Charity Registration No. 1183890 (England and Wales)

Charity Registration No. SC049802 (Scotland)

Company Registration No. 11911752 (England and Wales)

LEUKAEMIA CARE ANNUAL REPORT AND CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2022

www.leukaemiacare.org.uk

LEGAL AND ADMINISTRATIVE INFORMATION

Patrons Lady Penny Mountbatten

Beverley Warboys

Trustees Mr Christopher R G Matthews-Maxwell

(Chair)

Mrs W J Davies (Treasurer) Dr Emmanouil Nikolousis Ms E Wilson (Vice Chair)

Ms Kate Stallard Mr Robert Heppell Mr Dharmesh Mehta Professor Mhairi Copla

Professor Mhairi Copland (Appointed 2 February

2022)

Ms Carina Patterson

Helen Knight (Appointed 4 May 2022)
Dr Sarah Smith (Appointed 2 February

2022)

President Dr Richard Taylor

Vice Presidents Ms Sue Merchant

Mr Roland Maturi

Professor Claire Harrison

Dr Robert Marcus

Professor Andrew Pettitt Dr Noel E M Harker Ms Sheila Hegarty Mr Jason Eliadis

Mr C.R.G. Matthews-Maxwell

Mr Peter Mondon Mr Anthony Gavin Mr Albert Podesta

Senior Management Team

Chief Executive Officer

Chief Operating Officer and Deputy CEO

Communications and Fundraising Director

Zack Pemberton-Whiteley

Monica Izmajlowicz

Nicole Scully

Medical Advisory Panels As descibed in the Trustees' Report

Secretary Monica Izmajlowicz

Charity number (England and Wales) 1183890

Charity number (Scotland) SC049802

Company number 11911752

Website www.leukaemiacare.org.uk

LEGAL AND ADMINISTRATIVE INFORMATION

Registered office One Birch Court

Blackpole East Worcester WR3 8SG

Auditor Kendall Wadley LLP

Granta Lodge 71 Graham Road

Malvern Worcestershire WR14 2JS

Bankers Barclays Bank Plc

54 High Street Worcester WR1 2QQ

Solicitors Harrison Clark Rickerbys

5 Deansway Worcester WR1 2JG

Investment advisors Cardale Asset Management

2 Greengate Cardale Park Harrogate HG3 1GY

CCLA

Senator house

85 Queen Victoria Street

London EC4V 4ET

Brewin Dolphin
12 Smithfield Street

London EC1A 9BD

CONTENTS

A word from our Chairman and CEO	Page
Trustees' report	2 - 28
Statement of trustees' responsibilities	29
Independent auditor's report	30 - 32
Statement of consolidated financial activities	33
Statement of financial activities - charity	34
Consolidated Balance sheet	35 - 36
Charity Balance sheet	37 - 38
Statement of cash flows	39
Notes to the financial statements	40 - 61

A word from our Chairman and CEO FOR THE YEAR ENDED 31 DECEMBER 2022

2022 was a year of change at Leukaemia Care – including a new long-term strategy, with a fresh look at our vision, mission, and long-term goals and the way we operate after the challenges of the pandemic. Our new strategy focuses on "The future we will create together" setting out our vision and goals to 2030. Alongside this we implemented an ambitious operational plan including significant investment from reserves to ensure we are on the path to delivering our long-term goals.

A key part of the plan is to diversify and grow our income to allow us to deliver new services and expand existing ones to reach more people. To do this, we expanded our fundraising team bringing in expertise in areas such as grants and trusts, while increasing resources in existing fundraising streams.

Planning started on Leukaemia Care's first public art trail "Unicornfest", with a trail of 60 sponsored unicorn statues throughout Bristol throughout the Summer of 2023 raising both awareness and funds for Leukaemia Care. Each sculpture is painted by a local artist, which will then be auctioned to raise money for the charity.

Other exciting developments include the launch of World Gaming Day on the 22 October – a new initiative from Leukaemia Care encouraging supporters to gather with friends to play games and raise money for charity.

2022 will also go down on record as the year Leukaemia Care raised over £2 million for the first time! This represents our best year ever and a 59% growth on income from 2021. We ended the year with income up on budget, and contrary to expectations of a significant deficit we ended up with a surplus of approximately £95k. With this improvement in our financial position, we will work to invest further from reserves for the long-term benefit of the charity.

However, 2022 was not without its challenges. Recruitment delays across fundraising until late in the year put pressure on our staffing team to deliver on an ambitious plan which makes many of these achievements even more significant and mean we will start 2023 on the front foot.

Other significant achievements to take note of include growth in the number of new people accessing our services, successful partnerships with other charities including on the Spot Leukaemia campaign, providing additional financial support for the Cost of Living crisis through our financial grants and oversubscribed welfare service, widespread press coverage of Leukaemia Care and the people we support, and increasing our reach to ensure more people are aware of us and the ways we can provide support.

The quotes and testimonials within this report speak to the impact we are making to the lives of people affected by leukaemia, myelodysplastic syndromes (MDS) and myeloproliferative neoplasms (MPN). It is difficult not to be moved and we invite anyone to get involved and become part of this vibrant community of people working to improve the lives of people with blood cancer – we are, after all, *Your* Blood Cancer charity.

With warm wishes

Chris Matthews-Maxwell (Chair) and Zack Pemberton-Whiteley (CEO)

Date: 21 June 2023

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) FOR THE YEAR ENDED 31 DECEMBER 2022

The trustees present their annual report and financial statements for the year ended 31 December 2022.

The financial statements have been prepared in accordance with the accounting policies set out in note 1 to the financial statements and comply with the charitable group's memorandum & articles of association, the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)" (effective 1 January 2019).

Objectives and activities

About us

Leukaemia Care is the UK's leading leukaemia charity. For over 50 years, we have been dedicated to ensuring that everyone affected receives the best possible diagnosis, information, advice, treatment and support.

We are here for everyone affected by leukaemia and related blood cancer types – such as myelodysplastic syndromes (MDS) and myeloproliferative neoplasms (MPN).

We believe in improving lives and being a force for change. To do this, we have to challenge the status quo and do things differently.

Purpose

The charity's objects are set out in its articles of association:

- 1. The relief of sickness and the promotion and protection of good health among persons suffering from Leukaemia and allied blood disorders.
- 2. The relief of need among families, carers and friends of persons suffering from leukaemia and allied blood disorders, and in particular those contemplating or suffering bereavement or who must contemplate the prospect of treatment where those needs are attributable to the affliction of leukaemia and allied blood disorders.

Our vision - our long term ideal

A future where everyone affected by leukaemia, MDS and MPN gets the best possible diagnosis, information, advice, treatment and support.

Our mission - What we are doing to make that vision a reality

We exist to improve the lives of everyone affected by leukaemia, MDS and MPN.

We provide information, advice and support for anyone affected, this includes patients and their friends and families too. We raise awareness of the issues impacting people affected by leukaemia, MDS and MPN, and campaign to fix them. We are driving early diagnosis, raising public awareness, improving services, and ensuring access to effective treatments.

But most importantly, we bring people together and unite them behind our common goal. Together, we will create the future we all believe in.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Our values - What do we stand for?

Leukaemia Care's values are at the heart of everything we do. They describe our approach to our work. They drive our thinking, our behaviours and our actions.

Mission based

We have a clear mission. We exist to improve the lives of people affected by leukaemia, MDS and MPN. We believe in doing the right thing. If it is not in the best interests of people affected by our mission, we will not do it. It is that simple. No ifs, no buts, no exceptions.

Collaborative

We are passionate about all forms of collaboration, especially with other charities. Our mission is bigger than Leukaemia Care. We know that working on our own will delay the day when everyone affected by leukaemia, MDS and MPN gets the best possible diagnosis, information, advice, treatment and support. That is why it is so important that we work in partnership with individual charities, charity coalitions, healthcare professionals and a wide range of other stakeholders to improve the lives of people affected.

Caring

It is in our name, and it is in our nature. We care deeply about every single person affected by leukaemia, MDS and MPN. We are on your side and always will be. This helps us deliver high quality support, but also underpins all other parts of the charity. We care about the people who dedicate their time to our mission – whether that is our colleagues, volunteers, supporters or fundraisers. We are a community united by a common mission and we care about each other.

Evidence based

We listen to and understand the experiences of people affected by leukaemia, MDS and MPN. We use the evidence we gather to adapt, improve our services and to focus our campaigns for change. We also work with healthcare professionals – including haematologists, nurses and GPs – to make sure we are rooted in the latest science.

Aspirational

We have ambitious goals and we set ourselves high standards to achieve them. We believe that everyone affected by leukaemia, MDS and MPN should get the best possible diagnosis, information, advice, treatment and support. Every day 44 people are diagnosed with leukaemia, MDS or MPN, we can't afford to wait. To achieve this change we must be innovators, problem solvers, challengers to the status quo and each and every one of us must go above and beyond, every single day.

Our values are key to everything we do. But we all make mistakes. If you see us acting in a way that you feel is not consistent with our values – please let us know!

Why our work is important

To paint a picture of the scale of the issue across the UK:

- Leukaemia is the 12th most common form of cancer and 12th biggest cancer killer.
- Every year, 10,000 people are diagnosed with leukaemia in the UK.
- Every year, 5,000 people die from leukaemia in the UK.
- Every year 6,000 people in the UK will be diagnosed with conditions that may develop into leukaemia, including myelodysplastic syndromes (MDS) and myeloproliferative neoplasms (MPN).
- Over 50,000 people are living with leukaemia in the UK.
- There are 34,000 people living with MDS or MPN in the UK.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Our Strategic Goals

We exist to improve the lives of everyone affected by leukaemia, MDS and MPN. Over the last 50 years, we have come a long way, but there is more to be done.

We are committed to creating a future where everyone affected by leukaemia, MDS and MPN gets the best possible diagnosis, information, advice, treatment and support.

That will not happen overnight. But we are closer than ever before, and we are working to create that future every single day.

Our organisational strategy focuses on the future we believe we can create and sets five clear goals for the work we will be doing until 2030 to make this a reality sooner:

- 1. Improving diagnosis through awareness and early detection.
- 2. Ensuring everyone receives high quality information, advice and support.
- 3. Tackling issues that impact people's lives.
- 4. Advancing treatment and care.
- 5. Creating a narrative to better reflect the reality people experience. But we need your help. If you believe in the future we are trying to create and want to help us get there faster, please get involved.

For more information on our five goals, please visit our website www.leukaemiacare.org.uk

Public benefit

Our work delivers public benefit by providing information, advice and support to anyone affected by a leukaemia diagnosis; patients, family members, friends as well as employers and schools looking for advice on how best to support employees and students. This information and support helps people to live better with their leukaemia by reducing the isolation that can come with a blood cancer diagnosis, clarity on their treatment options and improving quality of life with strategies to reduce the impact of the side effects of treatment.

Our '#SpotLeukaemia' campaign reaches a wider audience equipping people with the awareness of the common signs and symptoms of leukaemia. This empowers them to speak with their GP if they have any concerns and increases the likelihood of earlier diagnosis and effective treatment.

Our GP training raises awareness of the signs and symptoms of leukaemia among GPs and other key healthcare professionals increasing the likelihood of earlier diagnosis and effective treatment. Our nurse training provides much needed free training on aspects of caring for blood cancer patients thus enhancing their care.

Grant making by Leukaemia Care

Leukaemia Care has four grant making streams: the Financial Hardship Fund (now the Cost of Living with Leukaemia Fund), the Exceptional Hardship Fund, the Leukaemia Counselling Fund, and the CAR-T Away from Home Service (launched in 2022). These contribute towards addressing the recommendations made in our Living with leukaemia reports which inform our strategic aims.

Financial Hardship Fund (now the Cost of Living with Leukaemia Fund)

This fund provides grants of up to £200 for essential living costs to patients and their families affected by leukaemia, myelodysplastic syndrome (MDS) or myeloproliferative neoplasms (MPN). There is no closing date, awards are distributed on a first-come, first-served basis until the fund is depleted each month. In 2022, we collaborated with Leukaemia UK, who provided a £20,000 grant to enable an additional 100 families to access this support.

The Financial Hardship Fund ran out in September, but we continued to register interest from people who would like to apply when further funding became available. Demand for the Fund was amplified with the UK's recent cost of living crisis. Compared with 2021, 2022 has seen a 4-fold increase in applications to the fund. Demand for the service increased throughout the year from 37 per month in Q2 to 64 per month in Q3.

In December, we launched a short-term "Cost of Living with Leukaemia Fund" in partnership with Leukaemia UK who provided a £27,000 grant to co-fund the project, to help families affected by leukaemia, MDS and MPN get through the winter. Due to high demand, this was a £100 grant to eligible applicants rather than the usual £200. Our intention is to rename the Financial Hardship Fund going forward as the "Cost of Living with Leukaemia Fund".

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Exceptional Hardship Fund

Applicants who have received the Financial Hardship Fund of £200 within the year and are assessed as experiencing exceptional hardship are considered for an additional grant of up to £1,000. They are likely to be facing multiple challenges alongside a leukaemia diagnosis such as no recourse to public funds, homelessness or poor housing, significant mental health issues, care for a disabled dependant (adult and/or child) etc.

The Counselling Fund

We are committed to providing patients and their families with emotional and psychological support through their blood cancer diagnosis. To provide patients with a diagnosis of leukaemia, MDS or MPNs or a parent, sibling, child or spouse of a patient with a maximum of up to six sessions of counselling with a maximum award of £400. Counsellors must be registered with the British Association of Counselling and Psychotherapy (BACP), or the UK Council of Psychotherapy (UKCP). The fund opens at the beginning of each year and awards are distributed on a first-come, first-served basis until the fund is depleted for the year.

CAR-T Away from Home Service

CAR-T (Chimeric Antigen Receptor) t-cell therapy is a type of treatment for leukaemia that has revolutionized the way leukaemia is treated. It was first approved for B cell acute lymphoblastic leukaemia (ALL) but is expected to change the way other forms of leukaemia patients are treated in the future.

The way the therapy is delivered means that patients often have long periods of waiting and spending time near to hospital to receive the treatment.

There are a limited number of specialist hospitals currently able to deliver CAR-T therapy in England, Wales and Northern Ireland. As a result, patients may need to travel to a different part of the country to receive treatment and need accommodation nearby. This can cost a lot of money directly or stop the person from being able to earn an income in this time.

Leukaemia Care believes that financial circumstances should never prevent someone from accessing the treatment they need. We have set up this project with our partners, Dalata Hotels Group, to prevent this from happening to as many patients as possible.

People can apply for accommodation, grant funding or both with one grant per family. This grant is only open to those currently going through CAR-T therapy and people can apply as soon as they become aware that CAR-T is recommended as a treatment for them. The fund does not have a closing date and funds are allocated on a first come first served basis until the fund is depleted.

Thanks to our hotel partner Dalata, we can offer free accommodation in one double or twin room per family per stay for up to 30 days. This is booked and arranged by Leukaemia Care and we must know the dates in advance. This cannot be exchanged for money, youchers, or another hotel.

We also pay up to £500 in a cash grant to help with other expenses related to having CAR-T therapy. This could include, but is not limited to travel expenses, increased food costs while away from home etc.

Achievements and performance

A new long-term strategy is launched

The pandemic accelerated our long-term planning, and we spent six months re-evaluating our vision, mission, and strategic goals. In November 2021, the Trustees formally approved a new long-term strategy alongside a three-year operational and organisational plan and budget for 2022 to 2024. This was mentioned in the "Our future plans section" of our annual report and accounts for 2021.

Long-Term Strategy

As the UK's leading leukaemia charity, we exist to improve the lives of people affected by leukaemia and related blood cancer types – myelodysplastic syndromes (MDS) and myeloproliferative neoplasms (MPN).

Our long-term strategy aims to set out afresh Leukaemia Care's vision, mission, values and five clear goals to guide us forward. It is a statement of intent. For the first time ever, we have made this a public document that can be accessed in the "About us" section of our website, allowing us to clearly and publicly state who we are and what we stand for, encouraging people to join us in our mission to create a future where everyone gets the best possible diagnosis, information, advice, treatment and support.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

This public statement helps clarify our positioning as the UK's leading leukaemia charity, covering everything related to leukaemia and related blood cancers (e.g. support, information, campaigning, researching patient experience, being a strong voice for the leukaemia community), except funding clinical research.

We will continue to develop collaborations with other charities depending upon their focus, organisational similarities or topic specific expertise. We recognise that other organisations are better placed to provide this support for other forms of blood cancer - such as lymphoma or myeloma, and we continue to signpost people to the best possible information, advice and support for their particular circumstances (e.g. Lymphoma Action, Myeloma UK).

Operational Plan

The new operational plan has been reorganised to align with our long-term strategy, as the first steps towards achieving our long-term goals. Whilst it contains many activities from previous years (as well as some new ones), it is now organised by our strategic goal (why we are doing it) rather than a delivery plan (who or how we will deliver it).

This recognises our need to work as a whole organisation, rather than individual teams, to achieve our collective goals. Whilst an individual or a department may lead on an activity, we work as one team and seek input and feedback from colleagues across the whole charity where appropriate.

Performance Measures

Our performance measures help us measure our progress towards our goals. For each activity at Leukaemia Care, we have set both targets (effective) and stretch targets (highly successful) for 2022. All targets are based on historical outcomes and expected outcomes in 2021 where a service is already in place, and for new services we have used informed assumptions. These will be used for reporting, with all targets for future years reviewed considering the performance and outcomes from the current financial year.

Organisational Plan

The organisational plan outlines our commitment to developing the charity through supporting employee wellbeing, effective recruitment and induction, targeted staff development and training, a performance management process that aligns with behaviours and our organisational values, and effective recruitment and management of volunteers towards delivering on our long-term strategy. It recognises that internal communication is vital, contributing to employee wellbeing as well as improving the delivery of our key objectives. We are committed to consulting with employees on key initiatives such as flexible working, wellbeing and internal communications, as well as other key topics that arise.

Development Process

The proposals within the operational plan are fully costed and seek to build upon measured outcomes from previous years and evidenced proposals from across Leukaemia Care with new opportunities and ideas.

At the centre of this plan is listening to and understanding the experience of people affected by leukaemia, MDS and MPN. This tells us why we do things. It starts with obtaining evidence through patient surveys (such as the Living with Leukaemia project and annual feedback survey) and external projects (such as Blood Cancer Alliance's work on unmet needs). But it also comes through seeking individual inputs more directly through our patient and medical advisory panels.

In 2021, we incorporated a much wider range of internal perspectives as part of the planning process. At the outset of the process, Trustees were invited to take part in a facilitated discussion with the CEO to seek their views, suggestions and long-term ambitions for the charity. There was a high level of alignment across the board. Feedback focused around perceptions of the charity, unmet needs for patients and healthcare professionals, organisational strengths and weaknesses, prioritisation of activities, external opportunities and challenges, differentiating Leukaemia Care from other blood cancer charities and investment of reserves into developing the organisation and it's activities. Insights from these discussions have primarily informed the development of the long-term strategy and operational plan.

Employee input was sought through an anonymous survey, with responses analysed to consider both overall aligned perspectives and areas of differing views. Key themes that emerged from this exercise included inspiring people to support us by better demonstrating our impact, improving the way we do things internally to improve outcomes for patients and understanding what has the greatest impact on the wellbeing of employees. Following

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

the survey, employee focus groups were used to further explore or clarify these topics. These insights are at the core of developing the organisational plan, as well as providing a more nuanced view and insights as part of the operational plan.

Conclusion

As a result of this process, our new plan for 2022 to 2030 represents our best current thinking on the way to make our vision a reality, as soon as possible. But it is open to challenge, new ideas and change as things develop. We are more committed to achieving our vision than to any particular plan we happen to be following right now. We recognise this plan is ambitious and will be challenging to implement in its entirety. It is at the core of our values as an organisation to have ambitious goals and to set ourselves high standards to achieve them. We owe it to people affected by leukaemia, MDS and MPN to do our utmost to advance our vision, as quickly as possible. We owe it to people who donate their money to spend it in a way that makes this vision come true.

Our achievements

Improving diagnosis - through awareness and early detection

We achieve this through our annual Spot Leukaemia campaign, targeting awareness days like World Leukemia Day and through our education work with GPs and other healthcare professionals.

In 2022 we continued our collaboration with Leukaemia UK for our Spot Leukaemia campaign, focusing on raising awareness of the symptoms of leukaemia in the over 65's. We soft-launched at the end of August with our new creative video (featuring Henry the Parrot) and 36 patient stories along with national and regional PR. Within the first week we received 509 pieces of press both nationally and regionally as well as TV.

Overall the campaign reached over 15 million people on social media, with 161,285 views of our campaign video (Henry the Parrot) which raised awareness of the main symptoms of leukaemia; fatigue, bruising, bleeding and infection, urging people to go to their GP and ask for a blood test if they experienced these symptoms.

Throughout the year, we ran mini campaigns on awareness days such as World Leukemia Day, MDS Day, Know AML Day and World Cancer Day. World Leukemia Day (4 September) which was launched by Leukaemia Care in partnership with worldwide patient advocacy groups reached 30,185,694 people on social media exceeding the 8 million reached in 2021.

We continue to provide education for general practitioners (GPs) through our GP online learning modules via the Royal College of General Practitioners (RCGP) and Gateway C, including two new webinars for GPs. In person events with GPs prior to COVID had good uptake and feedback, but the RCGP has no plans yet to return to local in person training events. However, we continue to attend and staff information stands at conferences aimed at GPs such as the Best Practice conference. In 2023, we will review our approach and investigate ways of promoting our online learning modules.

Ensuring everyone receives high quality information, advice and support

Leukaemia and blood cancer is highly complex. We know that at diagnosis people are significantly less likely to understand what is wrong with them than for other forms of cancer. Many are left worried and confused.

We know that high quality information, advice and support is key. Whilst most people receive information about their blood cancer, few receive information about emotional, practical and financial support. Information is also more likely to be provided at diagnosis, with a drop off after treatment finishes. We are working to stop this.

This area of work covers our core frontline services for patients and their families. Our written information (hard copy and online), videos, podcasts, webinars and conferences. Our advice service incorporating the helpline, WhatsApp, email, advocacy casework and welfare advice, and hospital hubs. Our support services; support groups, online forums, one to one buddy support, financial grants, counselling and free wills.

In 2022, we adopted a new format for information suites of leukaemia information, with all the information tailored by leukaemia type and creating a pathway of different points where people can access information (e.g. diagnosis, starting treatment). This is a significant project and in 2022, we completed the new format for acute lymphoblastic leukaemia (ALL) resulting in 10 new booklets.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

We continue to offer our existing booklets alongside the new formats and in 2022, distributed 13,862 hard copies and 15,118 digital copies were downloaded from our shop. We also gained accreditation with the Patient Information Forum "PIF Tick" scheme for patient information ensuring our information continues to be produced and reviewed in a robust way.

"I am a recently diagnosed Chronic Myeloid Leukaemia person and have felt quite scared by my recent diagnosis. However, having read this booklet, I felt much more positive. The practical advice and living beyond the diagnosis has made me feel less scared about the future." Feedback from patient on our Living with Chronic Myeloid Leukaemia (CML) booklet

We also provide information on the rarer leukaemias recognizing that these patients face additional challenges in both getting up to date accessible information on their cancer and meeting fellow patients who share their condition.

"It is very hard to find information about this rather rare condition but this leaflet is without doubt the best and most comprehensive summary I have found. A must for any recently diagnosed people."

Feedback from a patient on our Large Granular Lymphocytic Leukaemia (LGLL) booklet

We recognize that people like to access information in different formats not just booklets and that many would like an introduction to our services. We sent out 1,005 Welcome Packs introducing people to our services and signposting them to our booklets, blogs, monthly podcast, videos and webinars.

We ran 20 webinars on a variety of topics which were all recorded so they can be accessed time and time again for people looking for information and debate on key topics. Our webinars were viewed 16,352 times on social media.

"I have been watching Leukaemia Care webinars since the start of lockdown and they have always been really interesting, informative and very supportive. I found this last one particularly pertinent, as I have been told by my consultant that I will need treatment soon. Thank you so much, I feel less scared now. I feel well informed and confident in the treatment I have been offered."

Patient feedback on CLL webinar

Alongside our information, we offer the opportunity to seek advice and support from our clinical nurse specialists, trained advocates and welfare advisors. We provided 906 people with timely advice and support via our helpline, WhatsApp and email with an average feedback score of 4.75 out of 5.

"This is the only place I can come to speak about my leukaemia, having a nurse who understands my condition available at the end of the phone is invaluable."

"It is amazing to have such a specialist service available for free."

Feedback from leukaemia patients

Our Advocacy caseworker supported 266 people with issues such as obtaining travel insurance and COVID booster vaccinations, making complaints about hospital care and getting support with additional needs such as enduring mental health problems alongside a blood cancer diagnosis. They work closely with our Welfare Officer as many people have varied and complex needs that also touch on finances.

"Your organization throughout me having to shield has been so helpful to me, supporting me with issues at work but also keeping blood cancer patients updated as to the latest regarding Covid. A big thank you,"

Our Welfare Officer supported 217 people with the majority of queries being classed as major i.e. complex, helping people to apply for benefits, challenge benefits decisions, apply for grants of money and goods and processing applicants for our Financial Hardship Fund, Exceptional Hardship Fund and CAR-T Away from Home Fund. The cost of living crisis has had a severe impact on people's finances already impacted by a leukaemia diagnosis.

"Dad had his letter today to say he is entitled to the lower rate of attendance allowance. Thank you so much for your help as he wouldn't have applied and he would have been missing out."

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

"I just wanted to let you know that my PIP application has been processed and I have been awarded the enhanced rate for both daily living and mobility! I am delighted as this now means I can apply for a blue badge! Thank you so much for all your support which without, I am sure, I would not have been able to get the enhanced rate. Thank you so much"

"...being able to plan some great summer holiday childcare while I'm in hospital having my stem cell transplant without worrying about how we were going to pay for it is such a blessing and a massive relief. It will give them something to look forward to and enjoy during such a difficult time. Your support has enabled my young children to be children. Thank you so much for all the hard work and support you have given to me."

We have ten hospital hubs based in Good Hope (Sutton Coldfield), Solihull Hospital, Heartlands Hospital, the Worcestershire Royal, St James Hospital in Leeds, Southampton General, University of Bristol Hospital, The Christie in Manchester, University College London Hospital and Freeman Hospital, Newcastle. Our hospital support workers provide emotional support, information and advice to patients and their families within haematology departments and on hospital wards, at diagnosis and throughout their treatment. In 2022, we supported 199 people, in person and by phone as needed by the hospitals.

"[HSW] is an asset to our team, supporting patients and us with information, a listening ear, and her time. So many of our patients have been lucky enough to have access to her in her role as Hospital Support Worker, and her support has been invaluable, helping them through very challenging and difficult times. Any questions we as Clinical Nurse Specialists have about the services and support available from Leukaemia Care have been answered quickly by the [HSW], which our team have found very beneficial and has improved our ability to provide the best support to our patients".

Feedback from Clinical Nurse Specialist at St James Hospital, Leeds

We run 38 support groups (in person, hybrid and online only) supporting 1,911 people in 2022 (1,600 in 2021). Many of our members are still uncomfortable about meeting in person due to COVID and clinical vulnerability, especially in Q2 of 2022 when patients were finding it difficult to access spring COVID boosters. Our specialist national support groups are well received especially by those with rarer leukaemias. New groups launched in 2022 include LGLL National, Northern Ireland National, Scotland National and Parents & Families of Children with Leukaemia National Support Group.

We also run an online forum via HealthUnlocked and closed Facebook groups that collectively supported 4,333 people.

"The support and solidarity of the groups and my telephone buddy helps me to remember that I'm not alone and encourages me as I navigate life after cancer. Thank you. Leukaemia Care!"

Feedback from Teesside support group member

"Thank you for the meeting, it was useful and good to speak to others in the same situation as myself. I hadn't thought of myself as a carer but my husband encouraged me to join the meeting! Your email is full of useful information, thank you. Everything still seems a little overwhelming at times but the support from yourselves has really helped us both. Thank you again"

Feedback from wife of ET patient

Our buddy services matches patients and families with people who have a similar diagnosis for emotional support. In 2022, we matched 131 patients for long-term or short-term buddying with some volunteer buddies supporting multiple patients.

"I just wanted to let you know that my buddy is a huge support, and she rings me fortnightly. [Buddy] as I am sure you know, has been through the same CLL treatment as I have had and helps me in so many ways. I was surprised when my telephone consultation re Venetoclax etc was reduced from four weekly to every 8 weeks, but [Buddy] reassured me this was completely normal. She is a very good listener, and such a help. My husband has been, still is very ill with lung & other problems, and [Buddy] always asks me how he is. We talk about all sorts of other things, like gardening which we both enjoy. Thank you so much for partnering the two of us."

Feedback from CLL patient

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

We also started a pilot CAR-T buddy scheme with Great Ormond Street Hospital with one parent ready to start supporting another family. In 2023, we will focus on growing this service which is still in its early stages.

We recognize that a leukaemia diagnosis can have a negative impact on people's finances especially during a cost of living crisis. In 2022, we awarded 465 hardship grants of £100 or £200 and 11 exceptional hardship grants of up to £1,000. Due to unprecedented demand, our Hardship grants ran out in September however, in partnership with Leukaemia UK, we launched a Cost of Living with Leukaemia Fund in December 2022 awarding £100 hardship grants.

We also launched our CAR-T Away from Home service providing patients undergoing CAR-T treatment and their families access to paid hotel rooms and a £500 grant towards increased costs. This is a partnership with our new corporate partner, the Dalata Hotels Group. Launched in September, we awarded three grants in the final three months of the year, helping these families with the financial costs of travelling to access this innovative form of treatment. In 2023, we will work on building relationships with hospitals to ensure they are aware of the service and know they can make an easy referral.

Our counselling fund provides much needed access to specialist support during a time when NHS counselling resources are stretched or non-existent. In 2022, we supported 56 people (35 in 2021) seeking counselling support with issues such as coming to terms with relapse or terminal illness, living with a chronic leukaemia and parents coping with a child's diagnosis.

"I can't express how grateful I am to Leukaemia Care for providing this fund – not just for the financial side of it (which is very generous), but also for how easy it was to get everything set up. I don't think I'd have been able to afford private therapy or had the patience to wait for an NHS appointment, so having such quick and simple access to free counselling made such a huge difference."

We believe everyone diagnosed with a potentially life limiting illness such as leukaemia should have the chance to make a will. In 2022, 53 (41 in 2021) people made a will using our free wills service with many choosing to leave a gift in their will to Leukaemia Care although there is no obligation to do so.

Tackling issues that impact people's lives

This area of our work covers our advisory panels (medical and patient), our patient experience research, our policy and public affairs, campaigns and external advocacy projects.

Our medical and patient advisory panels provide feedback on not only our strategic plans but also our day to day work, to ensure it meets the needs of people affected by leukaemia and other forms of blood cancer. We have 96 healthcare professionals including specialists in the four main leukaemias as well as MDS, MPN and rare leukaemias. These include consultant haematologists, clinical nurse specialists, GPs, psychologists and district general hospital doctors. Our patient advisory panel of 52 includes acute and chronic leukaemia patients, those with rare leukaemias, MDS and MPN.

We are always looking for new members to join our panels especially the patient panels both to ensure they reflect the diverse blood cancer community but also in acknowledgement that people's circumstances change. For instance, some people have been in remission for a while and choose to leave that part of their experience behind them - this is completely understandable.

With regards to our policy and public affairs work, generally, political changes continued to make it hard for us to keep stakeholder engagement up. We welcomed the new ministers with various responsibilities for Cancer, Primary Care and the Secretary of State for Health and Social Care but received no response. This is consistent with the experience of other charities when reaching out to the main stakeholders.

We collaborated with the Department of Health and NHS England on their winter vaccination campaign by creating co-branded assets to share on social media featuring two leukaemia patients. The aim was to encourage more people to come forward and get their booster vaccines, and the graphics were retweeted by the DHSC channel, increasing our reach online.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

The latest draft of the 10-year Scottish Cancer Strategy was released, and following calls from charities including Leukaemia Care the draft included specific consideration of blood cancers for the first time, as far as we are aware, in the Earlier and Faster Diagnosis section: "It is recognised that not all cancers can be conventionally staged so additional measurements, such as emergency presentations, will be required to track progress and improvements in other cancer types, including blood and brain". Although we want to see more emphasis on blood cancers in the final strategy, this is significant because previous strategies have failed to include blood cancers in early diagnosis. Later drafts have also acknowledged the need to frequently publish and share data. We will continue to respond to future drafts on behalf of people affected by leukaemia.

Each of the two campaigns we ran was different in what was most effective; Watch, Wait Worry showed the importance of patients telling their MPs about an issue too, whereas the Spot Leukaemia campaign showed the importance of a good external environment.

Watch, Wait, Worry campaign launched in April

Our 'Left to WatchWaitWorry' campaign aims to improve the lives of people with chronic lymphocytic leukaemia (CLL) on Watch and Wait, by calling for additional support and information. It is estimated that there are currently around 13,300 chronic lymphocytic leukaemia (CLL) patients living on Watch and Wait as their current treatment option. A time which patients often call 'Watch and Worry'.

As part of the campaign, we secured nine written parliamentary questions asked by MPs in Westminster and two parliamentary questions in Scotland on the WatchWaitWorry media campaign. This includes a response from the Cabinet Secretary for Health in Scotland. This gave us insights that we could use to inform our next steps on the campaign, such as including it in our response to the upcoming 10 year cancer plan and Scottish Cancer strategy. This included information about whether data is collected on CLL patients using mental health services and whether or not governments intend to include those on active monitoring in the upcoming plans.

On social media the WatchWaitWorry campaign saw some good engagement from parliamentarians, including tweets from Jeffery Donaldson MP, Robert Buckland MP, Emma Lewell Buck MP, Martyn Day MP, Alex Rowley MSP, Naomi Long MLA, among others.

We had a meeting with Sir George Howarth MP on this campaign and as a result, he posted about the campaign on his website, submitted written parliamentary questions and wrote a letter to the Secretary of State for Health and Social Care. In devolved nations, we met six politicians virtually. We targeted those politicians who had engaged with the emails from the constituents for meetings.

We presented the WatchWaitWorry media campaign report to the RM partners cancer alliance Haem-oncology pathway group meeting. There were haematologists across the West London region in attendance and we discussed the issues patients face and how to work together to improve them. We informed them that we were planning to develop guidelines for secondary care professionals on Watch and Wait which they would welcome. They also suggested we should do similar guidelines for primary care.

Additionally, we hope to pick up the work on best practice guidelines for supporting patients and submit a proposal to the British Society of Haematology guidelines committee by the end of the year.

Malignant Diagnosis, Surely campaign

Can you imagine being diagnosed with a condition and your healthcare team omitting to mention it is a type of cancer? Yet this has been the case for some people diagnosed with myelodysplastic syndromes (MDS).

MDS is a type of cancer and it is important that everyone calls MDS a cancer. By not mentioning the term 'cancer' immediately at diagnosis, and not explaining low-risk vs high-risk, there is a risk that patients find out by chance that MDS is a type of cancer, as soon as they look up any information after their initial appointment, such as using the NHS website. The shock of that discovery, when alone, and the lack of medical staff to check with can be traumatic for many. As a result of misunderstanding their diagnosis, patients might not receive the support that they are entitled to, such as employment rights and access to psychological and financial support.

That's why Leukaemia Care and MDS UK are working together as part of a Malignant Diagnosis, Surely? campaign. We launched a petition to insist that NHS England treat MDS as a cancer in everything they do.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

- Ensure patients get access to cancer care reviews from their GPs and the support of clinical nurse specialists for blood cancers
- Include MDS in NHS cancer data collection (e.g. including them in the Cancer Patient Experience Survey and the Cancer Quality of Life Metrics project).
- · Issue communications to healthcare professionals regarding the importance of referring to MDS as a blood cancer, and explaining low vs high-risk types at the point of diagnosis.

We continue to play an active part in a variety of coalitions and alliances both national and international such as Cancer 52, the Blood Cancer Alliance, the Acute Leukaemia Advocates Network, the CML Advocates Network and the Chronic Lymphocytic Leukaemia Advocates Network. This is by no means an exhaustive list, and is just one part of our commitment to collaborate with other charities.

Advancing treatment and care

This area covers our engagement with healthcare professionals – providing training and raising awareness of our services as well as our work on improving access to treatments.

Our Regional Coordinators raise awareness of our services within hospitals across the UK and in 2022, contacted 212 hospitals with both in person visits and virtual meetings. They are also responsible for running our support groups and ensuring members receive the right information and support by signposting to our services.

"[RC] runs successful support groups for our group of patients and the feedback has been excellent, providing a safe and informative platform for people affected by leukaemia to meet and talk to others".

Feedback from a Clinical Nurse Specialist at St James's Hospital, Leeds

"RC is a breath of fresh air. She organises all our support groups and makes patients feel at ease. It has been a pleasure to work with her over the last few years in facilitating a support group for the people of Barnsley."

Feedback from a Clinical Nurse Specialist at Barnsley District General Hospital

Leukaemia Care also offers an online newsletter to healthcare professionals and in 2022, this had 1,904 subscribers. This provides information about our services as well as free training for nurses.

We offer 12 free online courses for nurses ranging from 1 to 4 hours on topics such as CAR-T, emergencies in leukaemia, end of life and acute leukaemia, extravasions, GVHD, supportive care, MPNs, understanding blood and its components, diagnosis of leukaemia, and epidemiology, aetiology and risk factors. The average feedback score from users was 4.25/5 with 217 subscribers in 2022.

Our Acute and Chronic Leukaemia Nurse Forums bring together haematology specialist nurses and allied healthcare professionals with an interest in acute/chronic leukaemia patient care to build capacity and provide opportunities for best practice sharing and networking. In 2022, 52 nurses attended these forums with topics discussed including research projects, vaccinations and leaflets for GPs about CLL.

Leukaemia Care have committed to be actively involved in all relevant Heath Technology Appraisals for leukaemia, MDS and MPN to ensure that we work to obtain access for patients and represent their views when decisions that affect them are being made. In 2022, we were involved at every stage of the health technology appraisal process in 97% of appraisals and were involved at some stage of the process in 100% of appraisals. In 85% of appraisals, patients were directly involved sharing their experience to effect change (e.g. by attending a NICE committee meeting). Outcomes (when the embargo on a decision is lifted by the appraising agency) are reported online via our website and social media as well as in our newsletters and patient magazine, Leukaemia Matters.

Creating a narrative to better reflect the reality people face

Patient stories, press and social media all play a critical role in ensuring that patients and their families as well as the public understand the reality of living with leukaemia.

Sixty-three people shared their story with us to support others and raise awareness of the challenges they face with half of these having benefited from our services. We also updated 51 stories shared in previous years with people and their relatives talking about returns to work and study after treatment, early retirement, ongoing challenges with late effects, and also facing bereavement and loss. Fifty people keen to give back and raise awareness of the support available from Leukaemia Care provided testimonies to be used to encourage people to reach out for help.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

In 2022, we received 56 pieces of national and 651 pieces of regional press coverage with an estimated reach of 1.4 billion. Our social media reach continues to grow especially as part of our Blood Cancer Awareness Month campaign in September (2.5 million in 2022). We invest in social media advertising and paid Google advertising to reach as many patients and potential fundraisers as possible, raising awareness of our free services and the opportunity to volunteer and raise money to support leukaemia, MDS and MPN patients and their families.

Visitors to our website have increased with 1.9 million visits and 2.6 page views in 2022 (1.5 million and 2 million respectively in 2021). Our symptoms of leukaemia information and blogs continue to be our most visited pages. The importance on thinking mobile first is even more prominent in 2022 as we saw a 29% increase in web traffic coming from a mobile device. We expect this to increase year on year and therefore we will have to make sure that any content and website integrations are fit for a mobile first platform.

The bounce rate for the LC website continues to remain high, however, plans to restructure one of the larger areas of the website are in progress and we would hope this changes once complete. It would help our high bounce rate as the user journey will become more streamlined to deliver relevant content to the user. Going forward in 2023, Google Analytics will be putting less emphasis on bounce rate as it will collectively rate web pages through 'engagement rate' which will take into consideration the bounce rate and time spent on a landing page.

Funding from legacies

Legacies enable the charity to plan for the future, pilot new services and expand existing ones. Without the generosity of people who chose to remember Leukaemia Care in their will, this would not be possible. In 2022, we benefited from £411,669 from gifts in wills from the estates of William Davidson, Edward Manning, Violet Whitehead, Beatrice Youngman, Charles French, Jonathan Lovick, Judith Crompton, Lilian Taylor, Alexander McCubbin and Vera Philips. We wish to honour their memory for their support for leukaemia patients and their families.

We promoted our free wills scheme during Free Wills months in March and October. Under this scheme, people can make a simple will (online or by phone) and can leave a gift to the charity if they wish. We encourage anyone diagnosed with a life changing illness such as leukaemia to ensure they have an up to date will regardless of whether they choose to leave a gift to Leukaemia Care. In 2022, 53 people took up the offer of a free will from the charity with legacy pledges of approximately £348,729.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Our plan to fund our activities - now and in the future

Our ambitious fundraising plan seeks to secure sustainable growth for the future, raising more money to ensure we can achieve our strategic goals. The charity's ability to deliver much needed activities (information, support, advice, campaigns) is reliant on our fundraising. We cannot improve the way we help people affected by leukaemia, MDS and MPN without expansion in this area.

As explained earlier, 2022 will go down on record as the year we raised over £2 million for the first time representing our best year ever and a 59% growth on income from 2021. This includes a strong legacy year but also better than expected performance from pharmaceuticals, Unicornfest, Ride London and In-Memory giving.

However, there were areas that did not perform as well as expected and some new initiatives that did not work first time round and need refining. Running events including the London Marathon suffered from poor sign-ups, dropouts and deferrals of running places to following years which impacted 2022 income. Community fundraising also took a hit with our new community challenges failing to sign up enough participants.

Our fundraising team grew from six to sixteen members to allow the charity to develop new income streams and grow existing ones. We recruited expertise and resource in grants and trusts, digital, corporate, events and community fundraising.

New initiatives and partnerships in fundraising

Unicornfest

This is Leukaemia Care's first art trail and will be held in Bristol during summer 2023, raising both awareness and funds for the charity. The unicorns, painted by local artists will be placed throughout Bristol allowing locals and visitors to explore the city via a colourful and uplifting trail that ends with a ticketed farewell event and separate auction in autumn 2023. We ended 2022, with £227,000 raised in sponsorships from almost 40 sponsors. We do not expect further income until 2023 when the unicorns are auctioned. The art trail has been a huge undertaking for the charity with a steep learning curve but we are confident it will not only raise significant income but open the door to longer term corporate partnerships.

Dalata Hotels Group corporate partnership

We are delighted to be working with Dalata Hotel Group PLC from 2022 until 2025. They are the largest hotel operator in Ireland, with a growing presence in the United Kingdom and continental Europe and they will be supporting Leukaemia Care through its Maldron and Clayton hotel chains in England, Scotland and Wales.

The Dalata partnership will support leukaemia patients by providing long stay accommodation close to the hospital that can administer a new treatment called CAR-T. A limited number of specialist hospitals in Great Britain offer this treatment and the locations match conveniently with Dalata hotels, with this project ensuring it is possible for patients to get the treatment they need. Individual hotels will also be fundraising in aid of the charity.

World Gaming Day

Leukaemia Care launched World Gaming Day on the 22 October 2022. This is an opportunity to meet up with friends, play games and raise money for charity. Leukaemia Care sold World Gaming day packages to other charities making it easy for them to run their own World Gaming day fundraising event. Charity partners included Action for Children, Stroke Association, Epilepsy Society and more.

Unfortunately, uptake was limited for this new form of fundraising. We will not dismiss the concept as we believe it has merit, but we think this may take longer to develop and refine as an income stream.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Funding from legacies

Legacies enable the charity to plan for the future, pilot new services and expand existing ones. Without the generosity of people who chose to remember Leukaemia Care in their will, this would not be possible. In 2022, we benefited from £411,669 from gifts in wills from the estates of William Davidson, Edward Manning, Violet Whitehead, Beatrice Youngman, Charles French, Jonathan Lovick, Judith Crompton, Lilian Taylor, Alexander McCubbin and Vera Philips. We wish to honour their memory for their support for leukaemia patients and their families.

We promoted our free wills scheme during Free Wills months in March and October. Under this scheme, people can make a simple will (online or by phone) and can leave a gift to the charity if they wish. We encourage anyone diagnosed with a life changing illness such as leukaemia to ensure they have an up to date will regardless of whether they choose to leave a gift to Leukaemia Care. In 2022, 53 people took up the offer of a free will from the charity with legacy pledges of approximately £348,729.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Funding from grants and trusts

Leukaemia Care receives no statutory funding, but it does receive grants from independent trusts and other funders. These grants are an increasingly important part of our income and significantly improve our ability to deliver services to leukaemia patients and their families across the UK. We would like to thank the following funders for their kind support in 2022:

The 29th May 1961 Charity

The Blakemore Foundation

The Boots Charitable Trust

The Burford Trust

The Donibee Charitable Trust

The Edward and Dorothy Cadbury Trust

The Hospital Saturday Fund

The Hugh Fraser Foundation

The Joseph Strong Frazer Trust

Leukaemia UK

The Liz and Terry Bramall Foundation

Medicash

The National Lottery

The Patrick Trust

The Roger and Douglas Turner Charitable Trust

The Santa Barbara Heights Charitable Trust

The Templeton Goodwill Trust

Tyne and Wear Community Foundation

The Yardley Great Trust

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Funding from the pharmaceutical industry

The charity works with the pharmaceutical industry to ensure that the interests of patients are considered when developing new drugs and treatments for patients.

In addition to our patient advisory work, Leukaemia Care receives funding from a range of pharmaceutical companies. Any funds received from the pharmaceutical industry are received and dispersed strictly within the guidelines laid down by the Association of the British Pharmaceutical Industry (ABPI) and Leukaemia Care's own Code of Practice (see website).

To ensure that we remain financially independent, limits are placed on all types of funding. We do not allow the total level of funding received from the pharmaceutical industry to exceed 25% of our total annual income. Nor do we allow the funding received from an individual company to exceed 10% of our total annual income.

In 2022, Leukaemia Care had our most successful year ever with £402,576 secured in donations from the following pharmaceutical companies.

Abbvie £15,000 for our AML Support Project

Amgen £10,000 for core funding

Astellas £25,000 for our Emotional Support Project

AstraZeneca £25,000 for our Advice, Information and Support Project

Autolus £5,000 for core funding

BeiGene £20,000 for core funding

Bristol Myers Squibb £15,000 for core funding and £15,000 on behalf of the Blood Cancer Alliance

Gilead £40,000 core funding

Incyte £30,000 for our Advice, Information and Support Project

Janssen £5,000 for core funding

Jazz £40,000 for our Advice, Information and Support project

Kura Oncology £12,204 for core funding

Kyowa Kirin £5,000 for core funding

Lilly £5,000 for core funding

Mallinckrodt £22,417 for our Advice, Information and Support Project

Otsuka £10,000 for our Advice, Information and Support Project

Pfizer £20,000 for core funding and £23,135 for the AML Testing Project

Pleco Therapeutics £5,000 for core funding

Servier Labs £5,000 for our Advice, Information and Support Project

Takeda £30,000 for core funding and £20,000 for the CAR-T Project

We also received a grant of £15,000 from Gilead towards our Unicornfest art trail, not included in the figures above, with all other pharmaceutical work on this project to take place in 2023.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Financial review

The results for the year are set out in the financial statements commencing on page 32. The financial statements show incoming resources for the year of activities of £2,139,494 compared to incoming resources in 2021 of £1,346,169. Trustees would like to thank all staff and volunteers for the continuing hard work and commitment that have made this possible.

Total reserves stand at £3,127,406 (2021: £3,032,035) of which £155,918 (2021: £71,581) was restricted in application and £1,347,823 (2021: £1,087,127) were designated by the trustees to match the tangible fixed assets of the charity and fund certain projects identified as being required in the immediate future. Those designated funds connected to tangible fixed assets relate predominantly to the freehold property and are likely, given current market conditions, to remain whilst the relevant charitable entity continues to own title to the same. Funds remaining for general use were £1,623,665 (2021: £1,873,327).

The Trustees consider the results for the year to be satisfactory.

Risk assessment and management

We carry out an annual detailed review of the charity's activities and produce a comprehensive three-year strategic plan which sets out the major opportunities for the delivery of patient support. The Trustees monitor progress against the strategic objectives set out in the plan quarterly, in addition to the annual review. As part of this process the Trustees have implemented a risk management strategy, which comprises:

- a comprehensive annual review to identify, where possible, the risks which the charity may face during the forthcoming year
- the establishment, where possible, of contingency plans to meet anticipated risk(s)
- the establishment of systems and procedures to mitigate such risks and the implementation of procedures to minimise any real or potential impact on the charity should any such risk(s) materialise
- · the prioritisation of the charity's activities both actual and planned
- the preparation and monitoring of meaningful and timely financial and management information.

The strategic plan referred to above focuses on the delivery of care and support to anyone affected by blood cancer. Successful implementation of the plan is dependent upon the charity having the necessary resources available (financial and otherwise) and for the prudent and effective management of such resources.

Our plans for 2023 and beyond

As we seek to grow our impact, we are currently limited by our income levels. Whilst we have high levels of reserves which would enable us to initiate most activities, our current income levels would not enable us to sustain those activities long-term. As such, our plan involves 'investing for growth' by focusing on investing from reserves into new fundraising activities to grow our income, before committing additional expenditure to service delivery from this new income.

Leukaemia Care remains in strong financial health, with total assets of c. £3.1m (including the office) and funds available for use of c. £1.6m.

Leukaemia Care's reserves policy is to hold sufficient funds to cover between six to nine months of budgeted ongoing expenditure (2022: 7.1 months). We recognise that money is donated to advance our charitable purposes. As such, our policy is to only hold reserves for a particular objective or to mitigate a particular risk, to avoid tying up money unnecessarily. As such, it is important we continue to invest our reserves to enhance the impact we can have.

We propose to undertake a significant investment from reserves in 2023. To facilitate better understanding of our expected financial position throughout the year, we have set the 2023 budget and targets in January using year-end figures for 2022 and forecasted quarterly for 2023 (income and expenditure). We intend to report against this at Trustee meetings. To accompany the 2023 - 2024 plan, we have produced a 5-year forecast to 2027, to show the longer-term impact of investing into new income streams, some of which (e.g. legacies) take time to bear fruit.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Mitigating Risks

At its centre, the plan includes a strong focus on managing risk, to control our approach to generating and spending new income. Whilst we expect to raise some new forms of income within our baseline plans, given the uncertainty quantifying new income streams this income is not already committed to new expenditure. Additional expenditure is subject to increasing our income or securing restricted funding for the activity, which is only triggered when we are comfortable that it is affordable.

But we have also put in place several other protections beyond this, including:

- Fixed-term contracts new staff are recruited on a 3-year contract, with extension subject to funding and success of the roles
- Building organisational resilience ensuring coverage of key skill sets, and developing existing staff within and beyond their roles
- Diversifying income we have sought to create a wide range of income streams, to ensure we are less reliant on the London Marathon
- Phased investment at present we have created plans for 2023 and 2024 which include a significant deficit as we seek to grow income. The result of this investment would be a return to breakeven by 2025 and significant surplus into 2026 and 2027, which could be reinvested as appropriate
- Regular review to determine additional expenditure, reviewed by the senior management team at least monthly and quarterly at Trustee meetings

Performance Measures

Our performance measures help us measure our progress towards our goals. For each activity at Leukaemia Care, we have set both targets (effective) and stretch targets (highly successful).

All targets are based on historical outcomes from 2022 where a service is already in place, and for new dynamic activities we have used informed assumptions. For new dynamic activities, we have set targets per month or quarter, in recognition that these activities may be started at any point through the year.

These performance measures will be used for reporting, with all targets for future years reviewed considering the performance and outcomes from the current financial year.

Our Reserves Policy

Leukaemia Care's reserves policy has been developed in line with best practice guidance to maintain resilience within the finances of the Charity. By developing an intelligent reserves policy with a clear understanding of income and expenditure, we aim to consider and mitigate against financial risk more effectively.

We recognise that money is donated to advance our charitable purposes. As such, our policy is to only hold reserves for a particular objective or to mitigate a particular risk, to avoid tying up money unnecessarily.

Leukaemia Care has a separate Investment Policy which considers the best use of reserves for generating financial return, preserving capital value, and meeting unanticipated cash flow requirements. For the purposes of investment, Leukaemia Care has divided its reserves into two those expected to be held for a long-term time horizon and those that may be needed in the short term.

It is Leukaemia Care's policy to express reserves in terms of 'months of expenditure' for the purposes of external communications.

Our policy identifies three factors requiring the charity to hold reserves. These are considered in the context of both individual risks and by summation (the addition of multiple risks happening at once):

i. Liabilities and contingencies - i.e. staffing costs to provide services, wind-down costs based on the costs of closing down the Charity.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

- ii. Provision to absorb setback i.e. predominantly related to income-based risk.
- iii. Funds designated for specific commitments i.e. operational plan commitments, including forecast deficits or existing committed projects and activities.

In line with the considerations above, Leukaemia Care's policy is to hold sufficient funds to cover between six to nine months of budgeted ongoing expenditure (£1,623,665 - 7.1 months as of 31/12/2022). Ongoing expenditure excludes one-off projects and depreciation, which are met through designation.

Our policy is subject to annual review by the board of Trustees, with the reserves reviewed in line with the policy at budget setting time and in time for the new financial year. Notwithstanding this, the reserves amount is calculable at any point of the year if required, as the financial position of the charity changes or plans alter.

Our Investment Policy

The Trustee Board regularly monitors cash and investments against objectives and risk profile. The investment policy is reviewed annually, and recommendations made to Trustees. Day to day investment management is delegated to an authorized, professional investment advisor, regulated by the FCA.

Our investment policy aims to produce the best financial return within an acceptable level of risk. The investment objective for the long-term reserves is to generate a return in excess of inflation over the long term but also to be available at short notice to support the on-going activities of the Leukaemia Care.

The investment objective for the short-term reserves is to preserve the capital value with a minimum level of risk. Assets should be readily available to meet unanticipated cash flow requirements.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Structure, governance and management Constitution

This is the third annual report of Leukaemia Care. Leukaemia Care was registered as a private company limited by guarantee on 28 March 2019 (Registered No: 11911752). It was then registered with the Charity Commission on 13 June 2019 (Registered No: 1183890) and with the Scottish Charity Regulator on 9th December 2019 (Registered No: SCO49802).

Trustees and their role

The trustees are responsible for the governance and strategy of the charity. A minimum of five and a maximum of 12 trustees in office at any one time are required by the constitution. At each AGM one-third of the trustees, must retire from office but may stand for re-election. A Trustee's term of office is not restricted, and they receive no remuneration for their duties. They may claim reasonable expenses incurred such as travel to trustee meetings. The trustees meet six times a year (currently online or hybrid meetings) and delegate day-to-day running of the charity to the senior management team.

The Trustees who served during the year and up to the date of signature of the financial statements were:

Mr Christopher R G Matthews-Maxwell (Chair)

Mrs W J Davies (Treasurer)

Dr Emmanouil Nikolousis

Ms E Wilson (Vice Chair)

Ms Kate Stallard

Mr Robert Heppell

Mr Dharmesh Mehta

Professor Mhairi Copland (Appointed 2 February 2022)

Ms Carina Patterson

Helen Knight (Appointed 4 May 2022)
Dr Sarah Smith (Appointed 2 February 2022)

Recruitment, induction and training of Trustees

The Chair with support from their fellow Trustees and the CEO, identify the skills and insight required on the board to deliver the charity's strategy. A volunteer role specification is drafted and approved before being advertised as widely as possible. This includes Leukaemia Care's social media outlets, online recruitment sites, specialist publications targeting for example healthcare professionals as well as a direct approach to individuals identified as having the appropriate skill sets. Potential applicants are invited to submit a CV and if shortlisted for interview, will be interviewed by the Chair and another trustee. Successful applicants will be co-opted as trustees until their formal election at the next annual general meeting.

On appointment, the new Trustees attend an induction at our offices in Worcester (Government restrictions permitting during the pandemic) with the executive team and identify areas in which they may wish to take a special interest. They are provided with an induction pack including a copy of the constitution, recent trustee board minutes, accounts, financial reports, the charity's strategy as well as helpful publications such as the Charity Commissions "The essential trustee".

All Trustees are encouraged to attend Leukaemia Care's webinars for further insight into the challenges facing patients, their loved ones and the healthcare professionals that look after them, and how Leukaemia Care is addressing them.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Our trading subsidiary

Ahead of the launch of our art trail Unicornfest, the Trustees of Leukaemia Care Limited decided to register a trading subsidiary – Leukaemia Care Trading Limited which was registered at Companies House on 21 April 2022 (Registered No: 14059389). Its Directors are Chris Matthews-Maxwell, Elizabeth Wilson and Wendy Davies who are also the Chair, Vice Chair and Treasurer of the parent charity, Leukaemia Care Limited. All trading activities relating to Unicornfest will go through the subsidiary company.

Our approach to fundraising

Leukaemia Care is registered with the Fundraising Regulator and as such agrees that when fundraising will do so in accordance with the Fundraising Promise and such of the Code of Fundraising Practice as applies to our fundraising methods. We agree to promote the Fundraising Promise (www.fundraisingregulator.org.uk/) and to include the Registration Badge on our fundraising materials where practical.

We are committed to protecting vulnerable people and others from unreasonable intrusion on a person's privacy, unreasonably persistent approaches or undue pressure to give in the course of or in connection with fundraising for Leukaemia Care. As a result, the charity is signed up to receive suppressions under the Fundraising Preference Service and will actively promote this service to anyone enquiring directly to the charity about concerns with our fundraising ask.

In 2022, the charity received no suppression requests through the Fundraising Preference Service and one fundraising complaint as detailed below.

Leukaemia Care received one fundraising complaint relating to the discontinued charity bags regarding fly-tipping of bags. This was reported to East London Textiles Limited who until September 2019 were contracted to deliver and collect charity textile recycling bags on our behalf. An apology was also made to the person making the complaint along with thanks for bringing the matter to our attention.

Our complaints procedure can be found on our website https://www.leukaemiacare.org.uk/about-us/

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Senior management team

The Trustees delegate day-to-day operations of the charity to the executive team

Chief Executive Officer

Chief Operating Officer and Deputy CEO

Communications and Fundraising Director

Zack Pemberton-Whiteley

Monica Izmajlowicz

Nicole Scully

Our Patrons

We are very grateful for the warm support of our patrons, Lady Penny Mountbatten and Beverley Worboys.

Our President and Vice-Presidents

Our Vice Presidents ably led by Dr Taylor represent our history as well as taking part in activities such as chairing our conferences, contributing via our medical advisory panels, raising awareness of leukaemia and fundraising. we wish to honour the memory and service of Dr Noel Harker who sadly died 17 February 2022 after many years of steadfast support to the charity and blood cancer patients and their families.

President Dr Richard Taylor

Vice Presidents Ms. Sue Merchant

Professor Claire Harrison

Dr Robert Marcus

Professor Andrew Pettitt Professor Antonio Pagliuca

Ms Sheila Hegarty Mr Jason Eliadis Mr Roland Maturi

Mr Christopher MAtthews-Maxwell

Mr Peter Mondon Mr Anthony Gavin Mr Albert Podesta

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Medical advisory panels

Our medical advisory panel together with our patient panel provide insight into our strategy development, as well as assisting the charity with identifying further opportunities to support patients and their loved ones. We are grateful for their feedback and wish to thank them for their time.

Acute lymphocytic leukaemia panel

Prof. David Marks

Prof. Adele Fielding

Dr. Anthony Moorman

Prof. Oliver Ottmann

Dr. Nick Morley

Dr. Sara Ghorashian

Dr. Deborah Yallop

Prof. Ajay Vora

Acute myeloid leukaemia panel

Dr. Manos Nikolousis

Prof. Mary Frances McMullin

Dr. Sahra Ali

Dr. Steve Knapper

Dr. Panagotis Kottaridis

Prof. Rachael Hough (SCT adolescent leukaemia)

Dr. David Taussig

Dr. Priyanka Mehta (AML & CML

Dr. Panagiotis Kottaridis

Prof. Antonio Pagluica

Chronic lymphocytic leukaemia panel

Assoc. Prof. Anna Schuh

Dr. Ben Kennedy

Prof. Chris Fegan

Prof. Guy Pratt

Assoc. Prof Francesco Forconi

Prof. Adrian Bloor.

Dr. Shankara Paneesha,

Dr. Alison McCaig,

Chronic myeloid leukaemia panel

Dr. Dragana Milojkovic

Prof. Nick Cross

Prof. Jane Apperley

Prof. Stephen O'Brien

Prof. Mhairi Copeland

Prof. Adam Mead

Dr Jonathan Kell

Prof. George Follows

Dr. Nilima Parry-Jones

Dr. Piers Patten

Dr. Chris Fox

Dr. Renata Walewska

Prof. Peter Hillmen

Prof. John Gribben

Dr Sunil Lyengar

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Other blood cancers panel

Prof. Claire Harrison (MPN)

Dr. Claire Dearden (HCL)

Dr. Sally Killick (MDS)

Dr. Robert Marcus (Lymphoma)

Simon Cheeseman (Pharmacist)

Prof. Judith Marsh (Aplastic anaemia, MDS)

Dr. Richard Kelly (Aplastic anaemia, MDS)

Prof David Bowen (MDS)

Dr Dima El-Shakari (LGLL, ALL, CLL)

GP advisory Panel

Dr. Rebecca Chellaswamy

Dr. Ruth Corbally

Dr. Elaine Hampton

Dr. Tom Kneale

Dr. Anish Kotecha

Dr. Lily Lamb

Dr. Rachael Marchant

Dr. Richard Roope

Dr. Lance Saker

Dr Sarah Smith (Searle)

Dr. Neil Smith

Dr. Sarah Taylor

Prof. David Weller

Nurse advisory panel

Sarah Blakey

Sarah Watmough

Jacqueline Stones

Joanna Stokes

Roxanne Spencer

Alison Pugh

Phyllis Paterson

Lianne Palmer

Aileen Nield

Klara Matulay

Laura Ledger

Joanna Large

Catherine Langton

Catherine Kunatsa

Helen Knight

Caroline Kerr

Michelle Kenyon

Tracy Gunter

Catherine Griffiths

Kirsty Crozier

Marife Colis

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Remuneration policy

Leukaemia Care is committed to paying our staff fairly and in a way to attract and retain the skills needed to deliver our vision and mission effectively.

When setting salaries for new roles or reviewing salaries for existing roles, we consider a range of factors. Leukaemia Care is committed to avoiding discrimination, including but not limited to the grounds of protected characteristics as set out in the Equality Act 2010.

When drafting this policy, Leukaemia Care was influenced by the National Council of Voluntary Organisation's 2014 inquiry into executive pay (NCVO, Report of the Inquiry into Charity Senior Executive Pay and Guidance for Trustees on Setting Remuneration).

The Board of Trustees are responsible for setting renumeration levels for the senior management team. The CEO has the authority to agree salaries for all employees outside of the senior management team within the guidelines of this policy.

Leukaemia Care upholds a policy that the full-time equivalent ratio for remuneration between its highest paid member of staff and the median salary level will not exceed 3:1, and that remuneration will always meet all national pay standards, ensuring all staff are provided with a living wage.

Salaries are reviewed annually in February following annual appraisals and take effect from April. Staff are advised of any changes in writing stating the amount and the date from which it takes effect. A salary review does not imply an increase and in making any pay award the review will be based on the organisation's financial health.

Leukaemia Care is committed to transparency in pay and publishes its salary banding on all job descriptions. Progression within a band is dependent on performance assessed at the annual appraisal. Change to a different band requires a significant change in job description reflective of the responsibilities of that band. All salary changes must be approved in advance by the CEO.

As part of our commitment to transparency, information regarding the salary bandings will be made available to all Leukaemia Care staff. The salary bands apply to all roles, unless identified as requiring specific professional qualifications that fall outside this banding. Identified roles may follow other scales, such as the NHS salary scale.

The remuneration policy is reviewed annually by Trustees. Salaries are reviewed annually in March/April following annual appraisals and take effect from the 1st day of the following month. Staff are advised of any changes in writing stating the amount and the date from which it takes effect. A salary review does not imply an increase and in making any pay award the review will be based on the organisation's financial health. All fixed salary increases are capped within the bandings, one off discretionary payments and cost of living payments are not capped within the bandings.

Influenced by the 2014 NCVO inquiry referred to above, the Board of Trustees is committed to including the following information within its annual statutory report and financial statements:

- A summary statement of the charity's remuneration policy and approach to senior management pay.
- Disclosures on the number of staff in receipt of more than £60,000 per annum (in bands of £10,000), and the collective total benefits (including pension payments and employer's national insurance) paid to the Senior Management Team, in line with the accounting Statement of Recommended Practice 2019 for charities. Given the charity's size, the Board of Trustees does not believe it is appropriate to disclose the actual salary of any individual member of staff, including that of the senior management team, to the public.
- Disclosures on pensions and other staff benefits (see subsequent notes to the financial statements). Staff/ pension costs: total organisational staff costs in 2022 were £1,044,486 (2021 £690,877). Overall, our staff costs as a proportion of overall expenditure was 52.76% for 2022 an increase from 51.61% in 2021.

Pensions

The charity will match employee contributions up to 7% of qualifying earnings to the government workplace scheme – NEST.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Volunteers

Our volunteers are key in assuring anyone affected by a leukaemia, MDS or MPN diagnosis receives the information and support they need. A big thank you to all our volunteers who got involved in 2022, this included patients, carers, healthcare professionals and members of the public.

In 2022 we appointed a Volunteer Coordinator; this is an employee who can support and celebrate our existing volunteers, build our volunteering program and strategy, handle the day-to-day administration of volunteering, and ensure a cohesive experience for volunteers across all roles.

Our Volunteer Coordinator implemented several new elements to improve the experience of our volunteers, including a volunteer handbook and a volunteer Facebook group to provide our volunteers with a place to communicate with each other, and will begin working towards the Investing in Volunteers standard in 2023.

In August 2022 we held a volunteer awards ceremony as part of our annual conference to celebrate the impact of our volunteers with staff nominating volunteers from different areas of the charity's work.

Our aim is to continue to focus on creating a more cohesive experience for our volunteers. We plan to achieve the 'Investing in Volunteers' accreditation, to work closely with our volunteers to make sure that the experience is reflecting their needs, and to work to ensure that our volunteers reflect the diversity of the wider blood cancer community.

Our roles have grown in 2022, with the introduction of Area Ambassador volunteers. These are current patients who are happy to use their hospital visits to help us to ensure that our information is available in hospital waiting rooms and haematology clinics. The volunteers are onboarded and supported by our Volunteer Coordinator, who liaises with our Regional Coordinators on how each individual volunteer can make a difference in their hospital.

Our Buddy Support Service relies on patients and carers volunteering their time to support other patients and carers who may be struggling with their diagnosis or feeling isolated because of it. The volunteers are DBS checked, trained and provided with ongoing support by both our Volunteer Coordinator and our Buddy Coordinator, who is also a paid employee.

A huge amount of our information is distributed through our webinars, podcasts and online training events. These rely on patients and healthcare professionals to join us as speakers – providing attendees with relevant and up to date information not only on leukaemia, MDS and MPN but also tips on getting the most out of medical appointments, coping with fatigue, immunisations and the challenges of living with a compromised immune system among other topics.

Our healthcare professional volunteers are a vital resource across the charity, attending our medical advisory panels, reviewing our patient information, and attending policy events with us. We are extremely grateful to all these professionals, and the time they give. Included in this group are the many nurses who help to run our nationwide support groups ensuring patients do not become isolated because of their diagnosis. They are supported by our network of Regional Co-ordinators who provide practical, emotional, and administrative support to the group.

We also hold patient advisory panels made up of patients with a range of experiences of blood cancer and who are at a variety of stages of treatment, recovery or remission. These patients provide Leukaemia Care with vital feedback on our strategy and activities, ensuring our services remain relevant and timely. They also support with health technology appraisals, advice on advocacy requests from individual patients, content for articles, webinars and podcasts as well as reviewing patient information.

Our community fundraising volunteers place collection tins, hold supermarket collections, run events, and join the cheer squad for the London Marathon. As well as raising funds, they raise awareness of leukaemia and the support we provide within their local communities. 2022 has continued to hold challenges for these roles, with a delayed return to normal following the COVID-19 pandemic. Throughout we have had a core of community volunteers who have continued to do everything they can to help us to raise vital funds.

We also have several areas where people volunteer their time less formally, including the signing of petitions, sharing of information and, most importantly, sharing their story. Each year people share and record their leukaemia stories as part of '#SpotLeukaemia' to raise awareness of the signs and symptoms. We recognise that people connect with stories and the people at the heart of them and each year they help us spread the '#SpotLeukaemia' message a little wider. Going forwards we aim to bring these smaller volunteering efforts together into a section of "micro-volunteering" tasks, allowing our supporters to pick tasks that will fit easily into their day, taking up 10, 30 or 60 minutes depending on the task that they choose.

TRUSTEES' REPORT (INCLUDING DIRECTORS' REPORT) (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

In 2023 and beyond we have several new volunteer roles that we are hoping to introduce, including Facebook support group moderators, clinic stand volunteers and volunteer speakers. We are also looking at the possibilities of including volunteering in our corporate partnerships. At the centre of this we will always aim to focus on how these volunteers will further the key aims and objectives of the charity.

Some feedback from our volunteers:

"From the first moment I offered help the team have been super friendly and supportive and have made getting involved very easy. I have always felt useful, needed and part of the team."

Feedback from Patient information reviewer and patient panellist

"I believe that patient input is crucial to achieving the most positive outcomes. I am a great advocate of support groups. I think that Leukaemia Care is a fantastic charity."

Feedback from Patient Panellist

"I feel very supported, the team always respond to my emails etc, nothing is too much trouble, they never fob me off with my new ideas saying no can't do, they always give them a try and thankfully my ideas up to now have paid off." Feedback from community fundraiser

"The training is well organised, and the ongoing support is amazing."

Feedback from Buddy

"It's very rewarding personally and hopefully you're contributing to help someone get through difficult times and the R&D to improve treatments and outcomes... You have a vibrant, friendly, and efficient team - it's a pleasure to work with you"

Feedback from Buddy & Cheer Squad member

Related parties

In addition to the trading subsidiary undertaking, Leukaemia Care Trading Limited, the only related parties are the Trustees and those individuals connected with them including family members, business associates and other charities in which they are involved. Please refer to note 12 in the financial statements for detail.

Auditor

In accordance with the company's articles, a resolution proposing that Kendall Wadley LLP be reappointed as auditor of the company will be put at a General Meeting.

Disclosure of information to auditor

Each of the trustees has confirmed that there is no information of which they are aware which is relevant to the audit, but of which the auditor is unaware. They have further confirmed that they have taken appropriate steps to identify such relevant information and to establish that the auditor is aware of such information.

The trustees' report was approved by the Board of Trustees.

— Docusigned by: Cluris Matthews—Maxwell

Mr Christopher R G Matthews-Maxwell (Chair)

Trustee

21 June 2023

STATEMENT OF TRUSTEES' RESPONSIBILITIES FOR THE YEAR ENDED 31 DECEMBER 2022

The trustees, who are also the directors of Leukaemia Care for the purpose of company law, are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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

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

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

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable group and enable them to ensure that the financial statements comply with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended). They are also responsible for safeguarding the assets of the charitable group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The trustees are responsible for the maintenance and integrity of the charity and financial information included on the charitable group's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

INDEPENDENT AUDITOR'S REPORT

TO THE TRUSTEES OF LEUKAEMIA CARE

Opinion

We have audited the financial statements of Leukaemia Care (the 'charitable group') for the year ended 31 December 2022 which comprise the statements of financial activities, the balance sheets and the statement of financial activities, the balance sheet, the statement of cash flows and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable group's affairs as at 31 December 2022 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006 (as amended).

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 charitable group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

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

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

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

Other information

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

We have nothing to report in this regard.

INDEPENDENT AUDITOR'S REPORT (CONTINUED) TO THE TRUSTEES OF LEUKAEMIA CARE

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 and the Charities Accounts (Scotland) Regulations 2006 (as amended) require us to report to you if, in our opinion:

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

Responsibilities of trustees

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

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 144 of the Charities Act 2011 and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 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.

The extent to which our procedures are capable of detecting irregularities, including fraud, is detailed below.

Extent to which the audit was considered capable of detecting irregularities and fraud

- an understanding of the risk assessment process (including the assessment of the risk of fraud) adopted by the Board is obtained and their attitude to risk ascertained
- an assessment of the susceptibility to material mis-statement of the financial statements as a result of management over-ride or fraud is made
- a review of the fundraising complaints register is undertaken and the matters arising assessed as to the existence of fraud and irregularities
- it is ensured that the engagement team have, collectively, the appropriate competence, capabilities and skills to be involved in the assignment, are fully briefed and understand the risks specific to the charitable group

Audit response to risks identified

- processes to test the outcomes of our assessment include, a review of Board minutes, analytical review, the relevance and accuracy of significant accounting estimates, substantive testing of significant transactions, work to identify unusual or unexpected accounting entries including the testing of journal entries, information disclosed in the financial statements is traced to supporting documentation. In all instances it is acknowledged that material misstatements that arise from fraud may involve deliberate concealment or collusion and are, therefore, by their very nature harder to detect than those arising from error.

INDEPENDENT AUDITOR'S REPORT (CONTINUED) TO THE TRUSTEES OF LEUKAEMIA CARE

- it is established if there have been any instances of non-compliance with applicable laws and regulations, where there are such breaches, a full understanding, including gathering of relevant documentation appertaining to the event is obtained and assessed

It should be noted that Auditing standards limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the directors and other management and the inspection of regulatory and legal correspondence, if any.

A further description of our responsibilities is available on the Financial Reporting Council's website at: https://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charity's trustees, as a body, in accordance with part 4 of the Charities (Accounts and Reports) Regulations 2008 and regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

DocuSigned by:

Elizabeth Needham ACA CTA (VAT) (Senior Statutory Auditor) for and on behalf of Kendall Wadley LLP

21 June 2023

Chartered Accountants
Statutory Auditor

Granta Lodge 71 Graham Road Malvern Worcestershire WR14 2JS

Kendall Wadley LLP is eligible for appointment as auditor of the charitable group by virtue of its eligibility for appointment as auditor of a company under section 1212 of the Companies Act 2006.

CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 DECEMBER 2022

	l Notes	Jnrestricted funds 2022 £	Restricted funds 2022	Total 2022 £	Unrestricted funds 2021 £	Restricted funds 2021	Total 2021 £
Income and endow			~	~	~	~	~
Donations and	incinco in	<u> </u>					
legacies	3	836,570	341,404	1,177,974	669,681	193,206	862,887
Trading income	4	193,750	, -	193,750	, -	, -	, -
Fundraising income	5	723,517	_	723,517	424,035	_	424,035
Investments	6	43,352	-	43,352	34,971	-	34,971
Other income	7	901	-	901	24,276	-	24,276
Total income		1,798,090	341,404	2,139,494	1,152,963	193,206	1,346,169
Expenditure on:							
Raising funds	8	784,794		784,794	569,908		569,908
Charitable activities	9	937,681	257,067	1,194,748	599,065	169,556	768,621
Total expenditure		1,722,475	257,067	1,979,542	1,168,973	169,556	1,338,529
Net gains/(losses) or investments	ո 14	(77,221)		(77,221)	36,577		36,577
Net (outgoing)/inco	ming	(1,606)	84,337	82,731	20,567	23,650	44,217
Other recognised g	ains and	losses					
Revaluation of tangible fixed assets		12,640		12,640	12,640		12,640
Net movement in fu	ınds	11,034	84,337	95,371	33,207	23,650	56,857
Fund balances at 1 c 2022	January	2,960,454	71,581	3,032,035	2,927,247	47,931	2,975,178
Fund balances at 3 December 2022	1	2,971,488	155,918	3,127,406	2,960,454	71,581	3,032,035

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

All income and expenditure derive from continuing activities.

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

STATEMENT OF FINANCIAL ACTIVITIES - CHARITY INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 DECEMBER 2022

		Unrestricted funds 2022	Restricted funds 2022	Total 2022	Unrestricted funds 2021	Restricted funds 2021	Total 2021
	Notes	£	£	£	£	£	£
Income and endow	ments tro	<u>om:</u>					
Donations and legacies	3	836,570	341,404	1,177,974	669,681	193,206	862,887
Fundraising income	5	794,529	-	794,529	424,035	-	424,035
Investments	6	43,352	_	43,352	34,971	_	34,971
Other income	7	901	-	901	24,276	-	24,276
Total income		1,675,352	341,404	2,016,756	1,152,963	193,206	1,346,169
Expenditure on: Raising funds	8	662,056		662,056	569,908		569,908
Charitable activities	9	937,681	257,067	1,194,748	599,065	169,556	768,621
Total expenditure		1,599,737	257,067	1,856,804	1,168,973	169,556	1,338,529
Net gains/(losses) or investments	1 14	(77,221)		(77,221)	36,577		36,577
Net (outgoing)/inco resources	ming	(1,606)	84,337	82,731	20,567	23,650	44,217
Other recognised g	ains and	losses					
Revaluation of tangible fixed assets		12,640	-	12,640	12,640	-	12,640
Net movement in fu	ınds	11,034	84,337	95,371	33,207	23,650	56,857
Fund balances at 1 J 2022	January	2,960,454	71,581	3,032,035	2,927,247	47,931	2,975,178
Fund balances at 3 December 2022	1	2,971,488	155,918	3,127,406	2,960,454	71,581	3,032,035

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

All income and expenditure derive from continuing activities.

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

CONSOLIDATED BALANCE SHEET AS AT 31 DECEMBER 2022

		20	2022		21
	Notes	£	£	£	£
Fixed assets					
Tangible assets	16		879,550		870,617
Investments	17		611,708		685,554
			1,491,258		1,556,171
Current assets					
Stocks	19	35,404		-	
Debtors falling due after one year	20	-		103,000	
Debtors falling due within one year	20	407,042		313,735	
Investments	21	403,520		402,060	
Cash at bank and in hand		961,507		734,703	
		1,807,473		1,553,498	
Creditors: amounts falling due within one year	22	(171,325)		(77,634)	
Net current assets			1,636,148		1,475,864
Total assets less current liabilities			3,127,406		3,032,035
Income funds					
Restricted funds	24		155,918		71,581
Unrestricted funds			,		,
Designated funds	25	1,347,823		1,087,127	
General unrestricted funds		1,623,665		1,873,327	
			2,971,488		2,960,454
			2 127 106		2 022 025
			3,127,406		3,032,035
					

CONSOLIDATED BALANCE SHEET (CONTINUED)

AS AT 31 DECEMBER 2022

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 December 2022, although an audit has been carried out under section 144 of the Charities Act 2011.

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

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

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

Trustee

DocuSigned by:

Mrs W J Davies (Treasurer)

The financial statements were approved by the Trustees on 21 June 2023

6CF4719F0E4E433...

Mr Christopher R G Matthews-Maxwell (Chair) Trustee

Company registration number 11911752

CHARITY BALANCE SHEET AS AT 31 DECEMBER 2022

		20	22	202	21
	Notes	£	£	£	£
Fixed assets					
Tangible assets	16		879,550		870,617
Investments	17		611,808		685,554
			1,491,358		1,556,171
Current assets					
Stocks	19	6,225		-	
Debtors falling due after one year	20	-		103,000	
Debtors falling due within one year	20	396,851		313,735	
Investments	21	403,520		402,060	
Cash at bank and in hand		961,507		734,703	
		1,768,103		1,553,498	
Creditors: amounts falling due within one year	22	(132,055)		(77,634)	
Net current assets			1,636,048		1,475,864
That during it does to					
Total assets less current liabilities			3,127,406		3,032,035
Income funds					
Restricted funds	24		155,918		71,581
<u>Unrestricted funds</u>					
Designated funds	25	1,347,823		1,087,127	
General unrestricted funds		1,623,665		1,873,327	
			2,971,488		2,960,454
			3,127,406		3,032,035

CHARITY BALANCE SHEET (CONTINUED)

AS AT 31 DECEMBER 2022

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 December 2022, although an audit has been carried out under section 144 of the Charities Act 2011.

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

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

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

The financial statements were approved by the Trustees on 21 June 2023

-Docusigned by: Turis Matthews—Maxwell

Mr Christopher R G Matthews-Maxwell (Chair)

iwr Christopher R G Matthews-Maxwell (Chair) **Trustee**

Company registration number 11911752

─DocuSigned by:

Mrs W J Davies (Treasurer)

Trustee

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31 DECEMBER 2022

		202	22	202	2021	
	Notes	£	£	£	£	
Cash flows from operating activities						
Cash generated from/(absorbed by) operations	29		223,094		(96,832)	
Investing activities						
Purchase of tangible fixed assets		(32,034)		(12,364)		
Purchase of investments		(69,247)		(485,914)		
Proceeds from disposal of investments		57,573		101,638		
Other investment movements		8,298		(12,473)		
Investment income received		40,580		37,194		
Net cash generated from/(used in) investing activities			5,170		(371,919)	
Net cash used in financing activities					-	
Net increase/(decrease) in cash and ca equivalents	sh		228,264		(468,751)	
Cash and cash equivalents at beginning o	of year		1,136,763		1,605,514	
Cash and cash equivalents at end of ye	ear		1,365,027		1,136,763	
Relating to:						
Cash at bank and in hand	and t		961,507		734,703	
Short term deposits included in current as investments	set		403,520		402,060	

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2022

1 Accounting policies

Charity information

Leukaemia Care is a private company limited by guarantee incorporated in England and Wales. The registered office is One Birch Court, Blackpole East, Worcester, WR3 8SG.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charitable group's [governing document], the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended), FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" ("FRS 102") and the Charities SORP "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)" (effective 1 January 2019). The charitable group is a Public Benefit Entity as defined by FRS 102.

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

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Business combinations

In the parent company financial statements, the cost of a business combination is the fair value at the acquisition date of the assets given, equity instruments issued and liabilities incurred or assumed, plus costs directly attributable to the business combination.

1.3 Basis of consolidation

The consolidated group financial statements consist of the financial statements of the parent company Leukaemia Care together with all entities controlled by the parent company (its subsidiaries).

All financial statements are made up to 31 December 2022. Where necessary, adjustments are made to the financial statements of subsidiaries to bring the accounting policies used into line with those used by other members of the group.

All intra-group transactions, balances and unrealised gains on transactions between group companies are eliminated on consolidation. Unrealised losses are also eliminated unless the transaction provides evidence of an impairment of the asset transferred.

Subsidiaries are consolidated in the group's financial statements from the date that control commences until the date that control ceases.

1.4 Going concern

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

1.5 Charitable funds

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

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

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

1 Accounting policies

(Continued)

Endowment funds are subject to specific conditions by donors that the capital must be maintained by the charitable group.

1.6 Income

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

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

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

1.7 Expenditure

Expenditure is recognised once there is a legal or constructive obligation to transfer economic benefit to a third party, it is probable that a transfer of economic benefits will be required in settlement, and the amount of the obligation can be measured reliably.

Expenditure is classified by activity. The costs of each activity are made up of the total of direct costs and shared costs, including support costs involved in undertaking each activity. Direct costs attributable to a single activity are allocated directly to that activity. Shared costs which contribute to more than one activity and support costs which are not attributable to a single activity are apportioned between those activities on a basis consistent with the use of resources. Central staff costs are allocated on the basis of time spent, and depreciation charges are allocated on the portion of the asset's use.

All expenditure is accounted for on an accruals basis, with the exception of expenditure directly attributable to forthcoming events. The income is recognised on receipt and so the expenditure is recognised at point of expense. Costs are allocated to a particular activity where the cost relates to that activity. Costs of generating funds comprise those costs directly attributable to raising funds through activities. Grants payable are recognised on an accruals basis. Salaries and central overhead costs are apportioned between costs of generating funds, charitable activities and governance costs based on estimate of staff time attributable to each.

1.8 Tangible fixed assets

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

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

Freehold buildings

Computers and other equipment

Fixtures and fittings

Over 50 years

over 3 or 4 years

over 10 years

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

1 Accounting policies

(Continued)

Freehold land is not depreciated.

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

The charity has no specific value above which it capitalises assets. Assets are capitalised when they are held for long term use.

1.9 Fixed asset investments

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

1.10 Impairment of fixed assets

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

1.11 Stocks

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

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

1.12 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less.

1.13 Financial instruments

The charitable group has elected to apply the provisions of Section 11 'Basic Financial Instruments' and Section 12 'Other Financial Instruments Issues' of FRS 102 to all of its financial instruments.

Financial instruments are recognised in the charitable group's balance sheet when the charitable group becomes party to the contractual provisions of the instrument.

Financial assets and liabilities are offset, with the net amounts presented in the financial statements, when there is a legally enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

Basic financial assets

Basic financial assets, which include debtors and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost. Financial assets classified as receivable within one year are not amortised.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

1 Accounting policies

(Continued)

Basic financial liabilities

Basic financial liabilities, including creditors are initially recognised at transaction price. Financial liabilities classified as payable within one year are not amortised.

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of operations from suppliers. Amounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade creditors are recognised initially at transaction price and subsequently measured at amortised cost.

Derecognition of financial liabilities

Financial liabilities are derecognised when the charitable group's contractual obligations expire or are discharged or cancelled.

1.14 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charitable group is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.15 Retirement benefits

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

2 Critical accounting estimates and judgements

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

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

As described above, the trustees annually exercise judgement through consideration of the carrying value of the freehold buildings held by the charity. Adjustments are made through the Statement of Financial Activities for changes in value determined by the review process.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

3 Donations and legacies Group and charity

	Unrestricted funds	Restricted funds	Total	Unrestricted funds	Restricted funds	Total
	2022	2022	2022	2021	2021	2021
	£	£	£	£	£	£
Donations and gifts	229,046	122,951	351,997	157,770	52,080	209,850
Legacies receivable	366,506	45,318	411,824	283,679	-	283,679
Corporate grants and donations	241,018	173,135	414,153	228,232	141,126	369,358
	836,570	341,404	1,177,974	669,681	193,206	862,887

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

Sales 193,750	4	Trading income Group		
Sales 193,750 -			subsidiary	2021
Fundraising income Group Unrestricted Unrestricted funds funds 2022 2021 £ £ £ Fundraising events Charity Unrestricted Unrestricted funds funds 2022 2021 £ £ £ Fundraising events Unrestricted Unrestricted funds funds 2022 2021 £ £ £ Fundraising events 794,529 424,035 6 Investments Group and charity Unrestricted Unrestricted funds funds 2022 2021 £ £ £ Rental income 25,900 25,900 Investment income 7,380 1,406 Interest receivable 10,072 7,665				£
Croup Company Compan		Sales		
Unrestricted funds funds funds funds	5	Fundraising income		
Unrestricted funds funds funds funds		Group		
## Fundraising events		·		Inrestricted funds
Charity Unrestricted Unrestricted funds				2021 £
Charity Unrestricted Unrestricted funds		Fundraising events		424,035
Fundraising events 2022 2021 £		Charity		
Tundraising events 2022 2021 £			Unrestricted L	Inrestricted
Fundraising events E £ £ £ £ 794,529 424,035			funds	funds
Fundraising events 794,529 424,035 6 Investments Group and charity Unrestricted Unrestricted funds funds 2022 2021 £ £ Rental income 25,900 25,900 Investment income 7,380 1,406 Interest receivable 10,072 7,665				2021
Compand charity Compand Ch		Fundraising events	794,529	424,035 =====
Rental income 25,900 lnvestment income 25,900 lnvestment income 7,380 lnvestment income 1,406 lnterest receivable	6			
Rental income 25,900 25,900 Investment income 7,380 1,406 Interest receivable 10,072 7,665				Inrestricted
Rental income 25,900 25,900 Investment income 7,380 1,406 Interest receivable 10,072 7,665			funds	funds
Investment income 7,380 1,406 Interest receivable 10,072 7,665 — — —				2021 £
Interest receivable 10,072 7,665				25,900
				1,406 7,665
$^{\prime}$		merest receivable	43,352	34,971

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

7 Other income Group and charity

	Unrestricted	Unrestricted Unrestricted		
	funds	funds		
	2022	2021		
	£	£		
Government Grants	-	23,082		
Solar panels	901	1,194		
	901	24,276		

The Government Grants were in relation to the Job Retention Scheme.

8 Raising funds Group

	Unrestricted Unrestricted		
	funds	funds	
	2022	2021	
	£	£	
Fundraising and publicity			
Staging fundraising events	198,534	309,000	
Advertising	43,972	18,597	
Other fundraising costs	73,022	33,876	
Staff costs	284,286	173,573	
Depreciation and impairment	4,564	2,139	
Support costs	50,504	25,802	
Fundraising and publicity	654,882	562,987	
Trading costs			
Other trading activities	79,330	_	
Staff costs	43,408	-	
Support costs	3,170	2,265	
Trading costs	125,908	2,265	
Investment management	4,004	4,656	
	784,794	569,908	
			

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

8 Raising funds (Continued)

Charity

	Unrestricted Unrestri funds fu		
	2022	2021	
	£	£	
Fundraising and publicity			
Staging fundraising events	198,534	309,000	
Advertising	43,972	18,597	
Other fundraising costs	73,022	33,876	
Staff costs	284,286	173,573	
Depreciation and impairment	4,564	2,139	
Support costs	50,504	25,802	
Fundraising and publicity	654,882	562,987	
Trading costs			
Support costs	3,170	2,265	
Trading costs	3,170	2,265	
Investment management	4,004	4,656	
	662,056	569,908	

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

9 Charitable activities

Staff costs 700,036 Depreciation and impairment 31,177	504,029
Depreciation and impairment 31 177	,
Depression and impairment	27,250
Patient Services costs 63,588	35,692
Conferences 2,256	2,102
Help Line costs 7,109	4,109
Leukaemia Matters/Nursing Matters 28,378	11,172
Campaign costs 42,683	15,425
Other charitable activities 18,913	15,317
Nurse e-learning tool (1,081)	512
GP's e-learning tool 5,384	2,400
Other grants 168,054	50,000
Database costs 5,482	4,469
Patient Advocacy (16,724)	3,709
Website costs 22,578	13,669
Other costs 2,842	
1,080,675	689,855
Share of support costs (see note 10) 106,677	73,481
Share of governance costs (see note 10) 7,396	5,285
	768,621
======================================	
Analysis by fund	
Unrestricted funds 937,681	599,065
Restricted funds 257,067	169,556
1,194,748	768,621

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

10 Support costs Group and charity

Group and charity						
	Support Goosts	overnance costs	2022	Support G costs	Sovernance costs	2021
	£	£	£	£	£	£
Staff costs	16,753	-	16,753	13,275	_	13,275
Office costs	140,428	-	140,428	86,008	-	86,008
Audit fees	-	4,200	4,200	-	3,600	3,600
Legal and professional	-	3,298	3,298	-	2,370	2,370
Trustee and meeting expenses	-	3,068	3,068	-	1,580	1,580
	157,181	10,566	167,747	99,283	7,550	106,833
Analysed between						
Fundraising	50,504	-	50,504	25,802	-	25,802
Trading	-	3,170	3,170	-	2,265	2,265
Charitable activities	106,677	7,396	114,073	73,481	5,285	78,766
	157,181	10,566	167,747	99,283	7,550	106,833

Governance costs includes payments to the auditors of £4,200 (2021- £3,600) for audit fees, In addition included in the costs of other trading activities is £3,500 (2021 - £nil) in respect of the audit of the financial statements of the subsidiary undertaking.

11 Auditor's remuneration

Fees payable to the charitable group's auditor and associates:	2022 £	2021 £
Audit of the charitable group's annual accounts	4,200	3,600

In addition £3,500 is payable in respect of the audit of the subsidiary undertaking.

12 Trustees

The charity reimburses expenses to Trustees and management committee members for travel, subsistence and telephone relating to charity business. The costs reimbursed to 2 (2021: 2) trustees for the current year were £2,521 (2021: £670).

None of the trustees (or any persons connected with them) received any remuneration during the year.

The charity utilises the services of CKCA Limited to prepare the payroll, W Davies, trustee, is a director of this company. The services are provided on an arms length basis and the amount paid during the year amounted to £2,186 (2021: £1,916).

All trustees are covered by an indemnity insurance policy costing £819 (2021 : £611)

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

13 Employees

The average monthly number of employees during the year was:

2022 Number	2021 Number
20	18
16	10
4	3
40	31
2022	2021
£	£
930,750	615,806
78,226	47,835
35,507	27,236
1,044,483	690,877
	20 16 4 40 2022 £ 930,750 78,226 35,507

The remuneration of key management personnel through payroll and other fees is £190,032 (2021:£158,284).

The number of employees whose annual remuneration was more than £60,000 is as follows:

	2022 Number	2021 Number
£60,001 - £70,000	1	1

14 Net (losses)/gains on investments Group and charity

	Unrestricted Unrestricted		
	funds	funds	
	2022	2021	
	£	£	
Revaluation of investments	(70,142)	15,328	
Gain/(loss) on sale of investments	(7,079)	21,249	
	(77,221)	36,577	

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

15 Taxation

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

The subsidiary undertaking is required to Gift Aid profits arising to the parent charity such that no tax charge arises.

16 Tangible fixed assets Group and charity

	Freehold buildings	Computers and other equipment	Fixtures and fittings	Total
	£	£	£	£
Cost				
At 1 January 2022	842,599	244,639	14,656	1,101,894
Additions		32,034		32,034
At 31 December 2022	842,599	276,673	14,656	1,133,928
Depreciation and impairment				
At 1 January 2022	-	220,358	10,919	231,277
Depreciation charged in the year	12,640	21,635	1,466	35,741
Revaluation	(12,640)			(12,640)
At 31 December 2022		241,993	12,385	254,378
Carrying amount				
At 31 December 2022	842,599	34,680	2,271	879,550
At 31 December 2021	842,599	24,281	3,737	870,617

The trustees consider that the value of the freehold property is not materially different from original cost and the computed depreciation charge for the year is accordingly reversed.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

17 Fixed asset investments

Group	Listed	Cash in	Other	Total
	investments	portfolio	investments	•
Cost or valuation	£			£
At 1 January 2022	663,937	21,617	_	685,554
Additions	69,247	(69,247)	_	000,004
Valuation changes	(70,142)	(00,247)	_	(70,142)
Other cash movements	859	2,516	_	3,375
Loss on disposal	(7,079)	2,010	_	(7,079)
Disposals	(57,573)	57,573	-	-
At 31 December 2022	599,249	12,459		611,708
Carrying amount				
At 31 December 2022	599,249	12,459	-	611,708
At 31 December 2021	663,937	21,617	-	685,554
Charity				
	Listed	Cash in	Other	Total
	investments £	portfolio	investments	£
Cost or valuation	Z			2
At 1 January 2022	663,937	21,617	_	685,554
Additions	69,247	(69,247)	100	100
Valuation changes	(70,142)	(00,211)	-	(70,142)
Other cash movements	859	2,516	_	3,375
Loss on disposal	(7,079)	_,0.0	_	(7,079)
Disposals	(57,573)	57,573	-	-
At 31 December 2022	599,249	12,459	100	611,808
Carrying amount				
At 31 December 2022	599,249	12,459	100	611,808
At 31 December 2022				

Other investments represents the interest in the subsidiary undertaking, see note 28.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

18	Financial instruments				
	Group and charity			2022 £	2021 £
	Carrying amount of financial assets			~	~
	Instruments measured at fair value through profit	or loss		599,249 ———	663,937
19	Stocks				
		Group 2022	Group 2021	Charity 2022	Charity 2021
		£	£	£	£
	Finished goods and goods for resale	35,404		6,225	
20	Debtors				
20	Debtors	Group	Group	Charity	Charity
		2022	2021	2022	2021
	Amounts falling due within one year:	£	£	£	£
	Trade debtors	183,372	48,208	42,572	48,208
	Amounts owed by subsidiary undertakings	-	-	137,317	-
	Other debtors	8,467	99,626	1,759	99,626
	Prepayments and accrued income	215,203	165,901	215,203	165,901
		407,042	313,735	396,851	313,735
		====	====	====	====
	Amounts falling due after more than one year:				
	7 amounte running add artor more than one your.	2022	2021	2022	2021
		£	£	£	£
	Prepayments and accrued income	_	103,000	_	103,000
	, ,				
	Total debtors	407,042	416,735	396,851	416,735
21	Current asset investments Group and charity				
				2022 £	2021 £
	Unlisted investments			403,520	402,060
	22.24			=====	====

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

	Group 2022	Group 2021	Charity 2022	Charity 2021
	£	£	£	£
Other taxation and social security	24,912	13,668	24,912	13,668
Trade creditors	66,584	16,002	31,064	16,002
Accruals and deferred income	79,829	47,964	76,079	47,964
	171,325	77,634	132,055	77,634

23 Retirement benefit schemes

Defined contribution schemes

The charitable group operates a defined contribution pension scheme for all qualifying employees. The assets of the scheme are held separately from those of the charitable group in an independently administered fund.

The charge to profit or loss in respect of defined contribution schemes was £35,507 (2021 - £27,236).

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

24 Restricted funds Group and charity

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

	Movement in funds			Movement in funds			
	Balance at 1 January 2020	Incoming resources	Resources expended1	Balance at January 2022	Incoming resources	Resources expended	Balance at 31 December 2022
	£	£	£	£	£	£	£
The Lily Blaen Hope Fund	24,428	_	(1,961)	22,467	_	(13,083)	9,384
Information Booklets	, - -	84,125	(60,538)	23,587	-	(23,587)	-
GP e-learning tool	-	19,817	(12,261)	7,556	8,423	(15,979)	_
Nurse Advisor	-	, -	-	, -	30,346	(30,346)	_
Student/Education	5,000	-	-	5,000	, -	-	5,000
Worcester Support Group	251	-	(251)	· -	_	-	-
Glasgow Area	-	1,900	(1,900)	-	1,900	(1,600)	300
KAy Kendall	93	-	(93)	-	-	-	-
Support Group - Taunton	267	-	(267)	-	-	-	-
Support Group - Scotland	6,472	-	(1,962)	4,510	-	(1,176)	3,334
Counselling Fund	-	1,000	(1,000)	-	10,005	(9,135)	870
Travel Grant	-	-	(267)	-	47,000	(47,000)	-
Support Group - Glasgow and Aberdeen	2,000	-	(454)	1,546	-	588	958
Support Group - South Shields	1,000	1,000	(1,962)	38	-	(38)	-
Support Group - Leicestershire	1,393	-	-	1,393	-	-	1,393
Patient Support - Worcestershire	1,900	-	(1,900)	-	-	-	-
Birmingham Patient Conference	500	-	-	500	-	-	500
Welfare & Advocacy support	627	21,681	(22,308)	-	11,594	(11,594)	-
Belfast Hospital Support	2,000	-	-	2,000	9,999	-	11,999
Bristol Hospital Support	2,000	-	-	2,000	-	(869)	1,131
Patient Conferences/Webinars	-	7,000	(7,000)	-	25,092	(25,092)	-
Care Helpline Costs	-	5,000	(4,016)	984	1,375	(2,359)	-
Nurse e-learning		10,183	(10,183)	-	3,175	(3,175)	

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

24	Restricted funds						(C	ontinued)
	Buddy Scheme	-	1,500	(1,500)	-	19,243	(19,243)	-
	West Midlands Hospital Support	-	5,000	(5,000)	-	9,500	(9,500)	-
	Digital Support	-	33,000	(33,000)	-	-	-	-
	Support Group - Cambridge	-	500	(500)	-	-	-	-
	Spot Leukaemia	-	1,500	(1,500)	-	14,654	(14,654)	-
	Support Groups	-	-	-	-	5,851	(5,851)	-
	Newcastle Hospital Support	-	-	-	-	1,000	-	1,000
	UCHL Hospital Support	-	-	-	-	2,000	(985)	1,015
	Manchester Hospital Support	-	-	-	-	7,000	(2,974)	4,026
	Nottingham Hospital Support	-	-	-	-	9,454	-	9,454
	Patient Support Scotland	-	-	-	-	5,000	(5,000)	-
	William Davidson - Aberdeen Area	-	-	-	-	45,318	(800)	44,518
	CAR-T	-	-	-	-	20,000	(10,000)	10,000
	AML Information	-	-	-	-	15,000	-	15,000
	AML Education	-	-	-	-	23,135	-	23,135
	Yorkshire Patient Support	-	-	-	-	10,000	(1,654)	8,346
	Wales Hospital Support	-	-	-	-	3,965	-	3,965
	Support Group Wales	-	-	-	-	1,375	(785)	590
		47,931	193,206	(169,556)	71,581	341,404	(257,067)	155,918

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

24 Restricted funds (Continued)

The Lily Blaen Hope Fund: this represents a legacy that was received to be used for activities in Scotland.

Information booklets: funds received to assist in the production of information booklets.

GP e-learning tool: this represents income received specifically for the GP's e-learning tool.

Nurse Advisor - in support of the Nurse Advisor services.

Student/Education - to raise awareness.

Worcester Support Group - to facilitate activities for the group.

Glasgow Area - funds to support services in the Glasgow area.

Kay Kendall - grant towards non-staff costs of helpline services

Support Group West Midlands - to facilitate activities for support groups in the area

Support Group Durham - to facilitate activities for the group.

Support Group Taunton - to facilitate activities for the group.

Support Group Scotland - to facilitate activities for the groups in Scotland.

Counselling Fund - to support the activity of offering counselling to patients and family members affected by leukaemia

Travel Grant - to support people with the additional cost of travelling to hospital for treatment and monitoring appointments.

Support Group Glasgow & Aberdeen - to facilitate activities for support groups in these areas

Support Group South Shields - to facilitate activities for support groups in these areas

Support Group Leicestershire - to facilitate activities for support groups in these areas

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

24 Restricted funds (Continued)

Patient Support Worcestershire - to facilitate activities for support groups in this area

Birmingham Patient Conference - to assist with the cost of patient conference in Birmingham

Welfare & Advocacy Support - in support of advocacy and welfare advise

Belfast Hospital Support - in support of the costs in providing ward support

Bristol Hospital Support - in support of the costs in providing ward support

Staffing Costs - to support the employment costs of the Welfare and Advocacy Officers

Patient conferences/webinars - grants in support of conferences held in the year.

Care Helpline costs: this represents income received specifically to meet the costs of the Care line.

Support Groups - to facilitate activities for local support groups

Nurse e-learning - funds to support the advancement of knowledge in the nursing profession.

Buddy Scheme - one to one support for patients

West Midlands Hospital Support -to facilitate activities for local support groups

Digital support - to support digital and information projects

Support Group Cambridge - to facilitate activities for local support groups

Spot Leukaemia - to raise awareness of signs and symptoms of Leukaemia

CAR-T - offer grants and information to patients being treated with CAR-T.

AML information - Providing a new suite of AML information.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

24 Restricted funds (Continued)

AML Education - Education of Healthcare Practitioners and patients on AML testing.

Yorkshire Support - to facilitate activities and support in this area.

Wales Hospital Support - in support of costs in providing ward support.

Support Group Wales - to facilitate activities for support groups in this area.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

25 Designated funds Group and charity

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

		Move	ement in funds	5			
	Balance at 1 January 2021	Incoming resources	Resources expended	Transfers 1 、	Balance at January 2022	Transfers	Balance at 31 December 2022
	£	£	£	£	£	£	£
Fixed asset fund Strategic implemen-	875,003	-	-	(4,386)	870,617	8,934	879,551
tation fund	459,100	252,116	(494,706)	-	216,510	251,762	468,272
	1,334,103	252,116	(494,706)	(4,386)	1,087,127	260,696	1,347,823

Fixed assets fund: The Trustees have agreed to assign all tangible fixed assets held with the exception of any which have restrictions imposed upon them to a general fixed asset designated fund. This was done to ensure that the Charity will have suitable levels of reserves to meet future depreciation costs relating to these fixed assets and to recognise the fact that future depreciation charges will not directly affect the net operating capital of the Charity.

Strategic Implementation Fund: funds to support the implementation of the three year strategy adopted by the Trustees on 1 February 2023.

26 Analysis of net assets between funds Group and charity

	Unrestricted funds	Restricted funds			Restricted funds	Total
	2022	2022	2022	2021	2021	2021
	£	£	£	£	£	£
Fund balances at 31 December 2022 are represented by:						
Tangible assets	879,550	-	879,550	870,617	-	870,617
Investments	611,708	-	611,708	685,554	-	685,554
Current assets/(liabilities)	1,480,230	155,918	1,636,148	1,404,283	71,581	1,475,864
	2,971,488	155,918	3,127,406	2,960,454	71,581	3,032,035

27 Related party transactions

The charity received £71,012 (2021 - £nil) from the subsidiary undertaking under a Gift Aid arrangement. There were no other disclosable related party transactions during the year (2021 - none).

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2022

28 Subsidiaries

Details of the charitable group's subsidiaries at 31 December 2022 are as follows:

	Name of undertaking	Registered office	Nature of business	Class of shares held	% Held Direct Indirect
	Leukaemia Care Trading Limited	England & Wales Fundraising		Ordinary	100.00
29	Cash generated from oper	rations		202	2 2021 £ £
	Surplus for the year			82,73	1 44,217
	Adjustments for: Investment income recognised in statement of financial activities Loss/(gain) on disposal of investments Fair value gains and losses on investments Depreciation and impairment of tangible fixed assets Movements in working capital: (Increase) in stocks Decrease/(increase) in debtors Increase in creditors			(43,35) 7,079 70,14) 35,74	(21,249) 2 (15,328)
				(35,404 12,460 93,69	(101,139)
	Cash generated from/(abs	orbed by) opera	ations	223,094	(96,832) = =====

30 Analysis of changes in net funds

The charitable group had no debt during the year.