase of £2.0m (3.9%) from the previous year. Expenditure to raise donations and legacies increased to £3.6m (2020/21: £3.2m), and expenditure also increased on charitable activities to £49.4m (2020/21: £47.3m). Within charitable activities, £43.1m was spent on donor provisions and giving a chance of life to patients, £2.9m was spent on research, and a further £3.4m on education and awareness events that support our donor recruitment, campaigning, and fundraising activities.

Included in total expenditure are support costs of £10.1m (2020/21: £10.0m).

Reserves Policy

Anthony Nolan's reserves policy is to make suitable investment in the ongoing development of the charity, while maintaining adequate funds to deal with current and medium-term needs and having the necessary provision to deal with unforeseen circumstances. The Trustees have determined that the optimal level for free reserves is between £8m and £12m and that, in the medium term, free reserves should be managed in order to reach this level by taking account of the following:

- Requirements for a reasonable level of working capital, taking into account our growth.
- Period of time required to downsize the charity operations, if necessary, to respond to any downturn in income streams or reduced demand for donors.
- Period of time to re-establish income streams.

Reserves are maintained at a level that enables Anthony Nolan to manage financial risk and short-term income volatility.

Free reserves at year end amounted to £10.2m (2020/21: £10.9m), which sits well within the target free reserves level. The general fund of £14.2m (2020/21: £14.0m) reflects free reserves and the net book value of tangible fixed assets at £4.0m (2020/21: £3.1m).

The growth in tangible fixed assets reflect a further investment in 2021/22 of £0.8m in a digital transformational technology project (**Transform**) to engage with and manage our supporters.

We have also contributed £0.4m as continued support for the IMPACT clinical trials initiative in 2021/22.

Restricted reserves

Restricted reserves increased by £0.3m for the year to £1.2m (2020/21: £0.9m). The income received was matched against expenditure in the Patient Experience fund and the Donor Campaign and Processing fund. Additional expenditure £(0.1)m from our existing reserves was incurred in the Donor Provision fund this year. The main increase in restricted reserves was the addition of a Transplant Services Improvement fund for the Aspire programme to reduce the patient time to transplant. No statutory grants were received this year (2020/21: £0.3m).

Designated funds

There were no designated funds allocated in 2021/22 (2020/21 £(0.1)m was written back on the innovation fund).

The Trustees regularly review the appropriate level of the charity's reserves with the Strategic Leadership Team.

Section 172 Statement

The Board are required to report on how their decision-making has aligned with their duty to promote the success of the Charity in accordance with section 172 of the Companies Act 2006.

The Board are required by law to take regard to the following factors in any decision-making process:

- the likely consequences of any decision in the long term
- the interests of the company's employees
- the need to foster the company's business relationships with suppliers, customers, and others
- the impact of the company's operations on the community and the environment
- the desirability of the company maintaining a reputation for high standards of business conduct, and
- the need to act fairly as between members of the company.

Stakeholders

The following details our key stakeholder groups and how we support and engage with them. By understanding who our stakeholders are, Board discussions consider the potential impact of our decisions on each stakeholder group along with their needs and concerns.

External stakeholders

Patients		
<i>Key considerations:</i>	<i>How we engage:</i>	<i>Outcomes and long-term objectives:</i>
<ul style="list-style-type: none"> ■ Increasing survival rates. ■ Finding the best possible match. ■ Having a good quality of life post-transplant. ■ Facilitating delivery of the best possible graft for the patient in need, in line with all applicable regulatory requirements. ■ Involving the patient and their families at every stage. 	<ul style="list-style-type: none"> ■ Providing patients with stem cell products as well as a high standard of care that includes psychological support, reliable information and a full and defined end-to-end relationship throughout the patient's journey. ■ Involving our patient and family communities through various mediums including our patient panels, patient forums, and patient volunteers. ■ Carrying out research with a diverse range of patient groups. ■ Influencing government, regulators, and policymakers to advocate on behalf of our patients and ensure their voices are heard when decisions are made. 	<ul style="list-style-type: none"> ■ For more patients to survive their stem cell transplant. ■ For all patients to have a good quality of life post-transplant. ■ For more patients to enjoy their quality lives for longer. ■ Every patient to have a voice, be heard, and feel represented. ■ UK patients to have access to the best possible graft, as identified by their clinician.

External stakeholders (continued)

Clients and collaborators – cell and gene therapy		
<u>Key considerations:</u> <ul style="list-style-type: none"> ■ Providing resources and support to researchers, developers, and manufacturers of cell and gene therapies. 	<u>How we engage:</u> <ul style="list-style-type: none"> ■ Providing cell material for research and development. ■ Providing laboratory services such as HLA typing. ■ Collaborating on research projects. 	<u>Outcomes and long-term objectives:</u> <ul style="list-style-type: none"> ■ Facilitate robust and ethical research and development of cell and gene therapies to improve and save the lives of patients.

Clients and collaborators – transplant centres and international registries		
<u>Key considerations:</u> <ul style="list-style-type: none"> ■ Improving the range, quality, and efficiency of services that are provided to transplant centres and international registries. ■ Improving the clinical impact on the transplant community in the UK. 	<u>How we engage:</u> <ul style="list-style-type: none"> ■ Aspire programme initiative – working directly with transplant centres to improve and develop our services to them. ■ Regular review meetings with Graft Identification Advisory Service (GIAS) transplant centres to report on service delivery, education, and collaboration opportunities and receive feedback. ■ Direct communication on specific cases and our wider services and monthly newsletters to maintain connection. ■ Collaboration with international registries via active participation in the World Marrow Donor Association. ■ Attendance at transplant planning meetings with some of our transplant centres. ■ Providing tailored educational sessions for transplant centres. ■ Presentation of our work at UK and international meetings/conferences. ■ Committee members for British Society for Histocompatibility and Immunogenetics (BSHI). ■ Member of the organising committee of the BSHI's national conference. 	<u>Outcomes and long-term objectives:</u> <ul style="list-style-type: none"> ■ A suite of services used and valued by customers. ■ Engagement leads directly to improvements to our service. ■ Increased use of Anthony Nolan donors by responding to customer needs.

External stakeholders (continued)

Donors – recruiting new people to the stem cell register		
<p>Key considerations:</p> <ul style="list-style-type: none"> ■ Recruiting people aged 16-30 provides better outcomes for patients. ■ Targeting a young, male audience who are more likely to be chosen to donate. ■ Increasing the proportion of potential donors from minority ethnic backgrounds. 	<p>How we engage:</p> <ul style="list-style-type: none"> ■ Targeted, paid social media advertising. ■ Patient appeals, reactive and proactive press and social media campaigns. ■ Recruitment events through university groups, schools, colleges, and other partnerships. ■ Investment in key community partnerships to enable access to under-represented communities. ■ Targeted retention and enrichment activity to maximise the value of existing potential donors. 	<p>Outcomes and long-term objectives:</p> <ul style="list-style-type: none"> ■ To apply the insights from the Register Optimisation Project to develop and deliver a recruitment and retention strategy that will enable us to meet patient need both now and in the future. ■ A continued move towards supporter-led events. ■ Contributing to our equity of outcomes work with targeted recruitment efforts based on patient need.

Donors – potential stem cell donors currently on our register		
<p>Key considerations:</p> <ul style="list-style-type: none"> ■ Recruiting committed and engaged potential donors. ■ Maintaining accurate contact and medical information. ■ Maintaining donor engagement during their lifetime on the register. ■ Using data rich insight into the genetic variation seen within the UK donor registry to help target register enrichment activity accordingly. 	<p>How we engage:</p> <ul style="list-style-type: none"> ■ Targeted retention campaigns to specific cohorts of the register to educate and engage. ■ Effective communication to keep potential donor contact details up to date. ■ Programmes of enrichment to improve data on target donors (e.g. recording CMV status). ■ Marketing emails are utilised for those who have opted-in, providing the opportunity to become more involved with Anthony Nolan's work. ■ Dedicated support and communications for donor's first year on the register. 	<p>Outcomes and long-term objectives:</p> <ul style="list-style-type: none"> ■ To maintain a register of quality potential donors who are contactable, engaged, and committed. ■ To improve availability of potential donors when they may be needed by a patient. ■ To grow our register of quality potential donors to meet current and future patient need in terms of size, quality, typing, and composition.

External stakeholders (continued)

Donors – stem cell donors who are donating or have donated		
<u>Key considerations:</u> <ul style="list-style-type: none"> ■ Supporting donors throughout the donation process. ■ Ensuring that selected donors have the necessary information so that they can make an informed decision about donation. 	<u>How we engage:</u> <ul style="list-style-type: none"> ■ Direct communication and support throughout the donation. ■ Medical assessment and consent at our contracted collection centres. ■ Follow up post-donation in line with World Marrow Donor Association standards. ■ Post-donation panels where donors help us shape donor experience. 	<u>Outcomes and long-term objectives:</u> <ul style="list-style-type: none"> ■ Stem cell products available for patients in the UK and worldwide, donated by informed and supported donors, whose rights and safety are protected. ■ A positive and supportive donor experience that is seamless and tailored to their needs.

Financial supporters		
<u>Key considerations:</u> <ul style="list-style-type: none"> ■ Ensuring that our financial supporters understand the need for their support and the impact of their contribution. ■ Making sure all financial supporters feel valued and appreciated. ■ Fundraising activities are compliant with relevant regulations and laws. 	<u>How we engage:</u> <ul style="list-style-type: none"> ■ Email communications (mass and direct). ■ Phone calls (direct and through telemarketing agency). ■ In person conversations and recruitment at private site fundraising events. ■ Advertising (digital and print). ■ Online events. ■ Webinars. ■ Bespoke proposals and applications. ■ Grant applications (restricted and unrestricted asks). ■ Bespoke fundraising events (face-to-face and virtual). ■ Employee engagement and volunteering. 	<u>Outcomes and long-term objectives:</u> <ul style="list-style-type: none"> ■ Retain supporters and inspire them to continue their support and involvement. ■ Attract new financial supporters. ■ Develop and grow our support from high value supporters, and through partnerships.

Policy decision-makers		
<u>Key considerations:</u> <ul style="list-style-type: none"> ■ Building relationships with policy decision-makers so that we can influence NHS and government policy affecting our patients. 	<u>How we engage:</u> <ul style="list-style-type: none"> ■ Providing insight from patients, healthcare professionals, our own organisation, and the wider charity sector. ■ Targeted research, advocacy, and campaigning to influence decision-makers. 	<u>Outcomes and long-term objectives:</u> <ul style="list-style-type: none"> ■ Influencing policy and practice for the benefit of patients now and in the future. ■ Advocating for patients, empowering and amplifying their voices so that policy change can be the most effective.

External stakeholders (continued)

Regulators		
<p>Key considerations:</p> <ul style="list-style-type: none"> ■ Adherence to set standards to maintain the quality and safety of the products and services we provide. ■ Complying with all applicable regulatory requirements. 	<p>How we engage:</p> <ul style="list-style-type: none"> ■ Submitting annual activity data and reports. ■ Reporting notifiable serious adverse events and reactions as necessary to the regulator. 	<p>Outcomes and long-term objectives:</p> <ul style="list-style-type: none"> ■ Anthony Nolan maintains a high standard of regulation and governance and is accredited and licensed accordingly.

Strategic partners (professional bodies, recruitment partners, and aligned registry partners)		
<p>Key considerations:</p> <ul style="list-style-type: none"> ■ Identifying our aligned strategic priorities with partner organisations to maximise impact and influence for patients. ■ Strengthening our representation and presence across the transplant community and wider key demographics. ■ Combining resources and funding to deliver strategic projects, and/or to secure significant external funding for capital or strategic investments for our community. ■ Grow our community's voice within the wider health landscape and political agendas, to advance our position in health service planning and public funding priorities. 	<p>How we engage:</p> <ul style="list-style-type: none"> ■ Meet regularly to discuss operational matters and delivery on agreed objectives. ■ Form strategic partnerships based on agreed objectives that can improve an operational area such as clinical outcomes data collection. ■ Support wider strategic initiatives that deliver policy direction for the wider community. ■ Investment in key community partnerships to build strong and lasting relationships with under-represented communities on the donor register. 	<p>Outcomes and long-term objectives:</p> <ul style="list-style-type: none"> ■ To improve the transplant data landscape and support service improvement and research opportunities. ■ To build trust and connection with under-represented communities, grow donor registry representation, and support wider work on equity of access to transplant. ■ To position ourselves in strategically advantageous relationships with key stakeholders. ■ Ensure financial sustainability and access to latest treatments. ■ Maintain our role as a key strategic partner within the transplant community, and externally, as a leading voice for transplantation and advanced cell therapies.

Suppliers		
<p>Key considerations:</p> <ul style="list-style-type: none"> ■ Securing and maintaining relationships with reputable suppliers. ■ Provision of good quality, value-for-money goods and services. ■ Trade and customs disruption on supplies due to Brexit and the ongoing impact of the pandemic. 	<p>How we engage:</p> <ul style="list-style-type: none"> ■ Due diligence checks on new suppliers. ■ Robust contractual terms with suppliers. ■ Where required, regular progress meetings, auditing, and monitoring to maintain supplier/customer relationship. 	<p>Outcomes and long-term objectives:</p> <ul style="list-style-type: none"> ■ Consistent supply of goods and services. ■ Ethical and sustainable procurement. ■ Category led approach to enable focus on opportunities for consolidation and efficiency.

Internal Stakeholders

Employees		
<p><u>Key considerations:</u></p> <ul style="list-style-type: none"> ■ Training and developing all employees. ■ Employee engagement. ■ A safe place to work. ■ Workplaces are configured to allow Activity Based Working. ■ Resources and technology are available to enable hybrid working. ■ Employee wellbeing. ■ To continuously create an inclusive environment for employees of all backgrounds. 	<p><u>How we engage:</u></p> <ul style="list-style-type: none"> ■ Regular supervision and team meetings. ■ All employee briefings, weekly CEO emails, newsletters, and regularly updated intranet and Teams channels. ■ Employee Forum. ■ Employee surveys and feedback, utilising Hive, our new employee engagement platform. ■ Wellbeing plan and programme. ■ Regularly celebrate and recognise difference in backgrounds and perspectives so that everyone can bring their whole self to Anthony Nolan. 	<p><u>Outcomes and long-term objectives:</u></p> <ul style="list-style-type: none"> ■ Employees develop and progress. ■ Employees are supported, engaged, informed, and involved in the organisation. ■ Employees feel safe and confident at work.

Volunteers		
<p><u>Key considerations:</u></p> <ul style="list-style-type: none"> ■ Feeling supported, involved and empowered. ■ Meaningful and impactful volunteer roles that advance the organisation's work and goals. 	<p><u>How we engage:</u></p> <ul style="list-style-type: none"> ■ Volunteers are involved throughout teams and divisions. ■ Regular contact through volunteer managers and newsletters. 	<p><u>Outcomes and long-term objectives:</u></p> <ul style="list-style-type: none"> ■ Volunteers support the achievement of Anthony Nolan's aims while feeling connected and involved in the organisation.

Stakeholder risk

In line with our risk management policy and procedures, Anthony Nolan has identified the key risks facing our individual stakeholders. We have in place robust mitigating actions to ensure that the likelihood and impact of any risks to our stakeholders are minimised as much as possible. Our greatest risk lies with our patients. Unfortunately, as they and we are acutely aware, they face the risk of further illness or death post-transplant. Anthony Nolan's focus is on finding patients the best possible donor match to minimise this risk and we constantly work to improve the outcomes for every one of our patients post-transplant.

In relation to building up our stem cell register, there is a risk that we are unable to attract the most suitable donors or the possibility that our donors have a negative donation experience. To mitigate these risks, we provide support throughout the donation process including support to donors post-donation.

As for any organisation, especially one built on the trust of patients and donors, the risk to our reputation is always a concern. We continue to take measures to ensure this risk is mitigated, be it through employees, trustee and volunteer training, due diligence checks on our suppliers, or ensuring the research we support is scientifically sound and ethical.

All our employees are key to delivering Anthony Nolan's strategy and many offer unique medical, scientific, or institutional expertise which could pose a risk to the organisation if we were to lose them. We have arrangements in place for succession planning and we constantly strive to ensure that our employees are engaged.

COVID-19, Brexit, and the conflict in Ukraine have brought the potential risks that external circumstances pose into sharp focus. We mitigate against these risks by ensuring we have strong business continuity plans and specific taskforces that regularly meet to monitor situations as they develop and provide ongoing solutions for the organisation. We also make sure that we monitor government guidelines closely and adapt our approach accordingly.

Change in relationships with stakeholders

Along with most organisations, our relationships and engagement with stakeholders moved from face-to-face to the virtual world during the height of the pandemic. While many aspects of our operations are now returning to pre-COVID-19 practices, the pandemic still has some impact on how we best meet the needs of our stakeholders operationally. We have learnt a great deal from the changes in operation necessary over the last couple of years, and in some cases have embraced new ways of working that have proved beneficial to our patients and organisation overall.

We have continued to support our patients financially by maintaining the enhanced level of financial support grants introduced for emergency assistance. As a result, we have supplied the largest ever value of overall funds this year (£80,000) and supported even more patients. Through the patient information webpages and patient engagement services we have been able to keep patients updated with the latest changes in COVID-19 related information, and have been able to readily respond to calls, queries, and concerns. In turn, we have been able to listen to patients, offering information and support through our Helpline, through signposting, and by referring to the telephone emotional support service.

Following the variations made last year to adapt and accommodate changes in clinical practice, we have not needed to make any further revisions to our Human Tissue Authority licenses. The interaction with our regulators has reverted to normal pre-pandemic practice. We are continuing to explore ways to further enhance our relationship. This has included a workshop to discuss innovation in our sector and the impact this has on regulation.

This year, we launched our new digital recruitment process, which has been used at all face-to-face events since May 2021 and has recruited 40,971 new donors. Benefits of this include the safeguarding of data (kept secure on the system), accessibility, sustainability (as the process is entirely paperless), a more agile way of working, and fewer discrepancies in donor information. We anticipate this will lead to better long-term donor availability. We have been able to iterate the form design and have also taken innovative steps forward in how we run events through 'teacher led' recruitment. This type of recruitment allowed us to continue activity through COVID-19 restrictions and opened up huge opportunity for growth in the future. We will continually review our digital recruitment processes to improve it based on volunteer and partner feedback, to ensure it offers the best possible experience.

Volunteer roles have varied as we transitioned between face-to-face and remote delivery based on guidance and prioritising volunteer safety. Volunteers now have more ways to engage with us than before the pandemic and we will look to develop this moving forward into a full hybrid delivery offer.

Our cord collectors, laboratory, research, cell therapy, clinical nurse specialists, and some operational and support employees, have continued to work on-site in our workplaces throughout the last year. For all other roles, we have continued to follow government advice, and those employees who can work from home were asked to continue when advised by the government. As restrictions eased, we took a considered and phased approach to bringing more of our employees back into the workplace and encouraged a mix of working from the workplace and home. We have provided support to do this by:

- Setting up a Hybrid Working Group who are reviewing activity-based working, the workplace environments, and producing guidance, including a return to the workplace guide.
- Providing our employees with lateral flow tests, masks, hand sanitiser, and continuing to adopt social distancing inside the workplace.
- Introducing a desk booking system to support and assess patterns of employees' safe return to work.
- Upgrading meeting rooms with video conferencing technology.
- Recruiting an Engagement and Wellbeing Manager to ensure continued employee wellbeing.
- Gathering regular feedback from employees through pulse surveys.

Our Property and Facilities team have transformed our workspaces to support hybrid working and the return to the workplace. We're testing various working space options to support a range of working activities including, collaborative and quiet working spaces, drop-in rooms, and break out areas, and a dedicated wellness and prayer room. Keeping our workplaces safe and hygienic during the pandemic has been a focus for the property team and we introduced measures such as focused cleaning, visitor monitoring and provision of mask and cleaning stations. Many of the measures are still in place across our workspaces as we take a cautious approach following restrictions easing, to ensure our employees feel safe in the workplace.

Key decisions

The Board is responsible for our strategic planning and policymaking. Accordingly, all key decisions, and the future long-term plans for the organisation, are referred to and taken by the Board.

By working collaboratively with the Strategic Leadership Team and listening to feedback from our many stakeholders and governance structures, the Board is well-positioned to respond to uncertainties and to promote the success of Anthony Nolan.

As explained in more detail under Organisational structure on [page 48](#), the three subcommittees of the Board, the Audit and Finance Committee, the Governance and Risk Committee (since January 2022), and the Nominations Committee, support the Board in the administration of the corporate governance of the Charity. These subcommittees ensure oversight and best practice. The Board, alongside its delegated subcommittees, made a number of key decisions in 2021/22, each underpinned by the interests of our stakeholders and the wider factors set out in section 172 of the Companies Act 2006.

1. Board recruitment – strengthening and diversity

The decision: To recruit three new Trustees to improve the diversity of the Board in terms of professional skills, life-experience, background, competencies, and thought.

Key considerations:

- The Board deemed it a priority to act on our commitment to build a more inclusive and diverse Board, which better reflects the full breadth and scale of diversity of our patients.
- Harnessing the expertise of a specialist recruitment company with expertise in diversifying talent, to help the Governance, Nominations and Remuneration Committee identify the broadest possible pool of suitable candidates.
- Ensuring that our Anthony Nolan Community Involvement (ANCI) panel, which represents stakeholders (including doctors, patients, and donors) was involved in the recruitment process and that we listened to their feedback.

Impact: A more inclusive and diverse Board which better reflects the diversity of our patients, donors and supporters, so is therefore better placed to serve them and save even more lives.

Further detail about our approach to Trustee recruitment can be found in the Trustees report on [page 49](#).

2. Hybrid working

The decision: To implement hybrid working for all applicable roles across Anthony Nolan.

Key considerations:

- The rapid changes to our working practices have provided an unexpected opportunity to trial and embrace agile working, using new technology and flexible locations and spaces.
- Our ability to adapt at pace to changes in technology, working practices and processes, and new models of workforce engagement are providing opportunities to explore what our ideal future workplace, working practices, and workforce should look like, to ensure the execution of our strategy and achievement of our goals.
- Assessing how we can best implement and test activity-based working – a workstyle which allows our people to work in a mix of certain spaces and ways that provide both flexibility and choice. Monitoring implementation and feedback and adapting accordingly was a key element of our initial pilot.
- Listening to the views of our people and their desire to work in a hybrid manner where their role permits. Ninety per cent of employees responded that they felt that Anthony Nolan was supportive of the implementation of this approach in April 2022.

Impact: High satisfaction levels, improved collaboration, productivity, and digital thinking, have already been seen among our employees. Reduced travel also improves our energy consumption. We will continue to explore hybrid working, testing approaches, learning from experiences and adapting accordingly.

3. Clinical trials

The decision: To continue our investment in clinical trials with the aim of accelerating the design and delivery of clinical studies that have the potential to improve treatment and care for stem cell transplant patients.

Key considerations:

- Stem cell transplantation is an increasingly curative treatment across a range of diseases. Along with a wave of new drugs and cell therapies, these treatments are transforming outcomes for patients.
- Following the successful pilot of the IMPACT clinical trials initiative, of which Anthony Nolan was a founding funder, it is crucial to develop innovative and sustainable funding mechanisms to maintain momentum and prevent progress from being lost.
- Without further funding, the development of new trials will be compromised, and we will lose an opportunity to train and empower the next generation of scientific researchers and care providers.
- We will continue to support the clinical and research community to develop and sustain a new model of trial delivery, with the aim of providing a critical resource for the development and delivery of new trials.

Impact: This new model provides a sustainable future for a robust trials proposition, which will continue to deliver clinical trials to transform patient outcomes.

4. Data and digital

The decision: To continue with, and extend, our investment in data and digital across three key areas: stem cell provision, supporter engagement, ensuring best quality stem cell matches.

Key considerations:

- A desire to deepen loyalty with existing supporters and attract new supporters by creating a journey-based experience informed by data and supporter voice.
- Our commitment to continue our digital transformation programme **Transform**, involving an investment of £2.2m. This initiative aims to change the way we interact with our supporters to deliver personalised, high quality experiences through our new website, updated Customer Relationship Management System (CRM), and improved processes across supporter journeys. Read more on [page 23](#) of the Strategic Report.
- Investment in the Aspire programme (£1.7m over three years), a partnership of improvement between Anthony Nolan and UK transplant centres, by delivering a unified service for the patient and the transplant community. From search to provision, the service is efficient, easy to use, and provides real time data.
- We are increasingly using data to make evidence-based patient decisions. This needs to continue as we move into the future.
- The need to work with the wider clinical community to improve the completeness, sharing, alignment, and quality of patient outcomes data to inform research, register development, and service improvement.

Impact: Transform enables more seamless donation journeys for our supporters. The Aspire programme, which started in 2021 will shorten the time to transplant for our patients. The recruitment of a Research Data Manager, working in two hospitals as part of a pilot project, has confirmed the need for improved patient outcomes data, and is beginning to demonstrate how we can achieve this. We are working in alignment with the British Society of Bone Marrow Transplant and Cellular Therapies to get better data on our patients to drive the improvements needed.

How we operate

Organisational structure

Anthony Nolan is a registered charity and a company limited by guarantee, incorporated in England and Wales. Every member undertakes to contribute an amount not exceeding £1 to the assets of the Charity in the event of it being wound up during the period of their membership or within one year thereafter. The members, who are the Trustees, are also the Directors of the Charity.

Our governing document, which is in the form of a Memorandum and Articles of Association, was updated on 25 January 2022 to ensure alignment with the Charity Governance Code and incorporate changes to the way the Board wishes to operate. The main changes made were revised Trustee Terms of Office (Article 17.2); reduction in the maximum number of Trustees from 20 to 14 (Article 11); and simplification and modernisation of language throughout.

A review of the Memorandum and Articles of Anthony Nolan Trading Limited was also undertaken in January 2022 and is covered in more detail on [page 58](#).

The overall strategic direction of Anthony Nolan is determined by the Board, who meet formally at least five times each year. With effect from January 2022, it was agreed that Board meetings would be scheduled bi-monthly. Following the restrictions imposed by the COVID-19 pandemic, most Board and Board subcommittee meetings have taken place via video conferencing facilities as permitted by the Articles of Association. More recently we have been able to hold some meetings in person or using a hybrid model and propose to continue with this approach. The Trustees are responsible for planning and policymaking and, accordingly, all key decisions are referred to and taken by the Board. Until 22 July 2021, the Chair of the Board was Ian Krieger. Nicola Horlick, who had previously been serving on the Board as Chair Elect, was then welcomed to the role of Chair in line with our declared succession plan.

In January 2022, the Board subcommittees were restructured, and a third subcommittee introduced so that the Board has more time to focus on strategic thought and direction. The new Governance and Risk committee, chaired by Martin Laws, focuses on corporate governance matters, including corporate policies, risk management, and governance matters. Therefore, some responsibilities around risk were inherited from the Audit and Finance Committee (chaired by Carol MacKinnon) and some responsibilities around governance were inherited from the Governance, Nominations and Remuneration Committee (chaired by Ian Krieger and later Nicola Horlick from July 2021). The Governance, Nominations and Remuneration Committee

was replaced by a new Nominations Committee, with appropriately revised terms of reference, which will focus on Trustee and CEO role specifications, recruitment, and induction.

The Audit and Finance Committee continues to enable the Trustees to consider issues on financial strategy and planning, investments, and matters relating to the external audit as well as internal controls in more detail where needed. Both this subcommittee and the new Governance and Risk Committee meet quarterly in advance of the associated Board meeting. The Governance and Risk Committee held its inaugural meeting in March 2022. The Governance, Nominations and Remuneration Committee was responsible for the recruitment of three new Trustees who were appointed in January 2022. The Nominations Committee, which has replaced it, will meet on an ad hoc basis as and when requested by the Board.

The day-to-day management of Anthony Nolan is entrusted to the Chief Executive and the Strategic Leadership Team, who have delegated authority from the Board to administer the affairs of the charity. When felt appropriate by the Trustees there is a short, closed session, solely for the Trustees. The Chief Executive and Strategic Leadership Team are always invited to join the main part of the Trustees' meetings and provide the Trustees with updates on the work and direction of Anthony Nolan.

The Chief Executive and Strategic Leadership Team meet regularly throughout the year to discuss and consider strategic and operational activities as well as review monthly financial and management information.

Recruitment, appointment, retirement, election, induction, and training of Trustees

Recruitment and appointment

Appointment to the Board of Trustees is done via an open recruitment process after the needs of the organisation and a range of suitable candidates are considered by the Trustees. Following the review of the Memorandum & Articles, the number of trustees is subject to a maximum of 14 and must be greater than three.

Between June 2021 and December 2021, the Governance, Nominations and Remuneration Committee undertook an open recruitment process. Anthony Nolan is committed to applying values of Diversity and Inclusion in the widest sense wherever possible. This means that we look for trustees with different backgrounds, careers and life-experience, competencies, professional skills and diversity of thought. These qualities encourage debate and support our effectiveness, leadership and decision-making ability to act in the best interests of the charity as well as the wider public interest. Our patients reflect the full diversity of the UK, and sometimes global population. We constantly strive to achieve the same breadth and scale of diversity across our donor population to give every patient an equal chance of finding a lifesaving stem cell donor from our volunteer donor pool. We therefore specifically valued hearing from potential

trustees from equally diverse backgrounds who are able to support us to engage with this full breadth of our target donor audience.

The recruitment process was extensive and, in addition to the Governance, Nominations and Remuneration Committee, included the involvement of the Director of Inclusion and Diversity, our CEO, senior Anthony Nolan employees, and our Anthony Nolan Community Involvement (ANCI) panel. The panel on this occasion consisted of a doctor, a transplant patient, and a Marrow alumnus. We also appointed a specialist recruitment agency to assist with our search and ensure that as diverse a pool of potential talent as possible was reached.

The process resulted in Dr Leanne Armitage, Dr Susan Conroy, and Matt Miller being appointed to the Board in January 2022. Their breadth and depth of experience across science, healthcare, and marketing, personal interest, and commitment to the work of Anthony Nolan, will help drive forward our ambitions across a range of areas, including our work in cell and gene therapies.

More information about our Trustees can be found at anthonymolan.org/trustees

Retirement

There were a number of changes to the board in July 2021. Ian Krieger retired as Chair after many years of committed service with our gratitude and thanks. Lionel Cashin, Sir Peter Robinson, and Brian Turner CBE, also decided to stand down as Trustees at this time, and Olivier Zucker stood down as of 27 July 2022. We would like to thank them for their significant contributions to the success of the charity during their tenure.

Election

Under the Memorandum and Articles of Association prior to the revisions agreed in January 2022, Trustees retired from the Board by rotation every four years with the option of re-election for up to a maximum of three terms. The revised Memorandum and Articles of Association stipulate that Trustees shall now retire from office on the third anniversary of their start date. This is subject to the proviso that retiring Trustees may be re-appointed, but that no Trustee may serve for more than two consecutive terms of office, unless the Trustees decide that there are exceptional circumstances. Exceptional circumstances would need to be justified in advance of any re-appointment and it would be in the best interests of the charity for a Trustee to serve for a third and final term of office.

The Trustees aim to ensure that the composition of the Board has the right balance of skills and expertise and is made up of individuals with suitable and diverse backgrounds and experience to contribute positively to the governance of Anthony Nolan. Since the members of Anthony Nolan are the Trustees and Directors, election and re-election are determined by the current Board in all cases.

Induction and training

The work of Anthony Nolan involves continuously advancing scientific and medical processes of stem cell transplants. To keep Trustees aware of the charity's operations on both a national and international level, sessions are arranged to update them on the work of the charity, either during Trustees' meetings or at separate meetings.

Presentations by external advisers relating to specific governance issues are organised as appropriate. The induction of a new Trustee is tailored to the individual concerned and includes a guided tour of our operations, an introduction to key employees, and an outline of the duties and responsibilities of being a Trustee and Director. Due to the restrictions caused by the COVID-19 pandemic during the financial year, the induction for the three new trustees took place remotely, however plans are in place for face-to-face training now that our facilities have fully re-opened. All newly appointed Trustees are provided with an induction pack of key documents and information relating to Anthony Nolan.

Declaration of interests.

At each Board meeting, there is a standing agenda item for each Board member to declare their interests. Each financial year, all Trustees complete a Declaration of Interests form and new Trustees complete a Fit & Proper Person Declaration, as recommended by HMRC. Declarations of Interests are also completed by members of the Strategic Leadership Team and the Company Secretary.

Remuneration of key management personnel

The Board of Directors, who are the charity's Trustees, together with the Strategic Leadership Team, comprise our key management personnel, as defined by FRS102. All Trustees give their time freely and do not receive remuneration. Trustees are entitled to claim reasonable expenses under our Expenses Policy. Trustees' expenses during the year are disclosed in [note 11](#) to the Financial Statements. In addition to those with Anthony Nolan Trading Limited there was one related party transaction during the year. Red Badger, digital consultancy, carried out £96k worth of consultancy work for Anthony Nolan in 2021/22. Michael Altendorf is a Non-Executive Director of Red Badger and Nicola Horlick was a member of the Advisory Board at the time. Both Trustees declared their interests and were not involved in the decision to appoint Red Badger. The pay of the Strategic Leadership Team, and any pay increases, are approved by the Chair of the Board. Remuneration is reassessed as required when job vacancies are advertised based on a market rate benchmark across relevant sectors.

Number of Trustees

Currently, the Anthony Nolan Board has 11 Trustees. As part of the succession planning process the Board regularly reviews Trustee terms of office and decides when it is appropriate to consider either re-appointment or recruitment of Trustees in the best interests of the Charity. The Board may wish to make new appointments over the coming year if specific needs arise or in light of planned Trustee retirement dates.

Charity Governance Code

Anthony Nolan supports the seven principles of good governance laid out in the Charity Governance Code. As a charity registered in Scotland, as well as England and Wales, Anthony Nolan also supports the five core best practice principles laid down in the Scottish Governance Code 2018. Anthony Nolan aspires to always follow best practice guidelines and has continued to embed the recommended practices relating to the updates made to the Charity Governance Code in December 2020 regarding the principles of Integrity and Equality, Diversity and Inclusion. The following outlines actions we have identified and taken to strengthen our governance in these two areas. We have also considered the Charities Act 2022 and will monitor Charity Commission guidance closely as the changes are implemented, including any subsequent updates to the Charity Governance Code.

Integrity

Anthony Nolan has identified five values that lie at the heart of everything we do and are vital for our success: accountable, passionate, patient-focused, innovative, and improving every day. These values underpin the decisions made by, and actions of, the Board and Strategic Leadership Team. Anthony Nolan also adheres to the National Council for Voluntary Organisations' (NCVO) Charity Ethical Principles by putting our patients and donors first, creating a safe space for employees, volunteers and beneficiaries and operating with integrity and openness. We have a number of policies and procedures in place to ensure that at Anthony Nolan, we work responsibly and ethically.

The Board is mindful of the need for each member to have an equal opportunity to voice their opinion and to be listened to, in order to avoid power imbalances. Board papers are sent out in advance of board meetings, allowing members time to prepare any issues they want to address. Each Trustee has an equal vote on proposals.

To ensure power imbalances are avoided within the organisation, Anthony Nolan has numerous mechanisms to ensure employees' voices are heard. Employees are consulted on initiatives and organisational changes via our Employee Forum. Through the Forum, attended by our HR team, employees can put forward their opinions and suggestions via their representatives. We also launched Hive, our new employee engagement platform, which gives all employees the opportunity to have their voice heard through **Open Door** surveys. This platform can also be used for anonymous feedback, and any suggestions and/or concerns. We also have a number of other employee groups, including our Inclusion Champions who act as an informal mechanism for employees to raise concerns and share ideas. Line managers encourage regular feedback in 1-2-1s and team meetings and our Chiefs (Division leaders) host regular divisional meetings, with the opportunity for employees to feedback and ask questions. We have continued with **ANCast** webinars through which the CEO and other members of the Strategic Leadership Team update all employees on the direction and strategic aims of the organisation. In advance of, or at the end of each **ANCast**, employees can ask questions and raise any concerns, anonymously if they wish to.

Protecting and safeguarding all those who come into contact with us through our work (including children and adults at risk) from abuse and mistreatment of any kind is a priority for Anthony Nolan and its Trustees. A Safeguarding Policy is in place and published on our website. The policy and mandatory training for employees, as well as training for volunteers identified as requiring inductions for working with the charity, are subject to regular review by the Designated Safeguarding Director together with the leads for employees and volunteers, patients and donors. Arrangements are in place for employees and volunteers to report concerns to independent, external third parties to ensure at all times that matters can be raised without fear or favour. All Trustees are required to complete our compulsory safeguarding training and quarterly safeguarding reports are provided to Trustees as part of our governance process.

Inclusion, diversity, and involvement

This year, we have seen good progress in translating our commitment to inclusion, diversity, and involvement into action and results. Embedding these principles in all aspects of our work is a continuous exercise rather than a time-limited project, and it is important that we learn from new approaches and use this insight to identify new opportunities and to inform future initiatives.

The progress we have made

The Board recognises the power and value of diversity in leadership, and this year worked with a specialist agency to recruit three Trustees who would bring new perspectives and knowledge to the Board.

A crucial component of our inclusion and diversity work is the definition and execution of a multifaceted strategy to better understand and tackle the inequities some patients experience because of their background and circumstances. Progress has been made on several fronts, including innovative analysis to understand how we can optimise the donor register to meet the needs of all patients now and in the future. The rich insight being generated will inform our donor recruitment and typing strategies. We recognise the importance of building a robust evidence base in this area, so we can better understand and tackle the drivers of inequity. We are working with the British Society of Blood and Marrow Transplantation and Cellular Therapy (BSBMTCT) on a retrospective study to understand whether patients from different ethnic backgrounds have different outcomes post-transplant.

We will capture our donors' sex (also known as natal sex or sex assigned/observed at birth) and gender when they are recruited to the register and have implemented a new policy and associated training to support employees through the process of gender transitioning.

We have also established a new approach to raising complaints and concerns in relation to inclusion and diversity. In response to employee feedback, we implemented an inclusive 'flexible public holiday' policy, giving employees the choice to take holidays at a time that reflects what is important to them.

We implemented a new employee engagement platform, which is supporting us to gather real-time insight from employees on how they experience work and the workplace. This is guiding our transition to hybrid working, which aims to find ways of working that balance individual circumstances and preferences

with the needs of roles and the wider business. In parallel to this transition, we continue to invest in initiatives that aim to promote the wellbeing of our employees, which is particularly important as we emerge from the pandemic.

Looking to the future

As the development of our new 2023+ organisational strategy gathers pace, we will harness the opportunity to consider and embed inclusion, diversity, and involvement in all aspects of our work. While driven and coordinated by a central team, it is vital that all areas of the charity and everyone at Anthony Nolan play an active role in meeting our commitment to inclusion, diversity, and involvement. Recognising the importance of our commitment to this ambition, and the touchpoints it has across the entire charity, this year each division set specific objectives for inclusion, diversity, and involvement and progress updates are provided to the Strategic Leadership Team at fortnightly meetings.

Our work in Scotland

We are fortunate to be supported in Scotland by a number of strategic partners, including Scottish Fire & Rescue Service (SFRS) and Police Scotland. These partners, with their trusted brands, help us to create connections and maximise our ability to influence policy that benefits our patients in Scotland, as well as helping us raise awareness of the need for, and to recruit, more stem cell donors. Our award winning, 13-year, partnership with SFRS is recognised across the UK as having a significant impact for patients in need of a stem cell transplant with over 18,500 donors recruited to the Anthony Nolan register, 94 of whom have gone on to donate their stem cells (as of May 2022). This is due to SFRS's commitment to target their activity at young people through their hugely successful school's programme.

As well as our work with SFRS, Marrow volunteer student groups work in universities across the country to raise awareness and recruit people to the stem cell register. We approach and support people and organisations in Scotland to give and raise money for our work from individuals and student groups to local companies and trusts.

Our specialised Patient Services provide support, care, and advice for patients and families in Scotland. This includes practical and emotional support through our patient services team and localised support, made up of volunteers, Marrow groups, and partners, for families.

Employees

Anthony Nolan provides an inclusive working environment for employees and supports professional and personal development. Anthony Nolan is committed to fostering a culture of diversity, respect, and inclusion as well as equality of opportunity for all employees. Employment practices and policies are in place to ensure that no employee, or potential employee, receives less favourable treatment because of age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, co-parenting, pregnancy or maternity/paternity leave.

Employee information

The Strategic Leadership Team regularly provides information to employees through a variety of channels including all-employee briefings and weekly emails from the Chief Executive. Information, news, policies, and resources are shared via our widely used employee intranet, Matchbook. We have also set up dedicated Microsoft Teams channels including Wellbeing, Learning and Development and Inclusion channels. Our Chief Executive provides updates to the whole organisation about the strategic direction of the Charity via **ANCast** webinars.

In line with legislation, we calculate and publish our annual gender pay gap data and report in April each year. Our mean gender pay gap in April 2021 and for the reporting period 2021/22 was 12.8% (April 2020: 11.4%) and median 17.0% (April 2020 15.7%). The report outlines the actions Anthony Nolan is undertaking to reduce our gender pay gap as part of the wider programme of ensuring Anthony Nolan is a diverse and inclusive organisation. **The Gender Pay Gap report** is both on our website and on the Gender Pay Gap Services portal on Gov.uk.

We regularly consult with employees through Anthony Nolan's Employee Forum which includes a representative from every division. Employees' views are also sought through web-based surveys, focus groups, and team meetings, the results of which feed into senior management decision making. We have also set up a new employee engagement platform, Hive, to talk to and learn from employees.

Our Coronavirus Taskforce continued to meet regularly to review our working practices during 2021. As COVID-19 restrictions were eased, and the government's advice for people to work from home if they could was lifted, we set up a Hybrid Working Group which is piloting Activity Based Working within our working spaces, adopting a test and learn approach, and the results of this will feed into our working practices going forward.

Wellbeing

With the pandemic continuing, wellbeing continued to be a focus for the People Team throughout 2021/22 to navigate the impact lockdowns and uncertainty had on our employees and volunteers. We maintained the Wellbeing Teams Channel as a source of information and support, harnessing its potential to be a community to connect employees who may have had similar experiences.

As the external context has changed, and people have been able to experience some sense of 'normality' with their family and friends again, the frequency of our wellbeing communications was reduced to monthly newsletters, so that we could still deliver relevant information to promote wellbeing events and offer specific support. Wellbeing support has also been built into our wider content around giving employees information around returning to our workspaces.

We have restarted our regular schedule of Managing Mental Health at Work workshops for our line managers, now delivered virtually by Mind, as well as offering sessions on resilience, grief, and compassion fatigue to all employees.

Our annual Wellbeing Week took place virtually for the second time, but with a revised format informed by Gallup's Five Elements of Wellbeing (strands were: Mental, Physical, Financial, Work and Community Wellbeing) in response to feedback from employee surveys. During the week we ran sessions including workshops on resilience, how to use Microsoft Teams to improve wellbeing/productivity, 'How to have your perfect morning' and financial wellbeing as well as sharing information, tips, and blogs. This broader approach to wellbeing will inform our work in this area in the coming year.

Employees also have access to our Employee Assistance Programme (EAP) which provides webinars, health checks, online counselling, and articles on physical and mental wellbeing. Our managers are encouraged to make wellbeing part of the regular conversations with their teams and signpost to the EAP, Mental Health First Aiders and Wellbeing channel as appropriate.

Feedback from our new employee engagement platform, Hive, continues to inform our approach to employee wellbeing, with insight around the need for support around work / life balance and productivity in a hybrid working environment driving our 2020You learning programme. Workshops with the teams around the results of these surveys are allowing us to really understand what our people need but are also enabling our teams to shine a light on the things they can do themselves to support their own wellbeing.

Our volunteers

Volunteers and supporters are the lifeblood of Anthony Nolan. As an organisation, we want them to be influential in shaping our activity and approaches. Despite continued limitations to holding in person events and opportunities, our volunteers have continued to demonstrate their commitment and passion to Anthony Nolan and our lifesaving work.

Whilst the travel restrictions were still periodically in place during 2021/22, as soon as it was safe to do so, our 55 active volunteer couriers undertook 575 trips across the UK to ensure that lifesaving stem cells were delivered to patients who needed them. Our passionate team of volunteer couriers are always putting patients first as they navigate ever-changing regulations and route changes to ensure vital donations reach their destination. Despite being unable to run in person donor recruitment events until September 2021, 357 volunteers across 44 active Marrow groups were able to sign up 6,136 potential donors this year, 5,395 at events and a further 741 online. Our Marrow groups have continued to adapt to restrictions and procedures to achieve this incredible number of sign-ups.

As we move forward, Anthony Nolan is developing ways to listen to the volunteer voice and encouraging volunteers to influence their own experience. Whether it is developing new roles, creating new feedback channels, or personalising the communications experience, volunteer experience and voice is a key driver. By involving our volunteers in the ways they want to support Anthony Nolan, they can feel more engaged and connected to our work whilst having an even greater impact.

Business relationships

Contract management procedures are in place to ensure that all supplier and customer contracts operate in the best interests of the Charity and the trading subsidiary. New suppliers are subject to a thorough appraisal process, including standard requirements for declaring interests, non-disclosure agreements as well as confirmation of compliance with our Modern Anti-Slavery Statement. Service level agreements with customers and suppliers are reviewed on a regular basis and price agreements are negotiated prior to any renewal. A Delegation of Financial Authorities Policy and Schedule, approved by the Board, is in place to determine signing authorities for contracts and oversight of key capital investment decisions, staffing matters, and audit protocols. This ensures that Trustees are aware of the use of resources within the organisation. All contracts over £250,000 are reported quarterly to the Audit and Finance Committee, and any contracts with a value of £1m or higher require approval by the Chair and are reported to the Board. A conflict of interests' declaration is a standing item on the agenda for each Board and sub-committee meeting.

The Charity has a robust procurement and vendor risk management process in place to vet its customers and suppliers. Through effective contract management, engaging relationships, and reviews with key suppliers and customers, the Board, via delegated authority to the Audit and Finance Committee, ensure that value for money is achieved with charitable funds.

Further information on our work to foster trusted business relationships and partnerships is outlined in the strategic aims of our Organisational Strategy.

Safeguarding

To read about our commitment to safeguarding all who come into contact with Anthony Nolan, please refer to our work on Integrity at [page 53](#).

Whistleblowing

It is important that any fraud, misconduct, or wrongdoing by employees or volunteers, including Trustees, acting on behalf of Anthony Nolan is reported and properly dealt with. A Whistleblowing policy is in place to ensure that people can safely raise concerns and feel confident they will be listened to, and their concerns will be properly investigated and acted upon appropriately. The Policy was reviewed, updated, and approved by the Board in March 2022.

Research integrity

In July 2020, Anthony Nolan implemented our new Research Integrity policy. The policy outlines our commitment to [The Concordat to Support Research Integrity](#) and how we fulfil the related principles in creating a comprehensive framework for responsible research conduct and

governance. The policy also meets the UK Research and Innovation Policy and Guidelines on Governance of Good Research Conduct.

In the last year, no concerns have been raised about the integrity, or otherwise, of research embarked on and produced by Anthony Nolan.

Anthony Nolan Trading Limited

Anthony Nolan Trading Limited (ANTL) is a wholly owned subsidiary of Anthony Nolan. This subsidiary plays a crucial role in fundraising on our behalf and the principal activity of ANTL is to carry on the trading operations of the group with a view to raising funds. This is achieved through advertising, fundraising events, and utilising intellectual and similar rights held by the parent charity. All commercial work carried out by our Laboratory is also conducted through ANTL.

In January 2022 we undertook a refresh of the ANTL Memorandum & Articles, and of the Service Agreement between Anthony Nolan and ANTL.

The main changes to the Memorandum & Articles were alterations to the style, format, and language to bring it in line with modern practice; clarification that Anthony Nolan has the ability to appoint and remove directors by providing notice in writing; removal of the requirement to hold an AGM; revision of the minimum number of directors from one to four and the quorum from one to three; addition of comprehensive provisions relating to the management of conflicts of interest.

The Service Agreement specifies the way that ANTL pays the Charity for the services undertaken on its behalf, and the terms under which ANTL is authorised to use the Charity's name and logo for trading, including licensing the charity's logo and trademarks. A number of minor revisions were made including an update to the Data Protection provisions.

Professional indemnity insurance

Anthony Nolan has taken out an insurance policy that provides professional indemnity insurance cover for the Trustees. The cost of this insurance for the period was £5,470 (2020/21: £4,052).

Risk and corporate governance matters

Anthony Nolan has a robust risk management process in place which operates within an overarching Risk Management Policy.

Our Organisational Risk Register records the main high-level risks facing Anthony Nolan that have the potential to impede the delivery of our strategic objectives or to have a very significant impact on the organisation. This Register is reviewed by our Strategic Leadership Team and Governance and Risk Committee every six months and reviewed and approved by the Board annually.

Across the organisation, we have implemented Divisional Risk Registers which help employees identify and manage risks within their divisions and are reviewed on a more frequent basis. This allows us to continually identify the controls and plans in place to mitigate against the risks.

Our ability to continue to save patients' lives, and improve their quality and length of life, depends on having sufficient funding in place. Therefore, **continuity of income** remains the first of four principal risks identified by the Board. Our response to this risk has been informed by the continuing impact of the COVID-19 pandemic and the fact that we are in part dependent on NHS healthcare policy. A range of actions have been, and continue to be, taken to mitigate this risk. These include: working closely and building commercial relationships with UK transplant centres and international registries, diversification and growth of income streams from research, cell & gene therapy, and fundraising, enrichment of the register and speed of the donor provision patient journey, continued monitoring and horizon-scanning to ensure early identification of potential supply chain issues and disruption to the import/export of cells, and influencing healthcare funding with the UK government. We adopt continuous improvement in our approach to fundraising appeals and donations within the digital space, alongside marketing campaigns that invest in our brand to help raise our profile.

The **loss or misuse of personal data** is the second principal risk identified by the Board, as we hold sensitive information in relation to patients, donors, financial supporters, employees, and volunteers. To mitigate against this risk, we have clear data protection, information security, and confidentiality policies and online training in place. Technical solutions have been established to ensure personal and sensitive medical data is encrypted and transmitted securely. These policies and procedures are communicated to employees and volunteers, are available through a dedicated page on our intranet, and are monitored by a standing Data Security and Protection Working Group. Internal notification reporting processes of data loss or misuse are in place to identify, investigate, and mitigate against any potential issues with regards to the use of personal data.

A Privacy Office, run by a dedicated Data Privacy Manager, ensures that data protection impact and legitimate interest assessments are completed where necessary. Policies and procedures comply with the requirements of the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018 and our Data Protection Officer reports directly to the Board, and more recently to the Governance and Risk Committee, through a quarterly written report. Our organisation-wide data mapping exercise is undertaken annually and identifies all our data processing activities, as well as any areas of risk. We have implemented a robust procedure to respond to Subject Rights Requests. There were 15 Subject Access Requests and 73 Rights to Erasure Requests received during the fiscal year 2021/22. All requests were completed within the required one-month timeframe, with

the exception of one Subject Access Request, which required a 60-day extension.

The **risk of a data security breach** due to system vulnerabilities, phishing attacks, or other similar malicious activity is the third principal risk identified by the Board. We are aware of the increased risk in this area at present as a result of external and global factors and have acted accordingly. Given the need for remote working, we had already introduced more robust information security policies to ensure that our systems are secure and regularly reviewed, with proportionate disaster recovery measures in place. We have also continued the rollout of Bitesize cyber security training sessions for all employees, as well as simulated phishing testing so we can identify any weaknesses. A data security audit has recently been undertaken by our external advisors, and virtual Chief Information and Security Officer (CISO) which has resulted in a series of actions being agreed to reduce this risk further. The audit found that our significant effort and investment over the past three years was reflected in improved maturity scores for most domains. Our Data Security & Protection Working Group is also in place to monitor progress against agreed actions and milestones. Further work is in hand to assess any potential vulnerabilities and address these as appropriate. The Governance and Risk Committee will monitor progress against this risk on behalf of the Board and will flag any areas of concern to the Board for further review, should they arise.

The fourth principal risk identified by the Board relates to **the decommissioning of a key system** within Anthony Nolan in a timely fashion to ensure that we do not become reliant on unsupported technology. Whilst back-up contingency plans do exist in the event of issues occurring with the system, many of these would involve manual processes so would not be ideal or efficient. A detailed project plan is in place to speed up the decommissioning work, with budget and resource available to support a dedicated team. The risk will be closely monitored to ensure work continues and de-risks the impact on the organisation.

The Board has given consideration to the major risks the charity is exposed to and satisfied themselves that systems or procedures are established in order to manage those risks.

Contracts management procedures are in place to make sure that all supplier contracts operate in the best interests of the charity. New suppliers are subject to an appraisal process including standard requirements for declaring interests and agreements to comply with our Modern Anti-Slavery Statement.

A Delegation of Financial Authorities Policy and Schedule, reviewed and updated in March 2022, is in place to determine signing authorities for contracts, as agreed by the Board.

As required by the Charity Commission, a Serious Incidents Reporting Policy is in place.

Energy and carbon statement

As part of the obligations set out under the Energy and Carbon Report Regulations 2018, we monitor and measure energy consumed, and subsequent carbon created as an organisation. The energy we consume is primarily fossil fuel which falls within scope 1 & 2, as classified under Energy and Carbon Reporting (SECR) and presented in tables 1 & 2. This statement excludes scope 3 emissions as these are not material to our activities.

Organisational and operational boundaries of the company

Anthony Nolan does not have a complex company structure and therefore the company accounts for 100% of the carbon produced through greenhouse gas (GHG) emissions from operations over which it has control. These are recognised as:

1. Head Office, London
2. Nottingham Laboratory
3. Laboratory and Research Facility, London

Energy consumption and greenhouse gas emissions

Anthony Nolan consumes Energy as part of our business activities which falls under scope 1 & 2 of the regulations. The methodology used for determining energy and carbon emissions within this section of the Report derive from the following:

1. Natural gas used for heating and hot water in the buildings we occupy (Scope 1)
2. Electricity used for lighting, cooling, and air conditioning and the operation of laboratory equipment (Scope 2)
3. Fuel consumption in vehicles that are used for business including employees' vehicles used for business travel and fleet vehicles (Scope 1)

Gas and electricity consumption have been taken from invoices and sub-meter readings either collated locally by our Facilities team or by third parties where we have hosted sites (Nottingham and London Labs). Where the readings/ invoices do not cover a full year, we have estimated the consumption for the full year based on the average consumption per day in the period.

Fuel consumption is measured from use of grey fleet vehicles and journeys by employees traveling from site to site. Where employees use their own vehicles for business purposes a mileage allowance is paid.

Our consumption and associated greenhouse gas emissions for the financial year April 2021 to March 2022 are shown below in Table 1

Table 1: Total energy consumption and associated greenhouse gas emissions from Scope 1 and Scope 2 for SECR Year 2 reporting period

Energy Type:	Energy Use (kWh)	% Split kWh	Emissions (tCO ₂ e/yr.)	% Split CO ₂ e
Combustion of Gas (Scope 1)	90,823	38.8%	71	
Transport (Scope 1)	12,108 (miles) 15,053	1.5%	3	
Electricity (Scope 2)	602,606	59.7%	1669	
Total (Scope 1 & 2)	1,008,482	100.00%	243	100.00%

Table 2: Energy and carbon conversion factors

The UK Government Greenhouse Gas Conversion factors for company reporting 2019 have been used to convert energy consumption to carbon dioxide equivalent emissions. The conversion factors used are summarised below:

Activity	Fuel	Unit	Year	kg CO ₂ e
Electricity generated	Electricity: UK	kWh	2021	0.2123
Gaseous Fuels	Natural gas	kWh	2021	0.1843
Transport (average car)	Diesel	kWh	2021	0.2476

UK Government GHG Conversion Factors for Company Reporting, 2020, BEIS & DEFRA

Vehicle use is based on fleet vehicles and employee travel using their own vehicles for business use. An assumption has been made that all vehicles use standard diesel biofuel blend and have an engine transmission of 2L or less. Therefore 0.2476 kg CO₂e per kWh value has been applied. The fuel conversion factor applied is (kWh/mile): 0.2857 kg CO₂e per mile / 0.2476 kg CO₂e per kWh = 1.153 kWh/mile.

Intensity ratio

Intensity ratios compare emissions data with an appropriate business metric or financial indicator. This allows a comparison of energy efficiency performance over time and with other similar size organisations in our sector. We have chosen to compare our overall emissions with our annual turnover for the 2021/22 year.

Table 3 Intensity ratio – energy consumption and associated greenhouse gas emissions per £100,000 of annual turnover.

Energy Consumption	Total greenhouse gases emissions	The annual group turnover (£'M)	Intensity Ratio	Intensity Ratio
(kWh)	(tCO ₂ e)	FY 19/20	(kWh / £100,000 turnover)	(tCO ₂ e / £100,000 turnover)
1,008,482	243	53.5	1885.0	0.454

Energy use – performance

In comparison to 2020/21 our energy consumption has marginally increased by 2%. This can be attributed to the increase in demand for energy from increased numbers of employees returning to our workplaces. The increase is low which

we can account to the success of energy reduction initiatives we implemented during the year which we estimate has off-set up to 6% of energy we would have used. Employee business travel has reduced in the last two years which we attribute to employees adopting video calls rather than opting to travel.

	Energy use - 5-year trend (kWh)				
Energy Type:	SECR Year 1 2020-21 (Baseline year)	SECR Year 2 2021-22	SECR Year 3 2022-23	SECR Year 4 2023-2024	SECR Year 5 2024-25
Combustion of Gas (Scope 1)	355,622	390,823	-	-	-
Transport (Scope 1)	23,668	15,053	-	-	-
Electricity (Scope 2)	613,762	602,606	-	-	-
Total (Scope 1 & 2)	993,032	1,008,482	-	-	-

Energy efficiency actions

Anthony Nolan is committed to reducing energy consumption and waste associated with our activities. We continue to review and introduce initiatives to proactively manage our properties and assets. The progress in the past year:

- We have established a dedicated working group and are developing policies to drive our carbon reduction and sustainability ambitions.
- We have set energy reduction benchmarks in line with the findings of our Energy Saving Opportunity Scheme (ESOS) reports and submission. This includes regular checks of the controls and settings on our high energy demand plant and equipment, reducing unnecessary lighting, making use of energy saving functions on computers and associated equipment.
- We continue to encourage reduced business travel with the installation of video conferencing in our workplaces and on employee laptops.
- We sought to replace high energy/inefficient plants such as cooling and freezing systems with low energy technology where possible.
- We continue to look at ways we can reduce energy and waste. Building on the work of the Green Team, which was established last year, we are looking to recruit local Sustainability Champions to promote good practices. We have also provided waste recycling across all our sites and seek to purchase sustainable products for consumable items we require such as paper and plastics.

Professional fundraising partnerships

Anthony Nolan uses a select group of third-party agencies to fundraise on our behalf. We have longstanding partnerships with all the third-party agencies we use, and they were all appointed following a thorough tender process driven by a focus on quality and value for money. We also work with external agencies to deliver our Payroll Giving programme and our raffles and lottery.

In order to ensure the safety and protection of our supporters, we conduct regular monitoring and mystery shopping of those dealing directly with the general public. We listen to a minimum of 20 calls a month during a telephone campaign to check the quality of appeals made on our behalf. We also collate all feedback we receive about these practices and pass it on to the relevant agencies so we can adapt our approach if necessary. Anthony Nolan is scrupulous about these practices.

To aid this, we also have a robust policy, approved by the Board, to protect vulnerable people, intrusion of privacy, and unreasonably persistent approaches. This includes extensive training of those fundraising on our behalf.

We received a total of 21 complaints related to fundraising in 2021/22, which is an increase on the eight complaints received during 2020/21. However, our complaint level last year was likely due to the limitations on our fundraising activity due to COVID-19 restrictions. During the two years prior, we received 45 complaints each year. Most complaints received were from people who objected to receiving a request to donate, the method of the approach, or receiving multiple e-mails.

We value all types of feedback about our fundraising and marketing activities, including complaints. These help us to learn and to improve the services we offer. We attempt to respond to all people directly about their feedback, provided we have the information and permission to do so, in order to try to resolve the issue and turn it into a positive experience.

Complaints can be sent to us in writing to our Fundraising Complaint Coordinator at our head office, by email to fundraisingcomplaints@anthonymolan.org, or by phoning 020 7424 6626.

Complaints are reviewed by the Complaint Coordinator before being forwarded to the relevant person to investigate and respond. This depends on the nature of the feedback and the type of activity it relates to. We will get back to individuals within 14 days to confirm receipt and within 30 days to follow up on the investigation, including details of what they can do if they are dissatisfied with the outcome. Where individuals are not satisfied with the outcome of the investigation, they can escalate these to a member of the Strategic Leadership Team at Anthony Nolan as appropriate, and/or the Fundraising Regulator. We record feedback centrally in order to assess which activities are driving complaints, to ensure that we are meeting timelines to understand any emerging themes and to support employee training where appropriate. These are collated and shared as part of our central feedback reporting to our senior leadership and as members of the Fundraising Regulator we report back to them as part of the annual complaints return.

Anthony Nolan values the privacy of all those who support us in our lifesaving work. We have systems in place to ensure that supporter data is collected, managed, and processed in line with all necessary legislation and to satisfy the requirements of the UK GDPR and Data Protection Act 2018. We are members of the Fundraising Regulator and comply with all requirements, including following the Fundraising Regulator Code of Fundraising Practice. We also check that, as representatives of Anthony Nolan, our agencies follow these practices. Anthony Nolan holds a Gambling Commission License for our postal and online raffle programme and lottery.

Fundraisers

At the request of the organisations listed below, we disclose and recognise the following fundraising donations received in 2021/22. We are grateful for their generous support of our work.

- PF Charitable Trust – £10,000 received on 10 February 2022 for our clinical Support Nurse programme.
- Jack Petchey Foundation – £14,000 received on 1 March 2022 for our Youth Engagement/Register Development work in London as part of a £28,380 pledge.
- David and Ruth Lewis Family Charitable Trust – £20,000 received on 14 February 2022 for research as part of a £60,000 three-year pledge.
- Hugh Fraser Foundation – donation received on 15 July 2021 towards our Scotland package of care including Clinical Nurse and Psychologist programme, and patient grants.
- Susan Amber Gordon – £5,000 received on 1 March 2022 in recognition of University College Hospital London and Anthony Nolan providing her stem cell transplant.
- RSM Foundation – Anthony Nolan acknowledges RSM UK Foundation for its funding of the Courier Programme and Patient Grants Programme. The total of £239,000 was received in a year.

Working with pharmaceutical companies

Anthony Nolan works with pharmaceutical companies in a variety of ways and several policies, which are underpinned by operational procedures and due diligence, ensure these relationships are conducted ethically. We have an overarching corporate policy in place which governs how we work with pharmaceutical companies in a commercial and non-commercial capacity. If a relationship is commercial, it is subject to our usual due diligence procedures for working with third parties and is always subject to a contractual framework. We always aim to be open, transparent, and honest in response to any public, supporter, patient, or media enquiry concerning any of our relationships with pharmaceutical companies. In the last year, our non-commercial work with pharmaceutical companies included:

- Novartis – Honorarium of £590 through a consultancy agreement for contribution to the Novartis Global Oncology Patient Input Panels effective from 29 July 2021. The amount paid is based on hours required in the Financial Year 2021/22.
- Therakos – Grant funding of £50,000 towards two post-transplant research roles in Financial Year 2021/22.

- Takeda – Restricted donation of £10,000 towards our vital core services and through Virtual Mental Health First Aid Skills training for Anthony Nolan representatives. Anthony Nolan Patient Services received an honorarium for representation at a Takeda event in March 2022 (£350).
- Janssen-Cilag Limited – multifaceted partnership including £18,200 grant received on 22nd February 2022 to be used to fund a CAR-T patient experience study and £180 for attendance at a CAR-T industry workshop.

Anthony Nolan is one of 15 UK charities who form the Blood Cancer Alliance (BCA). Together, we are working to tackle the issues blood cancer patients face and improve the experience and outcomes of all those living with blood cancer. While the BCA receives funding from the pharmaceutical industry, it is wholly independent of these commercial organisations. A full breakdown of BCA pharmaceutical funding is available on the [BCA website \(bloodcanceralliance.org/funding\)](https://www.bloodcanceralliance.org/funding).

Public benefit

The Trustees, in exercising their powers and duties, have complied with their duty in section 4 of the Charities Act 2011 and have had due regard to the public benefit guidance published by the Charity Commission. In preparing the report and accounts, the Trustees have complied with the requirements set out in the guidance to report on the significant activities and achievements of the Charity in 2021/22. They have reported in a way that both sets out the aims and strategies of the Charity and demonstrates how our aims and activities were carried out for public benefit.

Trustees' and Directors' responsibilities in the preparation of financial statements

The Trustees are responsible for preparing the strategic report, the Trustees' report and the financial statements in accordance with the applicable law and regulations.

Company law requires the Trustees to prepare financial statements for each financial year in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the group and Charity and of the incoming resources and application of resources, including the income and expenditure, of the group and Charity for that period.

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

- select suitable accounting policies and then apply them consistently,
- make judgements and accounting 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 charitable company will continue in business.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Charity's transactions and 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, the Charities and Trustee Investment (Scotland) Act 2005 and regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 as amended. They are also responsible for safeguarding the assets of the Charity and for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Financial statements are published on the Charity's website in accordance with the legislation in the UK governing the preparation and dissemination of financial statements, which may vary from legislation in other jurisdictions. The maintenance and integrity of the Charity's website is the responsibility of the Trustees. The Trustees' responsibility also extends to the ongoing integrity of the financial statements contained therein.

Auditor

BDO LLP has indicated its willingness to continue in office and were reappointed by the Audit and Finance Committee at its March 2022 meeting.

Statement as to disclosure of information to auditor

The Trustees who were in office on the date of approval of these financial statements have confirmed, as far as they are aware, there is no relevant audit information of which the auditor is unaware. Each Trustee has confirmed that they have taken all the steps that they ought to have taken in order to make themselves aware of any relevant audit information, and to establish that it has been communicated to the auditor.

Funds held as custodian

Although Anthony Nolan maintains restricted funds to deal with income which is earmarked for a particular purpose by donors, sponsors, and other funds, Anthony Nolan does not currently hold, and the Trustees do not intend that it will in the future hold, any funds as custodian for any third party.

The Trustees' Annual Report is approved by order of the Board and the Strategic Report and the Directors' Report required by company law (included therein) are approved by the Board in their capacity as the directors at a meeting on 27 July 2022 and signed on their behalf by:



Nicola Horlick
Chair

Independent auditors' report to the Trustees and members of Anthony Nolan

Opinion on the financial statements

In our opinion, the financial statements:

- give a true and fair view of the state of the Group's and of the Parent Charitable Company's affairs as at 31 March 2022 and of the Group's incoming resources and application of resources and the Parent Charitable Company's 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, the Charities and Trustee Investment (Scotland) Act 2005 and regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006, as amended in 2010.

We have audited the financial statements of Anthony Nolan ("the Parent Charitable Company") and its subsidiaries ("the Group") for the year ended 31 March 2022 which comprise the consolidated statement of financial activities, the parent statement of financial activities, the consolidated and charity balance sheets, the consolidated cash flow statement and 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).

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 Group and the Parent Charitable Company in accordance with the ethical requirements 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 related 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 Group and the Parent Charitable Company's ability to continue as a going concern for a period of at least 12 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 Trustees are responsible for the other information. The other information comprises the information included in the Annual Report and Financial Statements, other than the financial statements and our auditor's report thereon. The other information comprises: The Trustees' report and the strategic report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, 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 audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. 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.

Other Companies Act 2006 reporting

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Trustees' report, which includes the Directors' Report and the strategic report prepared for the purposes of Company Law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the Directors' report, which are included in the Trustees' report, have been prepared in accordance with applicable legal requirements.

In the light of the knowledge and understanding of the Group and the Parent Charitable Company and its environment obtained in the course of the audit, we have not identified material misstatement in the strategic report or the Trustee's report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 requires us to report to you if, in our opinion;

- proper and adequate accounting records have not been kept by the Parent Charitable Company, or returns adequate for our audit have not been received from branches not visited by us; or
- the Parent Charitable Company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of Trustees

As explained more fully in the Trustees' and Directors' Responsibilities in the Preparation of the Financial Statements, the Trustees (who are also the directors of the charitable company for the purposes 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 determines 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 Group's and the Parent Charitable Company'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 Group or the Parent 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 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with the Acts 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.

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

Irregularities, including fraud, are instances of non-compliance 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:

We considered the Group's own assessment of the risks that irregularities may occur either as a result of fraud or error and the Group's compliance with laws and regulations that have a direct impact on the financial statements, including the Companies Act, Charities Act 2011 and Charities and Trustee Investment (Scotland) Act 2005. Other laws and regulations where non-compliance may have a material impact on the financial statements include: employment law, taxation legislation, data protection, health and safety legislation, fundraising regulations and the Human Tissue Act 2004. Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of Those Charged with Governance and other management and inspection of regulatory and legal correspondence, if any.

We also evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls), and determined that the principal risks were related to posting inappropriate journal entries to manipulate financial results and management bias in accounting estimates.

In addition, we considered the scope for management to manipulate financial results through the timing of the recognition of income, in particular income relating to the provision of stem cell donors.

Audit response to risks identified

The Senior Statutory Auditor has assessed and concluded that the engagement team collectively had the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

We enquired of management and those charged with governance, including obtaining and reviewing supporting documentation, concerning the Group's policies and procedures relating to:

- identifying, evaluating and complying with laws and regulations and whether they were aware of any instances of non-compliance;
- detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud; and
- the internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.

Our tests included reviewing the financial statement disclosures and tested to supporting documentation to assess compliance with relevant laws and regulations discussed above.

We made enquiries of the Trustees' representatives and management and performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud.

We also reviewed minutes of meetings of those charged with governance and performed audit procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud.

In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments to address the risk of management override of controls; assessed whether the judgements made in making accounting estimates are indicative of a potential bias; and evaluated the business rationale of any significant transactions that are unusual or outside the normal course of business.

We challenged assumptions made by management in their significant accounting estimates, including revenue recognition, capitalisation policies and cost allocation methodology.


Throughout our audit procedures, we did not identify any matters relating to irregularities, including fraud.

Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery, misrepresentations or through collusion. There are inherent limitations in the audit procedures performed and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we are to become aware of it.

A further description of our responsibilities for the audit of the financial statements is located at the [Financial Reporting Council's \(FRC\) website](#). This description forms part of our auditor's report.

Use of our report

This report is made solely to the Charitable Company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, and to the Charitable Company's trustees, as a body, in accordance with the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the Charitable Company's members and 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 Charitable Company, the Charitable Company's members as a body and the Charitable Company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

DocuSigned by:

BC8C15A11E97446...

Fiona Condron (Senior Statutory Auditor)

For and on behalf of BDO LLP, statutory auditor, London, UK
16 August 2022

BDO LLP is a limited liability partnership
registered in England and Wales (with registered number OC305127).

Consolidated Statement of Financial Activities

(Including Consolidated Income and Expenditure Account) for the year ended 31 March 2022

	Notes	Unrestricted Funds	Restricted Funds	Total 2022	Unrestricted Funds	Restricted Funds	Total 2021
		£'000	£'000	£'000	£'000	£'000	£'000
Income from:							
Donations and legacies	2	8,169	876	9,045	8,008	796	8,804
Charitable activities							
Donor provision	5	43,800	-	43,800	41,260	315	41,575
Research	6	240	265	505	9	309	318
Other trading activities	3	89	-	89	320	-	320
Investments	4	89	-	89	102	-	102
Other	7	11	-	11	261	-	261
Total income		52,398	1,141	53,539	49,960	1,420	51,380
Expenditure on:							
Raising funds:							
Expenditure on raising donations and legacies	8	3,552	-	3,552	3,270	-	3,270
Expenditure on other trading activities	3, 8	61	-	61	238	-	238
Charitable activities:							
Donor provision	8	42,544	572	43,116	40,676	952	41,628
Education and awareness	8	3,437	-	3,437	3,144	-	3,144
Research	8	2,667	211	2,878	2,473	317	2,790
Total expenditure		52,261	783	53,044	49,801	1,269	51,070
Net income/(expenditure) before investment gains/(losses)		137	358	495	159	151	310
Net gains/(losses) on investments	14	-	-	-	275	-	275
Net income		137	358	495	434	151	585
Transfers between funds	22	3	(3)	-	246	(246)	-
Net movements in funds		140	355	495	680	(95)	585
Reconciliation of funds							
Total funds brought forward	22	14,048	851	14,899	13,368	946	14,314
Total funds carried forward	22	14,188	1,206	15,394	14,048	851	14,899

Parent Charity Only Statement of Financial Activities

(including Parent Charity Only Income and Expenditure Account) for the year ended 31 March 2022

	Notes	Unrestricted Funds	Restricted Funds	Total 2022	Unrestricted Funds	Restricted Funds	Total 2021
		£'000	£'000	£'000	£'000	£'000	£'000
Income from:							
Donations and legacies	2	8,169	876	9,045	8,008	796	8,804
Charitable activities							
Donor provision	5	43,800	-	43,800	41,260	315	41,575
Research	6	240	265	505	9	309	318
Investments	4	98	-	98	149	-	149
Other	7	30	-	30	296	-	296
Total income		52,337	1,141	53,478	49,722	1,420	51,142
Expenditure on:							
Raising funds:							
Expenditure on raising donations and legacies	8	3,552	-	3,552	3,270	-	3,270
Charitable activities:							
Donor provision	8	42,544	572	43,116	40,676	952	41,628
Education and awareness	8	3,437	-	3,437	3,144	-	3,144
Research	8	2,667	211	2,878	2,473	317	2,790
Total expenditure		52,200	783	52,983	49,563	1,269	50,832
Net income/(expenditure) before investment gains/(losses)		137	358	495	159	151	310
Net gains/(losses) on investments	14	-	-	-	275	-	275
Net income		137	358	495	434	151	585
Transfers between funds	22	3	(3)	-	246	(246)	-
Net movements in funds		140	355	495	680	(95)	585
Reconciliation of funds							
Total funds brought forward	22	13,988	851	14,839	13,308	946	14,254
Total funds carried forward	22	14,128	1,206	15,334	13,988	851	14,839

Consolidated and Charity Balance Sheets

As at 31 March 2022

Company number: 02379280 Charity number: 803716 Charity number (Scotland): SCO38827

	Notes	Group 2022	Group 2021	Charity 2022	Charity 2021
		£'000	£'000	£'000	£'000
Fixed assets					
Tangible assets	13	4,011	3,099	4,011	3,099
Investments	14	-	1	-	1
		4,011	3,100	4,011	3,100
Current assets					
Stocks	15	512	424	512	424
Debtors	16	10,736	10,187	10,927	10,821
Cash at bank and in hand	17	9,518	11,241	9,226	10,521
		20,775	21,852	20,665	21,766
Liabilities					
Creditors: Amounts falling due within one year	18	8,735	9,449	8,694	9,423
		12,031	12,403	11,971	12,343
Net Current assets					
		16,042	15,503	15,982	15,443
Total assets less current liabilities					
Provisions for liabilities	21	648	604	648	604
		15,394	14,899	15,334	14,839
Net assets					
The funds of the Group and the Charity					
Restricted income funds	22	1,206	851	1,206	851
Unrestricted income funds					
General Fund	22	14,188	14,048	14,128	13,988
		15,394	14,899	15,334	14,839
Total Group and Charity funds					
	22,23	15,394	14,899	15,334	14,839

The financial statements on pages 73 to 101 were approved by the Trustees and authorised for issue on 27 July 2022 and are signed on their behalf by



Date: 27 July 2022

Chair

Nicola Horlick

Consolidated and Charity Statements of Cashflow

For the year ended 31 March 2022

Company number: 02379280 Charity number: 803716 Charity number (Scotland): SCO38827

	Group 2022	Group 2021	Charity 2022	Charity 2021
	£'000	£'000	£'000	£'000
Reconciliation of net income to net cash flow from operating activities				
Net income/(expenditure) for the reporting period	495	585	495	585
Adjustments for:				
Depreciation	475	621	475	621
Change in value of investments	-	(286)	-	(286)
Interest and rents from investments	(89)	(102)	(98)	(149)
(Increase)/Decrease in stocks	(88)	229	(88)	229
(Increase)/Decrease in debtors	(549)	1,605	(106)	1,310
Decrease in creditors	(714)	(1,000)	(729)	(842)
Increase in provisions	44	36	44	36
Net cash (outflow)/inflow provided by operating activities	(426)	1,688	(7)	1,504
Net cash generated by/(used in) investing activities:				
Interest and rents from investments	89	102	98	149
Purchase of property, plant and equipment	(1,387)	(1,255)	(1,387)	(1,255)
Sale of fixed asset investments	1	3,192	1	3,192
Net cash generated by/(used in) investing activities:	(1,297)	2,039	(1,288)	2,086
(Decrease)/increase in cash and cash equivalents	(1,723)	3,727	(1,295)	3,590
Cash and cash equivalents at the beginning of year	11,241	7,514	10,521	6,931
Cash and cash equivalents at the end of year	9,518	11,241	9,226	10,521
The changes in cash and cash equivalents due to exchange rate movements in the year were £5k increase (2021: £41k decrease).				

	Group 2022	Group 2021	Charity 2022	Charity 2021
	£'000	£'000	£'000	£'000
Analysis of changes in net debt				
Cash and cash equivalents				
As at 1 April	11,241	7,514	10,521	6,931
Cash (outflows)/inflows	(1,723)	3,727	(1,295)	3,590
As at 31 March	9,518	11,241	9,226	10,521

Notes to the Financial Statements

For the year ended 31 March 2022

Charity information

Anthony Nolan is a company limited by guarantee (registered number 02379280), which is a public benefit entity and registered as a charity in England and Wales (charity number 803716), and Scotland (SCO38827), and domiciled in the UK. The address of the registered office is Royal Free Hospital, Pond Street, London NW3 2QG.

1 Accounting policies

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

a) Basis of accounting

The financial statements have been prepared in accordance with 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) (second edition effective 1 January 2019) – (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102); the Companies Act 2006, The Charities Act 2011 and the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006. The reporting currency is pound sterling.

Anthony Nolan meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

b) Basis of consolidation

The consolidated accounts incorporate the result of Anthony Nolan and its wholly owned subsidiary undertaking, Anthony Nolan Trading Limited, on a line by line basis. The consolidated entity is referred to as 'the group'.

Notes to the Financial Statements

For the year ended 31 March 2022

1 Accounting policies (continued)

c) Going concern

The Trustees have reviewed the group's and the charity's financial forecasts and scenario plan projections (including the impact of COVID-19) throughout FY 2021-22 and into future years, covering a period that exceeds 12 months from the date of signing these financial statements. Three scenarios were tabled back in 2020, 'worst case', 'better case' and 'possible case', based on transplant activity falling by 50%, 25% and 10% respectively. Actual transplant activity for FY 2020-21 and FY 2021-22 encouragingly fell by only 9% and 2% respectively, against annual expectations.

Further strategic outlook and scenario planning reviews in 2022, anticipate activity growth of circa 4% for FY 2022-23 and FY 2023-24 respectively as pre-COVID business as usual trends return and we increase our cellular therapy activities.

The key operational impacts of COVID-19 have been:

- Stem cell transplants numbers reduced initially in both 2020 and 2021, however they are expected to increase by 4%, in FY 2022-23 versus the prior year. This should bring them back, but as slightly reduced level, down 1% to FY 2019-20, a pre-COVID year.
- Fundraising income did decline, by circa £2.5m in FY 2020-21 versus the prior year. Primarily due to the loss of some key events, private site opportunities and individual giving, as lockdown measures and no mass gatherings were possible through most of this year. Legacy and Philanthropic donations have largely remained at expected levels given the pandemic and economic and cost of living climate. Fundraising income in FY 2021-22 has performed well, up £0.7m, to £9.0m versus the prior year of £8.3m, as we have adapted our digital presence and activity on-line, in particular Facebook challenges. Other financial donations and legacies have also responded. Restricted private site activity has only just restarted in March 2021. Total anticipated income from the fundraising strategy in FY 2022-23 is £9.8m.
- Cell and Gene Therapy and the collection of cord blood services were paused back in March 2020 and has now returned completely in FY 2021-22. Strong growth in cellular therapy services is anticipated in FY 2022-23, An increase of circa £1m, following isolation technology capital investment of £0.25m in April 2021.

The Strategic Leadership Team have acted to address operational efficiencies and the cost base to ensure the best use of charitable funds including:

An unsecured overdraft facility of £2.0m remains in place from March 2021 with Barclays Bank.

The charity's investments were sold in July 2020, and cash reserves are currently being held to ensure the necessary liquidity for continued operational investment, £5m of cash reserves are being held under short-term deposits.

Based on the existing levels of cash, and the scenario planning predictions based on estimated levels of income and expenditure, the Trustees are satisfied that the charity has adequate resources to continue in operation for the foreseeable future.

Trustees have also considered there are no material uncertainties in the operating environment.

Accordingly, the going concern basis has been used in preparing these financial statements.

Notes to the Financial Statements

For the year ended 31 March 2022

1 Accounting policies (continued)

d) Income

Income is recognised when the charity has entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably. Donations are accounted for when either receivable or there is sufficient evidence to suggest that it is probable and there is entitlement to the income. Donations are stated gross of any attributable tax recoverable. Sponsorship income from events is recognised when the event takes place.

Income from government and other grants are recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably. Donations and grants given for specific purposes are treated as restricted income.

Income from legacies is recognised when probate is granted and there is sufficient information to value them. Reversionary interest involving a life tenant is not recognised. Where a payment is received from an estate after the reporting date and before the accounts are authorised but it is clear that the payment had been agreed by the executors prior to the end of the reporting period, then it is treated as an adjusting event and accrued as income.

Income in respect of payments for transplants and other similar services derives from the amounts charged in respect of the search for matching tissue types and the arrangement of the transplants, and is accounted for when transplant or other procedure takes place. It is classed as income from charitable activities.

Rental income on assets leased under operating leases is recognised on a straight line basis over a lease term and is presented within the investment income.

e) Expenditure and allocation of support and governance costs

All expenditure is accounted for on an accruals basis inclusive of any irrecoverable Value Added Tax. Expenditure on charitable activities includes grants payable to other institutions and individuals. Where costs cannot be directly attributed, they are allocated to categories on a basis consistent with the budgeted use of the resources concerned and in proportions based upon a suitable ratio applicable to the nature of the cost involved. The basis of allocation of support and governance costs is analysed in Note 10.

Redundancy and termination benefits are recognised in the period in which the charity commits to incur the costs. These costs are allocated on the same basis as other expenditure.

Under government measures announced to support entities employing key workers during the coronavirus pandemic, an extension of the window that employees can take their statutory annual leave entitlement has been amended for the next two years. The regulations, FRS102, will allow up to four weeks unused annual leave to be carried over. Anthony Nolan has agreed a maximum carry over of five (5) days and the necessary Holiday Pay provision has been accrued at year end by individual staff member based on their annual leave entitlement.

Grants to third parties are charged in the year when an award is approved by the relevant award panel and the commitment is communicated to the recipient, except in cases where the offer is conditional. Such grants are recognised as expenditure when conditions are fulfilled.

Notes to the Financial Statements

For the year ended 31 March 2022

1 Accounting policies (continued)

f) Foreign currencies

Transactions denominated in foreign currencies are recorded using the rate of exchange ruling at the date of the transaction. Monetary assets and liabilities denominated in foreign currencies are translated using the rate of exchange ruling at the balance sheet date. All exchange gains or losses are included in the statement of financial activities in the period to which they relate.

g) Financial instruments

Basic financial instruments

The group has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial, other than fixed assets investments, are initially recognised at transaction value and subsequently measured at their settlement value.

h) Research and development expenditure

Expenditure on research and development is written off to the Statement of Financial Activities in the period in which it is incurred.

i) Tangible fixed assets

All tangible assets purchased costing more than £1,000 that have a useful economic life that exceeds one year are capitalised and classified as fixed assets, the exception being computer equipment, which is all capitalised, even if the cost is lower than £1,000. Tangible fixed assets are stated at historical cost less depreciation. Depreciation is provided on all tangible fixed assets at rates calculated to write each asset down to its estimated residual value over its expected useful life, as follows:

Leasehold buildings	over the life of the lease
Leasehold improvements, fixtures & fittings	over 3 to 4 years
Office equipment	over 3 to 5 years
Computer equipment and software	over 3 years
Laboratory equipment	over 3 to 5 years

In circumstances where the charity incurs software development costs that meet the criteria set out in Section 18 of FRS 102 then those costs will be capitalised.

Software and software development costs are treated as tangible assets.

Notes to the Financial Statements

For the year ended 31 March 2022

1 Accounting policies (continued)

j) Stocks

Stocks are valued at the lower of cost and net realisable value. Stocks that have reached the expiry date are written off at the point of expiry.

k) Leased assets and obligations

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

l) Taxation

The company is a registered charity and as such its income and gains falling within Sections 471 to 489 of the Corporation Tax Act 2010 or Section 256 of the Taxation of Chargeable Gains Act 1992 are exempt from Corporation tax to the extent that they are applied to its charitable activities.

Costs are recorded gross of VAT but the group is able to reclaim a proportion of VAT paid, because of its trading activities, using the partial exemption method.

The subsidiary company distributes any taxable profits to the charity each year under Qualifying Charitable distribution.

m) Pension contributions

The group and the charity make contributions into defined contribution pension schemes on behalf of certain employees. The assets of the schemes are held separately from those of the group and the charity in independently administered funds. The amount charged to the Statement of Financial Activities in respect of pension costs is the total contributions payable for the year.

n) Fund accounting

The general fund comprises the accumulated surpluses of unrestricted incoming resources over resources expended, which are available for use in furtherance of the general objectives of the charity.

Designated funds are part of unrestricted funds which Trustees have earmarked for a particular project or use, without restricting or committing the funds legally. The designation may be cancelled by the trustees if they later decide that the charity should not proceed or continue with the use or project for which the funds were designated.

Restricted funds are funds subject to specific conditions imposed by funders. The purpose and use of the restricted funds are set out in the notes to the accounts. Amounts unspent at the period end are carried forward in the balance sheet. Where the specific conditions of the donation are met so the funds are no longer restricted in purpose or use, unspent amounts are transferred to the general fund.

Restricted income spend on fixed assets, such as laboratory equipment, is shown as a transfer to the unrestricted fund at the point of purchase, once the terms of the restriction have been met.

Notes to the Financial Statements

For the year ended 31 March 2022

1 Accounting policies (continued)

o) Provisions

Provision is made by the group and the charity for liabilities and charges arising from legal or constructive obligations that exist at the balance sheet date. The amount is calculated on the basis of the estimated cost to settle the present obligation or transfer it to a third party at that date. Consideration is given to the timing of the cash flows and to future events and uncertainties which may affect the amount required to settle the obligations.

Critical accounting judgement and sources of estimation uncertainty

Estimates and judgements are continually evaluated and are based on historical evidence and other factors, including expectations of future events that are believed to be reasonable under circumstances.

Critical judgements in applying the charity's accounting policies

(i) Dilapidation costs

In estimating the dilapidation costs relating to the leases of premises a provision is calculated in accordance with the amount per square foot. This is applied at each year end based on the premises occupied and when major improvements are carried out, or according to the surveyor's estimates.

2 Donations and legacies income

	Unrestricted Funds	Restricted Funds	Total 2022	Total 2021
	£'000	£'000	£'000	£'000
Group & Charity				
Donations	7,342	876	8,218	7,578
Legacies	821	-	821	694
Statutory grants (CRJS grant)	6	-	6	532
	8,169	876	9,045	8,804

Notes to the Financial Statements

For the year ended 31 March 2022

3 Trading operations and investments

The charity has one wholly owned subsidiary, Anthony Nolan Trading Limited (“ANTL”), a company registered in England & Wales (Company number 02511952, registered office: The Royal Free Hospital, Pond Street, London NW3 2QG). The charity owns 100 ordinary shares of £1 each that were issued in ANTL at par upon incorporation. These shares are carried in the balance sheet at their original cost of £100.

The principal activity of ANTL is to carry on the trading operations of the group with a view to raising funds on behalf of the parent charity, which is achieved through the sale of merchandise, advertising, the organisation of fundraising events, and by exploiting intellectual property and other similar rights held by the parent charity. Annual financial statements for this subsidiary company are filed with the Registrar of Companies for England and Wales, and are publicly available.

At 31 March 2022, the value of ANTL's net assets was £61k (2021: £61k) matching the value of the shareholder's funds. Current assets were £308k (2021: £814k) and current liabilities £247k (2021: £753k).

In the year ANTL made a turnover of £89k (2021: £320k) and expended £80k (2021: £273k), including a share of central costs payable to Anthony Nolan (Note 27), thereby generating operating profit of £9k (2021: £47k). The sum equivalent to the taxable profits was distributed to Anthony Nolan.

4 Investment income

	Unrestricted Funds	Restricted Funds	Total 2022	Total 2021
	£'000	£'000	£'000	£'000
Group				
Rent receivable under operating leases	79	-	79	78
Investment income	-	-	-	21
Bank interest receivable on short term cash deposits	10	-	10	3
	89	-	89	102
Charity				
Rent receivable under operating leases	79	-	79	78
Investment income	-	-	-	21
Bank interest receivable on short term cash deposits	10	-	10	3
Anthony Nolan Trading Ltd: Qualifying Charitable donation	9	-	9	47
	98	-	98	149

Notes to the Financial Statements

For the year ended 31 March 2022

5 Donor provision income**Group and Charity**

Fees receivable for the provision of donors

Support income in relation to donor processing

Statutory grant (DHSC COVID-19 grant)

Unrestricted Funds	Restricted Funds	TOTAL 2022	TOTAL 2021
£'000	£'000	£'000	£'000
43,467	-	43,467	40,900
333	-	333	360
-	-	-	315
43,800	-	43,800	41,575

6 Research income**Group and Charity**

Grant income receivable

Unrestricted Funds	Restricted Funds	TOTAL 2022	TOTAL 2021
£'000	£'000	£'000	£'000
240	265	505	318

7 Other income**Group**

Other income

Unrestricted Funds	Restricted Funds	TOTAL 2021	TOTAL 2020
£'000	£'000	£'000	£'000
11	-	11	261
11	-	11	261

Charity

Anthony Nolan Trading Ltd: recharge of costs

Other income

19	-	19	35
11	-	11	261
30	-	30	296

Notes to the Financial Statements

For the year ended 31 March 2022

8 Analysis of expenditure

	Activities undertaken directly		Grant funding of activities	Support costs (Note 10)		Total costs
	Staff costs	Other cost		Staff costs	Other cost	
	£'000	£'000	£'000	£'000	£'000	£'000
Group						
2021/22						
Expenditure on:						
Raising funds						
Expenditure on raising donations and legacies	1,343	1,237	-	424	548	3,552
Expenditure on other trading activities	-	61	-	-	-	61
Charitable activities:						
Donor Provision	8,267	27,955	165	3,213	3,516	43,116
Education and awareness	1,615	717	-	469	636	3,437
Research	1,298	814	-	329	437	2,878
Total expenditure	12,523	30,784	165	4,435	5,137	53,044

2020/2021

Expenditure on:

Raising funds

Expenditure on raising donations and legacies	1,340	866	-	447	617	3,270
Expenditure on other trading activities	-	238	-	-	-	238

Charitable activities:

Donor Provision	7,869	26,516	84	3,226	3,933	41,628
Education and awareness	1,485	577	-	451	631	3,144
Research	1,274	578	150	331	457	2,790

Total expenditure

11,968	28,775	234	4,455	5,638	51,070
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Notes to the Financial Statements

For the year ended 31 March 2022

8 Analysis of expenditure (continued)

	Activities undertaken directly		Grant funding of activities	Support costs (Note 10)		Total costs
	Staff costs	Other cost		Staff costs	Other cost	
	£'000	£'000	£'000	£'000	£'000	£'000
Charity						
2021/22						
Expenditure on:						
Raising funds	1,343	1,237	-	424	548	3,552
Charitable activities						
Donor Provision	8,267	27,955	165	3,213	3,516	43,116
Education and awareness	1,615	717	-	469	636	3,437
Research	1,298	814	-	329	437	2,878
Total expenditure	12,523	30,723	165	4,435	5,137	52,983
2020/2021						
Expenditure on:						
Raising funds	1,340	866	-	447	617	3,270
Charitable activities						
Donor Provision	7,869	26,516	84	3,226	3,933	41,628
Education and awareness	1,485	577	-	451	631	3,144
Research	1,274	578	150	331	457	2,790
Total expenditure	11,968	28,537	234	4,455	5,638	50,832

The amount of irrecoverable VAT included in the group and charity expenditure is £1,027k (2021: £1,266k).

Notes to the Financial Statements

For the year ended 31 March 2022

9 Analysis of grants

	Grants to institutions £'000	Grants to individuals £'000	Support costs £'000	Total costs £'000
Group and Charity				
2021/22				
Charitable activities:				
Donor Provision	87	78	25	190
	87	78	25	190
2020/21				
Charitable activities:				
Donor Provision	17	68	13	98
Research	150	-	22	172
	167	68	35	270

During the 2021/22 financial year £87k (2021: £167k) worth of grants were given to institutions:
£42k (2021: £10K) was given in the year to African-Caribbean Leukaemia Trust to recruit BAME donors.
£4k (2021: £4k) was given to Adrian Sudbury School Education Trust.
£20k (2021: Nil) was given to Kokni Muslim Association Birmingham to recruit BAME donors.
£20k (2021: Nil) was given to Green Lane Masjid & Community Centre to recruit BAME donors.
£1k (2021: Nil) was given to CLIC Sargent to improve cancer outcomes.
There were no Research grants in 2022 (2021: £150k).

During the 2021/22 financial year £78k (2021: £68k) worth of grants were given to individuals.
£78k (2021: £66k) was given to 288 (2021: 267) patients to help with the costs of lifestyle changes caused by treatment.

Notes to the Financial Statements

For the year ended 31 March 2022

10 Analysis of support costs

	Property	Finance and Management	Human Resources	Technology	Governance	Total costs
	£'000	£'000	£'000	£'000	£'000	£'000
Group and Charity						
2021/22						
Expenditure on:						
Raising funds	160	150	90	531	41	972
Charitable activities:						
Donor Provision	1,005	1,581	561	3,328	254	6,729
Education and awareness	187	147	105	619	47	1,105
Research	128	108	72	426	32	766
Total support costs	1,480	1,986	828	4,904	374	9,572
2020/2021						
Expenditure on:						
Raising funds	178	129	134	586	37	1,064
Charitable activities:						
Donor Provision	1,064	1,585	801	3,490	219	7,159
Education and awareness	184	118	139	603	38	1,082
Research	132	94	100	435	27	788
Total support costs	1,558	1,926	1,174	5,114	321	10,093

Basis of the allocation of expenditure:

Where appropriate, expenditure, including depreciation, is allocated directly to the activity to which that expenditure relates.

Expenditure which does not relate directly to an activity but are incurred to enable activities to occur are classified as support costs.

- Finance & management costs relating to governance are estimated based on the time and resources incurred on governance activities.
- Other finance costs are apportioned in proportion to total direct expenditure incurred per activity.
- All other support costs are apportioned in accordance with the average full time equivalent number of staff directly employed in that activity during the financial year.

Notes to the Financial Statements

For the year ended 31 March 2022

11 Staff costs

The charity considers its key management personnel, as defined by FRS 102, to comprise the Trustees, the Chief Executive Officer and the members of its Strategic Leadership Team. All Trustees give their time freely and no one receives remuneration.

	Group and Charity	Group and Charity
	2022 No.	2020 No.
The average monthly number of persons employed by the group and charity during the year (excluding trustees) was:		
Charitable activities:		
Donor provision	258	252
Education and awareness	37	33
Research	26	25
Raising funds	33	33
	354	343
Staff costs for the above:	£'000	£'000
Wages and salaries	13,696	12,911
Social security costs	1,423	1,341
Pension costs	765	711
Staff restructuring costs	-	176
	15,884	15,139
Staff costs are allocated in the group's financial statements as follows:	£'000	£'000
Donor provision	11,480	11,095
Education and awareness	2,084	1,936
Research	1,627	1,605
Raising funds	1,767	1,787
	16,958	16,423

Included in the allocated staff costs (note 8), in addition to payroll costs are the costs of funding academic positions of £21k (2021: £29k); staff benefit costs of £153k (2021: £151k); NHS secondment and other similar costs of £943k (2021: £935k), other staff costs including training of £77k (2021: £64k). There was also a decrease of staff holiday provision of £120k (2021: increase £105k).

During 2021/22 the charity continued development work on the new Customer Relationship System **Transform**. £228k of project development staff costs was capitalised (2021: £275k), including £195k wages and salaries (2021: £236k), £22k of social security costs (2021: £26k) and £11k pension costs (2021: £13k).

These salary costs are not included in staff costs figures above.

Remuneration and benefits received in the year by key management personnel, including employer's National Insurance contributions, were £964k (2021: £896k).

There were no restructuring staff costs in 2022 (2021: £173k).

Notes to the Financial Statements

For the year ended 31 March 2022

11 Staff costs (continued)

	Group and Charity 2022 No.	Group and Charity 2021 No.
The number of employees whose emoluments for the year fell within the following ranges was:		
£60,001 to £70,000	15	14
£70,001 to £80,000	6	4
£80,001 to £90,000	-	3
£90,001 to £100,000	2	2
£100,001 to £110,000	2	1
£110,001 to £120,000	1	1
£120,001 to £130,000	-	1
£130,001 to £140,000	1	-

The group made contributions to money purchase pension schemes on behalf of all employees whose emoluments exceeded £60,000, and the total contributions payable during the year amounted to £123k (2021: £130k).

No travel expenses were claimed by Trustees in 2022 (2021: Nil).

12 Other costs

	2022 £'000	2021 £'000
Net movement in funds is stated after charging:		
Depreciation:		
Charge for the year	475	621
Stock: amounts expensed during the year	1,860	1,818
Research and development expenditure	2,112	2,022
Operating lease rentals:		
Land and buildings	431	530
Plant and machinery	18	34
Auditor's remuneration:		
Statutory Audit fees payable to BDO LLP (Charity £45k (2021: £43k))	49	46
Grant assurance fees payable to BDO LLP	3	10
Tax compliance services payable to BDO LLP	5	5

The group and the charity have an insurance policy that provides professional indemnity insurance cover for the trustees. The cost of this insurance for the year was £5k (2021: £4k).

During the year to 31 March 2022, the group accounted for net foreign exchange gains of £9k (2021: £26k net gains).

Notes to the Financial Statements

For the year ended 31 March 2022

13 Tangible assets

	Leasehold buildings		Leasehold improvements, fixtures and fittings	Office equipment	Computer software costs	Laboratory equipment	Total
	Long term	Short term					
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Group and Charity							
Cost:							
1 April 2021	1,842	137	1,441	208	3,219	4,405	11,252
Additions	-	-	129	-	882	376	1,387
Disposals	-	-	-	(24)	-	(1,316)	(1,340)
31 March 2022	1,842	137	1,570	184	4,101	3,465	11,299
Depreciation and disposals							
1 April 2021	631	88	1,163	168	2,335	3,768	8,153
Charge for the year	16	6	94	19	143	197	475
Disposals	-	-	-	(24)	-	(1,316)	(1,340)
31 March 2022	647	94	1,257	163	2,478	2,649	7,288
Net book value:							
31 March 2022	1,195	43	313	21	1,623	816	4,011
31 March 2021	1,211	49	278	40	884	637	3,099

Certain leasehold buildings are used, when surplus to the group's and the charity's requirements, are sublet to generate rental income under operating leases.

Notes to the Financial Statements

For the year ended 31 March 2022

14 Investments

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
Funds held in managed portfolios				
Valuation at 1 April	1	2,907	1	2,907
Acquisition at cost	-	-	-	-
Sale of investments	(1)	(3,192)	(1)	(3,192)
Income received	-	21	-	21
Net gains/(losses) on revaluation	-	275	-	275
Investment management costs	-	(10)	-	(10)
Valuation at 31 March	-	1	-	1

15 Stocks

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
Raw materials and consumables	512	424	512	424

16 Debtors

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
Amounts falling due within one year:				
Trade debtors	5,994	6,094	5,994	6,033
Amounts due from group undertakings	-	-	198	679
Qualifying Charitable donation from group undertakings	-	-	9	47
Other debtors	20	7	20	7
Prepayments and accrued income	4,722	4,086	4,706	4,055
	10,736	10,187	10,927	10,821

Notes to the Financial Statements

For the year ended 31 March 2022

17 Cash

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
Cash at bank and in hand	9,518	11,241	9,226	10,521

18 Creditors: amounts falling due within one year

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
Trade creditors	2,567	3,377	2,554	3,374
Other creditors	124	117	124	117
Other taxation and social security costs	413	419	413	419
Accruals and deferred income	5,472	4,750	5,444	4,727
Grants payable	159	786	159	786
	8,735	9,449	8,694	9,423

The charity is party to a Group VAT registration with its subsidiary undertakings. At 31 March 2022 the amount due under this arrangement in respect of the group companies was £20k (2021: £56k).

19 Grants payable

	Group 2022 £'000	Group 2021 £'000	Charity 2022 £'000	Charity 2021 £'000
Grants brought forward	786	1,019	786	1,019
Additions	165	234	165	234
Payments	(792)	(467)	(792)	(467)
Grants carried forward	159	786	159	786
Grants payable to:				
IMPACT – University of Birmingham	159	636	159	636
Blood Cancer UK – COVID Vaccine Research	-	150	-	150
	159	786	159	786

Notes to the Financial Statements

For the year ended 31 March 2022

20 Movements in deferred income

	Group 2022	Group 2021	Charity 2022	Charity 2021
	£'000	£'000	£'000	£'000
Deferred income at beginning of the year	594	565	574	464
Income recognised in the year	(593)	(564)	(573)	(463)
Income deferred in the current year	326	593	305	573
Deferred income at the year end	327	594	306	574

Deferred income comprises income received in respect of future fundraising events.

21 Provisions for liabilities and charges

	Group 2022	Group 2021	Charity 2022	Charity 2021
	£'000	£'000	£'000	£'000
As at 1 April	604	568	604	568
New provisions	44	36	44	36
As at 31 March	648	568	648	568

A provision for dilapidations is being carried in the balance sheets of the group and the charity in respect of the estimated costs of unavoidable reinstatement and refurbishment works relating to certain leasehold properties that are currently occupied by the charity for its own use. This provision was created in 2004, added to in 2017 (£200k) and recalculated in 2021 and 2022 following lease negotiations. It is now expected to be utilised at the earliest in 2024.

Notes to the Financial Statements

For the year ended 31 March 2022

22 The funds of the Group and the Charity

	Balance at 1 Apr 2021	Income	Expenditure	Gross transfers between funds	Net gains/ (losses) on investments	Balance at 31 Mar 2022
	£'000	£'000	£'000	£'000	£'000	£'000
Group						
Restricted income funds						
<u>Voluntary income</u>						
Donor Campaign and Processing Fund	97	126	(97)	-	-	126
Donor Provision Fund	221	77	(180)	-	-	118
Research Projects Fund	-	44	(26)	-	-	18
Laboratory Equipment Fund	1	2	-	(3)	-	-
Patient Experience Fund	85	254	(238)	-	-	101
Transplant Service Improvement Fund	-	373	(57)	-	-	316
	<u>404</u>	<u>876</u>	<u>(598)</u>	<u>(3)</u>	<u>-</u>	<u>679</u>
Scientific Research Funds	447	265	(185)	-	-	527
Total restricted funds	851	1,141	(783)	(3)	-	1,206
Unrestricted income funds						
General Fund	14,048	52,398	(52,261)	3	-	14,188
Total funds	<u>14,899</u>	<u>53,539</u>	<u>(53,044)</u>	<u>-</u>	<u>-</u>	<u>15,394</u>

Notes to the Financial Statements

For the year ended 31 March 2022

22 The funds of the Group and the Charity (continued)

	Balance at 1 April 2020	Income	Expenditure	Gross transfers between funds	Net gains/ (losses) on investments	Balance at 31 March 2021
	£'000	£'000	£'000	£'000	£'000	£'000
Group						
Restricted income funds						
<u>Voluntary and statutory income</u>						
Donor Campaign and Processing Fund	130	112	(145)	-	-	97
Donor Provision Fund	301	85	(165)	-	-	221
Research Projects Fund	7	30	(30)	(7)	-	-
Laboratory Equipment Fund	1	228	-	(228)	-	1
Patient Experience Fund	71	341	(327)	-	-	85
	510	796	(667)	(235)	-	404
Scientific Research Funds	436	309	(287)	(11)	-	447
<u>Statutory grants</u>						
Innovation Fund	-	315	(315)	-	-	-
Total restricted funds	946	1,420	(1,269)	(246)	-	851
Unrestricted income funds						
<u>Designated funds</u>						
DHSC COVID-19 grant	100	-	-	(100)	-	-
General Fund	13,268	49,960	(49,801)	346	275	14,048
Total funds	14,314	51,380	(51,070)	-	275	14,899

Notes to the Financial Statements

For the year ended 31 March 2022

22 The funds of the Group and the Charity (continued)

	Balance at 1 April 2021	Income	Expenditure	Gross transfers between funds	Net gains/ (losses) on investments	Balance at 31 March 2022
	£'000	£'000	£'000	£'000	£'000	£'000
Charity						
Restricted income funds						
<u>Voluntary and statutory income</u>						
Donor Campaign and Processing Fund	97	126	(97)	-	-	126
Donor Provision Fund	221	77	(180)	-	-	118
Research Projects Fund	-	44	(26)	-	-	18
Laboratory Equipment Fund	1	2	-	(3)	-	-
Patient Experience Fund	85	254	(238)	-	-	101
Transplant Service Improvement Fund	-	373	(57)	-	-	316
	404	876	(598)	(3)	-	679
Scientific Research Funds	447	265	(185)	-	-	527
Total restricted funds	851	1,141	(783)	(3)	-	1,206
Unrestricted income funds						
General Fund	13,988	52,337	(52,200)	3	-	14,128
Total funds	14,839	53,478	(52,983)	-	-	15,334

Notes to the Financial Statements

For the year ended 31 March 2022

22 The funds of the Group and the Charity (continued)

	Balance at 1 April 2020	Income	Expenditure	Gross transfers between funds	Net gains/ (losses) on investments	Balance at 31 March 2021
	£'000	£'000	£'000	£'000	£'000	£'000
Charity						
Restricted income funds						
<u>Voluntary and statutory income</u>						
Donor Campaign and Processing Fund	130	112	(145)	-	-	97
Donor Provision Fund	301	85	(165)	-	-	221
Research Projects Fund	7	30	(30)	(7)	-	-
Laboratory Equipment Fund	1	228	-	(228)	-	1
Patient Experience Fund	71	341	(327)	-	-	85
	510	796	(667)	(235)	-	404
Scientific Research Funds	436	309	(287)	(11)	-	447
<u>Statutory grants</u>						
DHSC COVID-19 grant	-	315	(315)	-	-	-
Total restricted funds	946	1,420	(1,269)	(246)	-	851
Unrestricted income funds						
<u>Designated funds</u>						
Innovation Fund	100	-	-	(100)	-	-
General Fund	13,208	49,722	(49,563)	346	275	13,988
Total funds	14,254	51,142	(50,832)	-	275	14,839

Restricted funds

Donor Campaign and Processing Fund: in 2021/22 the charity received various grants to cover volunteer courier operations.

Donor Provision Fund: in 2021/22 the charity received various grants to recruit and type to high resolution male donors aged between 16 and 30 years and BAME donors.

Patient Experience Fund was created in 2014/15 for the purposes of supporting post transplant patients. 2021/22 grants were mainly to fund positions of patient nurses in UK Transplant Centres and support patients' grant scheme.

Transplant Service Improvement Fund was created in 2021/22 to digitise and streamline services to the transplant centres.

The biggest donor to the Transplant Service Improvement Fund was The Fidelity UK Foundation, contributing £323k in 2021/22 (2020/21: Nil).

Donations and grants received to fund the purchase of specific items of laboratory equipment for either research or histocompatibility laboratories are credited to the **Laboratory Equipment Fund**. When the specified asset is purchased and there is no on-going restriction over its use, the value of the asset is transferred to the General Fund. £3k was transferred from Laboratory Equipment Fund to General Fund.

The depreciation of the asset is charged to the General Fund over the life of the asset.

The **Scientific Research Fund** and the **Research Projects Fund** are set up to recognise income received annually in the form of a number of different grants awarded for specific research projects in immunogenetics and related fields. The cost of undertaking these research projects is allocated to the funds, with unspent monies being carried forward into 2022/2023.

Notes to the Financial Statements

For the year ended 31 March 2022

23 Analysis of net assets between funds

	Fixed assets	Net current assets	Creditors over 1 year and provisions for liabilities and charges	Total
	£'000	£'000	£'000	£'000
Fund balances at 31 March 2022				
Group				
Restricted income funds	-	1,206	-	1,206
Unrestricted income funds: General Fund	4,011	10,825	(648)	14,188
Net Assets	4,011	12,031	(648)	15,394
Charity				
Restricted income funds	-	1,206	-	1,206
Unrestricted income funds: General Funds	4,011	10,765	(648)	14,128
Net Assets	4,011	11,971	(648)	15,334
Fund balances at 31 March 2021				
Group				
Restricted income funds	-	851	-	851
Unrestricted income funds: General Fund	3,100	11,552	(604)	14,048
Net Assets	3,100	12,403	(604)	14,899
Charity				
Restricted income funds	-	851	-	851
Unrestricted income funds: General Funds	3,100	11,492	(604)	13,988
Net Assets	3,100	12,343	(604)	14,839

Notes to the Financial Statements

For the year ended 31 March 2022

24 Commitments under operating leases

	Group 2022	Group 2021	Charity 2022	Charity 2021
	£'000	£'000	£'000	£'000

The Charity as a lessee:

The total future minimum lease payments under non-cancellable operating leases, which are calculated based on rent notice period, are as follows:

Land and buildings

Amounts due

Within one year	460	348	460	348
Between one and five years	433	14	433	14

Plant and machinery

Amounts due

Within one year	15	18	15	18
Between one and five years	-	4	-	4

908	384	908	384
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The total future minimum service charge payments are as follows:

Land and buildings

Amounts due

Within one year	125	205	125	205
Between one and five years	111	136	111	136

236	341	236	341
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The Charity as lessor:

At the year end, the Charity had contracted with tenants, under non-cancellable operating leases, for the following future minimum lease payments:

Amounts receivable:

Less than one year	75	75	75	75
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75	75	75	75
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The operating leases represent lease of 65% of Research facility to a third party. The lease is negotiated over terms of 74 years (2021: 75 years).

Notes to the Financial Statements

For the year ended 31 March 2022

25 Pension commitments

The group and the charity make contributions into defined contribution pension schemes on behalf of certain employees. The assets of the schemes are held separately from those of the group and the charity in independently administered funds. The amount charged to the Statement of Financial Activities in respect of pension costs (as shown in note 11) is the total contributions payable for the period. The amount payable at 31 March 2022 is £121k (2021: £105k).

26 Capital commitments

	Group 2022	Group 2021	Charity 2022	Charity 2021
	£'000	£'000	£'000	£'000
Capital commitments – contracted for, but not provided	-	230	-	230

27 Related parties transactions

Anthony Nolan Trading Limited (ANTL) is a wholly owned subsidiary of Anthony Nolan.

During 2021/22 Anthony Nolan received income of £28k from ANTL, which is made up of Qualifying Charitable donation £9k and management charge £19k (2020/21 income of £82k: Qualifying Charitable donation £47k and management charge £35k).

The nature of transfers to/from the subsidiary covers the following areas:

- Income received by the Charity on behalf of ANTL;
- Income received by ANTL on behalf of the Charity;
- Expenditure incurred by the Charity on behalf of ANTL.

ANTL debtor balance at 31 March 2022 was £207k (31 March 2021: £727k).

Red Badger, a digital consultancy company, carried out £96k worth of consultancy work for Anthony Nolan in 2021/22.

Two Trustees declared a conflict of interest: Mike Altendorf (Non-Executive Director of Red Badger) and Nicola Horlick (Advisory Board Member of Red Badger).

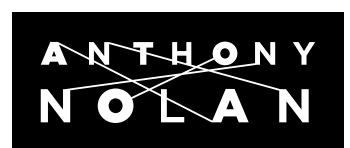
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