Prevent Breast Cancer

England & Wales · Charity number 1109839

Details

Other names	GENESIS BREAST CANCER PREVENTION APPEAL LIMITED, PREVENT BREAST CANCER LIMITED, THE GENESIS APPEAL COMPANY LIMITED, THE GENESIS APPEAL FOR GENE RESEARCH INTO BREAST CANCER
Status	Registered
Legal form	Charitable company
Company number	04831397
Registered	2005-06-03
Register	View on the Charity Commission register

Contact

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Activities

Objects: The advancement of health by the prevention of breast cancer for the public benefit worldwide but in particular in the United Kingdom by: - i. Funding research into the causes, prevention, detection and early diagnosis of breast cancer and that the results of the research are promoted and published for the public benefit;ii. Participating in, facilitating or supporting national and international research and development to overcome health inequalities in all aspects of breast cancer prevention among UK ethnic and cultural groups and to disseminate and share output from such programmes to improve breast cancer outcomes for these communities; iii. Informing, raising awareness, so that the public can learn and educate themselves by producing, disseminating and promoting important public health messages about breast cancer risks, symptoms, detection and treatment; iv. Supporting and raising awareness of technological and all other scientific, best practice and diagnostic advancements in breast screening including but not, limited to the support for the National Breast Imaging Academy; v. Providing pastoral services to support patients and their families affected by breast cancer, including but not limited to patient welcoming, orientation, break out spaces and refreshments at the breast screening unit; vi. Advancing all aspects of breast cancer prediction, detection, risk reduction, management, prevention and diagnosis; and vii. Advancing such other aspects of breast cancer prevention as medical and technological advances may recognise and develop in the future, as the trustees in their absolute discretion may determine.

Activities: To fund ground-breaking research into the prediction and prevention of breast cancer. Our four pillars of research are gene research, improved screening & early diagnosis, preventative drugs and diet & lifestyle. Our overall aim is to make breast cancer a preventable disease for our future generations.

Classification

- **How:** Makes Grants To Organisations, Provides Human Resources, Provides Advocacy/advice/information, Sponsors Or Undertakes Research
- **What:** The Advancement Of Health Or Saving Of Lives
- **Who:** The General Public/mankind

Geography

- **Area of benefit:** THE UNITED KINGDOM.
- Throughout England And Wales

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£2,169,572	£1,544,127	£2,313,030	18
2024-03-31	£1,472,692	£1,594,010	£1,669,709	14
2023-03-31	£1,448,751	£1,143,866	£1,728,828	13
2022-03-31	£1,130,017	£517,683	£1,459,093	12
2021-03-31	£672,068	£438,976	£841,453	12

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Trustees

Name	Role	Appointed
Eamonn O'Neal OBE DL	Chair	2022-02-14
CHRISTINE LEE-JONES		2012-11-29
Diana Harris		2014-04-10
Dr MARY WILSON		
Jane Humphris		2022-11-10
LESTER BARR		
Mark Sellers		2024-12-01
PAM GLASS		
Paul Topham		2024-03-18
Sandra Saleh		2020-07-28
Tammy Hopla		2025-01-01

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Prevent Breast Cancer

England & Wales - Charity number 1109839

Accounts



prevent breast cancer

Prevent Breast Cancer

Annual Report and Financial Statements

For the year ended 31 March 2025


prevent
breast
cancer
Using science to save lives

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NATIONAL
BREAST
More
lives saved
build to beat
breast cancer
prevent
breast
cancer
More
mammograms
build to beat
breast cancer
prevent
breast
cancer
preventbreastcancer.org.uk

A Message from our Chair

Dear Friends and Supporters,

I am delighted to share highlights from another remarkable year at Prevent Breast Cancer – a year defined by significant progress, renewed momentum in research, and the unwavering support of our incredible community.

One of our most exciting milestones this year has been the progress of the National Breast Imaging Academy, which will be completed in November 2025 and fully operational in early 2026. This achievement has only been possible thanks to the extraordinary generosity and commitment of our supporters, and we are truly grateful.

The main focus of the year has been our public appeal to raise the remaining funds required to complete the project. Thanks to the tireless work of our team and the unwavering support of our donors, we are delighted to announce that, as of September 2025, this goal was successfully reached.

The Academy will address the national shortage of breast imaging professionals by developing a sustainable and skilled workforce, equipped to meet both current and future screening demands. It will also enable faster diagnoses and earlier access to potentially life-saving treatment for thousands of patients, while serving as a hub for advancing research. You can read the full Academy update on page 22.

As a result of the capital campaign, very little was spent on new research during the year to 31 March 2025, as resources were prioritised for the Academy. However, a major highlight has been the return of **our research programme,** which lies at the very heart of our charity's purpose. Thanks to the success of our fundraising during the financial year, we were able to reopen our funding round in December 2024, with final decisions on supported projects made in June 2025. You can learn more about our research programme and new projects on pages 13-20.

We are also tremendously pleased to report that, during the year, we laid the groundwork for the establishment of the **Prevent Breast Cancer Research Unit (PBC-RU).** By centralising and expanding our research capabilities, training the next generation of prevention researchers, and strengthening leadership in cancer prevention, the PBC-RU will not only reinforce Manchester's position as a leading hub for breast cancer prevention but also contribute to global efforts to eliminate the disease.

While the funding for this major initiative falls into the new financial year, key discussions and planning took place during this period, with a final funding decision made in June 2025. We are excited to be working towards formally launching this important development later in the year. You can learn more about the PBC-RU on page 15.

Finally, we're also proud of the progress we've made in addressing health inequalities through our community outreach work. This year, our mobile **Community Breast Awareness Hub** (a converted horsebox) has been deployed across Greater Manchester, helping us connect with under-served communities. It provides a safe, approachable space where people can learn about breast health, ask questions, and access vital screening information. Read more about it on page 29.

On behalf of the Board of Trustees, I would like to extend our heartfelt thanks to everyone who supports Prevent Breast Cancer – from our volunteers and fundraisers to our patrons and ambassadors. Your passion, time, and generosity help bring our vision closer every day: **a future where breast cancer is preventable for generations to come.**

We are using science to save lives – and we couldn't do it without you.

With sincere thanks,

Eamonn O'Neal

Eamonn O'Neal (Dec 2, 2025 13:48:14 GMT)

Eamonn O'Neal OBE DL
Chairman of Trustees, Prevent Breast Cancer

Let’s get ahead of breast cancer

Breaking the cycle of breast cancer means thinking bigger.

That's why we're all-in on using science to save lives.

We're the only charity to focus all our research on the prediction, prevention and early detection of breast cancer.

About Us

The Need

- Breast cancer is the most common cancer for women in the UK[1].
- Each year, around 56,800 people in the UK are diagnosed with breast cancer[2].
- Around 11,500 people lose their lives to the disease[3].
- Breast cancer is one of the leading causes of death in women under 50 in the UK[4].
- Around 400 men are diagnosed every year[5].
- In the UK, incidence in women has increased by 24% in the last 30 years and are predicted to rise even further[6].
- In 2023, less than 5% of government healthcare spending was directed to the prevention and early detection of all diseases (excluding Covid-19)[7].
- We believe more needs to be done, which is why the research we undertake is absolutely vital.

Our Mission: Predict, Prevent, Protect

At Prevent Breast Cancer, we are the UK's only charity solely focused on breast cancer prevention research grounded in clinical practice. **Using science to save lives,** our mission is to make breast cancer a preventable disease for future generations by funding vital research into its prediction, prevention and early detection, so that no one has to go through it in the first place.

Headquartered in Manchester, we are a national charity supporting research projects across the UK. We are embedded within the University of Manchester, which informs our research and strategy as we work closely with researchers, clinicians, and data scientists. While independent of the NHS, we maintain strong partnerships with breast cancer services, including screening programmes and family history clinics, ensuring our research directly informs clinical practice and real-world patient outcomes.

Our research is focused on four key pillars: gene research, screening innovation, lifestyle and environmental risk factors, and preventative therapies.

Since becoming a registered charity in 1997, we have committed over £5.4 million in grants to clinical and laboratory research aimed at preventing breast cancer. This investment has driven major breakthroughs – from identifying previously unknown gene fragments linked to breast cancer, to transforming how screening is delivered.

Beyond research, we've invested over £744,000 in sharing our scientific findings with the national and international community, and a further £2.96 million in breast awareness initiatives, with a focus on tackling health inequalities and improving community health outcomes.

We are proud to be based at **The Nightingale Centre** at Wythenshawe Hospital, which we helped build with a £2 million fundraising campaign completed in 2007. Since then, we've contributed a further £2.46 million to its development, helping enhance both patient experience and staff support.

1. https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breast-cancer
2. https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breast-cancer
3. https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breast-cancer
4. https://breastcancernow.org/about-us/why-we-do-it/breast-cancer-facts-and-statistics/
5. https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breast-cancer
6. https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breast-cancer/incidence-invasive
7. https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthcaresystem/datasets/healthaccountsreferencetables

The Centre houses the Greater Manchester NHS Breast Screening Programme and the Family History Risk and Prevention Clinic, and it also serves as a base for many of our researchers. Their innovative clinical studies focus on accurately identifying women at higher risk of breast cancer, so that preventative interventions can be offered before cancer develops. Being based at the Centre also ensures access to a diverse cohort of participants, making our research stronger, more inclusive, and more impactful.

Public Benefit

Our Trustees are fully aligned with the Charity Commission's guidance on public benefit. Prevent Breast Cancer is dedicated not only to funding world-class research into the prediction, prevention, and early detection of breast cancer, but also to ensuring that the knowledge we generate translates into real-world impact.

We believe that prevention and early detection should be for everyone. That is why we invest significantly in community outreach, education and awareness campaigns, especially in under-served and marginalised communities where health inequalities are greatest. Our outreach programmes aim to improve understanding of breast cancer risk, promote early detection and empower individuals to take control of their breast health.

We also provide pastoral and practical support to patients and staff at The Nightingale Centre and we continue to invest in national infrastructure to support breast screening and prevention. This has included helping to establish the National Breast Imaging Academy which is addressing workforce shortages and helping to futureproof breast screening across the UK, improving outcomes for thousands of women each year.

Taken together, our research, education, outreach, and infrastructure investment ensure that the public benefit of our work is wide-reaching, inclusive, and long lasting.

Grant Making Policy

Prevent Breast Cancer funds high-quality research that advances the prediction, prevention, and early diagnosis of breast cancer. While we frequently support research teams based at The Nightingale Centre and the Manchester Breast Centre, we also actively welcome applications from institutions across the UK. We are a non-commercial partner of the National Institute for Health and Care Research (NIHR), ensuring our funding processes meet national standards of excellence. As of the 25th September 2025, Prevent Breast Cancer is an introductory member of the Association of Medical Research Charities (AMRC) and will be working towards full membership over the next two years.

All grant applicants are required to complete a Prevent Breast Cancer grant application form, which is submitted to our Scientific Advisory Board (SAB) for thorough assessment. The SAB is chaired by Professor Cliona Kirwan, Clinician Scientist in Surgical Oncology and Consultant Oncoplastic Breast Surgeon.

Each application is evaluated based on the scientific quality and innovation of the research plan, its relevance to breast cancer prediction, prevention and/or early detection, the potential public health impact, and overall feasibility and value for money. Projects that do not align with our mission or scientific standards are not considered for funding.

For funding requests over £30,000, applications are first reviewed internally by a SAB member who is independent of the project. If deemed suitable, they are then assessed by at least two external reviewers, also independent of Prevent Breast Cancer and the host institution. The reviewers complete formal assessments and provide scores and recommendations.

For requests between £10,000 and £30,000, the application is reviewed internally by three SAB members, all independent of the project. These proposals must clearly address one or more of our core research priorities: prediction, prevention, and/or early detection.

Requests for £10,000 and below (such as those for pilot studies, consumables, equipment or contributions to ongoing projects) are not sent for peer review. Instead, they are assessed by a SAB member for scientific and strategic fit, with final decisions made by the Board of Trustees.

All applications recommended for funding are presented to the Board of Trustees for final approval. Any SAB member with a conflict of interest is excluded from discussions and decision-making processes to maintain objectivity and transparency. While members of our SAB are eligible to apply for funding, they are not involved in the assessment, discussion, or approval of their own or competing applications during that grant round.

This rigorous and impartial system ensures that every project we fund has strong scientific merit and clear potential to prevent breast cancer and improve public health outcomes.


“We fund high-quality research that advances the prediction, prevention, and early diagnosis of breast cancer”

Charitable Activity

In 2025, Prevent Breast Cancer strengthened its work across three core areas of charitable activity: **advancing research, raising awareness,** and **promoting equity in breast health**.

We continue to fund world-class scientific research focused on understanding how to predict, prevent and ultimately stop breast cancer before it starts. Alongside this, our outreach and awareness programmes have expanded, helping more people recognise the signs and symptoms of breast cancer, understand their risk factors, and access screening at the right time.

A growing focus of our work is tackling health inequalities, ensuring that every individual, regardless of background, has equal access to information, screening and preventative care. Through targeted campaigns and deepening partnerships with community organisations, we are working to break down barriers, build trust and empower everyone to take charge of their breast health.

We spent £1,232,274 on Charitable Activity

Outreach and Awareness	£449,403
Patient Care and Services to the Centre	£298,784
Building the National Breast Imaging Academy	£239,787
Addressing Health Inequalities & Forever Manchester Grant	£108,148
Publicising and Disseminating Research	£82,647
Research Grants	£53,505

The charity holds

£1,553,828

as restricted income carried forward to 2025-2026 for future charitable expenditure.

Restricted reserves include:

£1,167,448
for the building of a National Breast Imaging Academy

£302,920
to fund Gene Research

£83,460
for our work to address health inequalities

Digital Impact

Our digital channels continue to play a vital role in spreading awareness, educating the public, and building a community around breast cancer prevention.



Over the past year, our website received **212,004 visits,** with homepage views increasing by 83% - a clear sign of growing engagement.



We published **49 blogs** – 16 more than last year, – covering everything from personal stories to the latest advances in prevention research.



On YouTube, our videos were watched **13.6K times.** The most popular videos were our expert-led content, such as breast checks with Professor Cliona Kirwan and conversations around male breast cancer with Rajiv Dave.



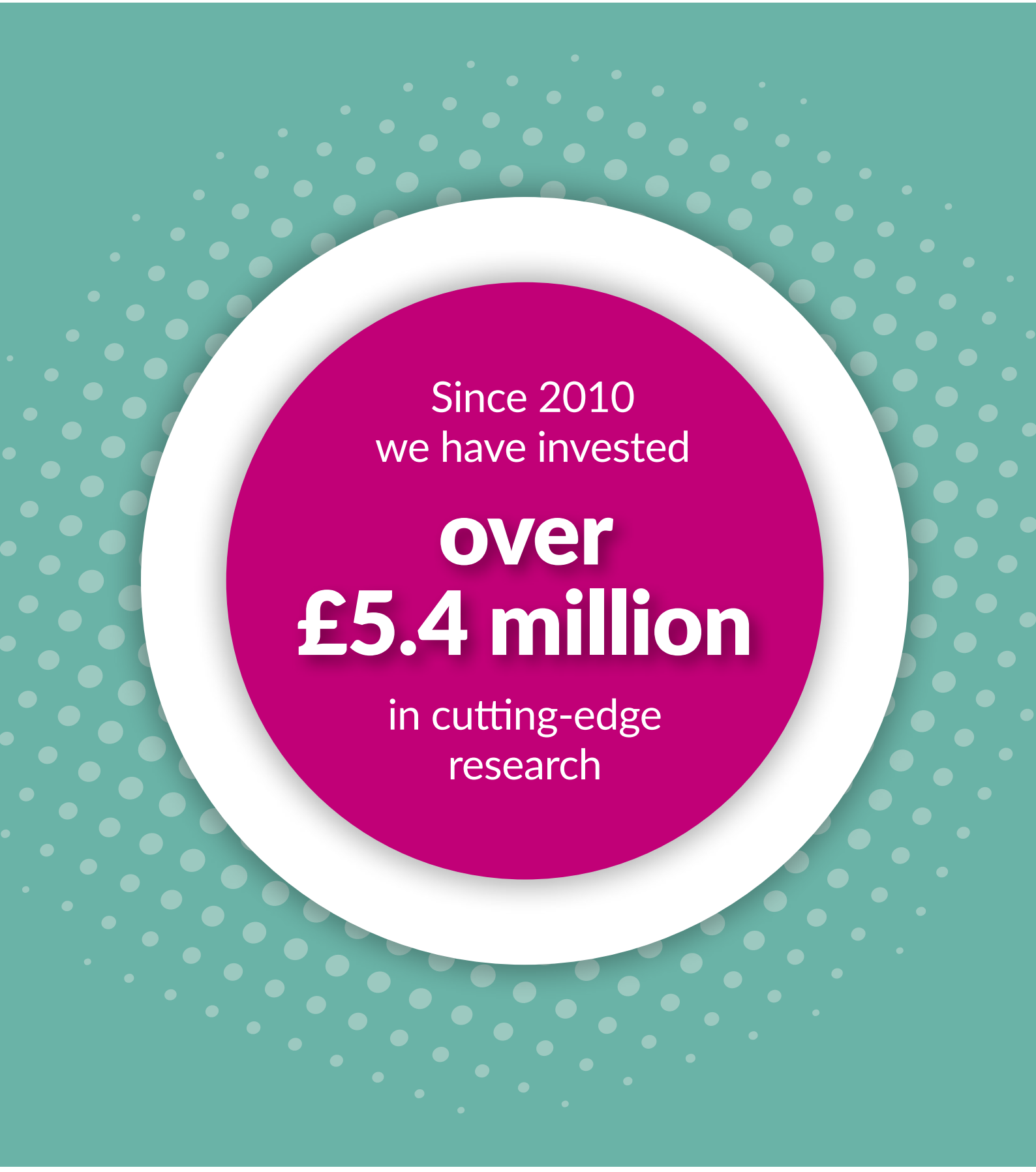
On Instagram, our most viewed reel came from a collaboration with Sculpt Activewear, celebrating ambassador Roisin Lawlor – garnering **25.5K views** and **over 500 likes.**

Other top performing reels included breast check guides, podcast partnerships and a powerful screening message from Patron Sally Dynevor.

We are incredibly grateful to our patrons and ambassadors, whose support across social media has helped us reach wider audiences and share essential messages around prevention.



Media coverage has also been strong, with **2267 pieces** of press across regional and national outlets including The Guardian, The Independent, BBC One North West and Granada Reports.


Since 2010
we have invested
over
£5.4 million
in cutting-edge
research

Research Programme



As fundraising for our priority project - the National Breast Imaging Academy - neared completion, we took the important step of re-opening our research funding programme, reaffirming our core mission and supporting a new wave of innovative studies across the UK.

We fund research from leading academic institutions nationwide, building a collaborative network of scientists, clinicians, and health professionals working together to stop breast cancer before it starts.

Our Philosophy

Prevent Breast Cancer is proud to lead the way in breast cancer prevention research in the UK. Unlike many organisations focused on treatment, we are the only UK breast cancer charity entirely dedicated to prevention.

We believe that prevention is better than cure – not just because it saves lives, but because it spares individuals and families from the trauma of diagnosis, surgery, chemotherapy, and long-term treatment side effects. Our work centres around the idea that no one should have to hear the words “you have breast cancer” and we are using science to make that vision a reality.

Our Strategy and Goals

Breast cancer is a complex disease with many contributing risk factors: genetic, lifestyle, environmental and biological. Our strategy focuses on tackling each of these risk factors through a coordinated, evidence-based approach – simply put, using science to save lives.

We structure our research around four strategic pillars, each addressing a critical area of prevention, with clear goals looking ahead to 2030.

Gene Research

Understanding genetic risk is fundamental to predicting who is most likely to develop breast cancer. We investigate major gene mutations, such as BRCA1 and BRCA2, and tiny gene variations called SNPs that significantly impact breast cancer risk. Our research also explores the genetic links to breast density, a key biological risk factor, to improve risk prediction even further. This knowledge allows us to offer tailored prevention strategies to those at greatest risk.

Our goals to 2030:

- Identify all remaining undiscovered high-risk and intermediate-risk genes
- Identify all genetic variations (SNPs) linked to breast cancer across every ethnic group and community
- Develop new tests for risk prediction, such as polygenic risk scores and new biomarkers

Screening & Early Detection

Screening is one of the most powerful tools we have to save lives – especially when it detects breast cancer at its earliest, most treatable stage or identifies precancerous changes before disease develops. We aim to improve the accuracy and effectiveness of the UK breast screening programme and champion personalised, risk-adapted screening. By assessing someone's individual risk – including genetic factors, breast density and lifestyle – screening frequency can be tailored, ensuring that high-risk women are monitored closely and low-risk women are not over-screened.

We are also developing better approaches for women with dense breast tissue, which can make cancers harder to detect on standard mammograms, and creating tools to support earlier diagnosis in these women.

Our goals to 2030:

- Improve screening accuracy through new technology
- Understand why breast density raises cancer risk and improve screening for women with dense breast tissue
- Develop tools that accurately predict individual breast cancer risk
- Personalise screening based on individual risk profiles
- Develop new approaches for screening and prevention for under-50s
- Increase uptake by working with grassroots community partners

Lifestyle & Environmental Risk Factors

Our research investigates how changes in diet, exercise, alcohol consumption, weight, and other factors can reduce risk. We are also exploring whether lifestyle or medical interventions can lower breast density, potentially reducing risk and improving screening effectiveness.

Our goals to 2030:

- Uncover mechanisms linking lifestyle and risk
- Develop evidence-based risk reduction programmes including diet, exercise and lifestyle interventions
- Discover biomarkers for risk response

Preventative Drugs

For those at higher risk, certain medications can reduce the likelihood of developing breast cancer. We support trials assessing the effectiveness of both new and existing risk-reducing drugs, such as tamoxifen and anastrozole. We also investigate how these drugs influence breast density, both as a mechanism for risk reduction and as a potential biomarker for response, helping identify more effective and better-tolerated preventative options.

Our goals to 2030:

- Develop models for testing new or repurposed preventative medications
- Support robust clinical trials of promising preventative drugs
- Promote awareness of current risk-reducing treatment options

Together, these four pillars form a comprehensive and interconnected strategy for stopping breast cancer before it starts. By embedding emerging research, including the role of breast density, into all aspects of prevention, we are making meaningful progress toward a future free from breast cancer.

Introducing the Prevent Breast Cancer Research Unit (PBC-RU)

We are excited to announce the creation of the Prevent Breast Cancer Research Unit (PBC-RU) - a major step forward in our mission to prevent breast cancer.

Launching in 2026, this virtual unit will bring together our city's world-class scientists, clinicians, and data infrastructure to create the UK's leading hub for breast cancer prevention research. The PBC-RU will:

- Consolidate vast data and breast tissue sample collections from more than 85,000 women
- Lead new studies to improve screening, lifestyle intervention, and risk prediction
- Train the next generation of researchers through PhD and post-doctoral opportunities
- Collaborate globally, ensuring our work benefits women everywhere

The PBC-RU will be central to our future research strategy, providing focus, coordination, and investment to the most promising areas of prevention science. Its work will ensure the long-term sustainability and amplify the impact of breast cancer prevention research led from Manchester.

Research Resources

Prevent Breast Cancer is uniquely positioned to drive forward prevention research through our location, strong collaborative networks, and significant investment in infrastructure and resources:

- The Nightingale Centre – a leading NHS Screening & Diagnostic Centre and home to the largest Family History Clinic in the UK
- Manchester Breast Centre – a virtual hub across Manchester institutions uniting experts in prevention and early detection
- National Breast Imaging Academy – addressing workforce shortages and futureproofing UK breast screening
- Prevent Breast Cancer Research Unit (PBC-RU) – a world-class hub combining clinical, imaging, and genetic data with leading researchers to accelerate prevention research, support personalised risk prediction, and drive breakthroughs in breast cancer prevention



Previously Funded Research Projects: Updates

The following projects were funded in our 2022 grant round and have continued to make significant progress in advancing breast cancer prevention, risk prediction, and early detection:

Improving Risk Prediction for Young Women with Breast Cancer

Project Lead: Dr William Tapper, University of Southampton.

Young onset breast cancer (YOBC) is typically more aggressive and presents different risk factors than breast cancer in older women yet remains poorly understood. This study aims to improve risk prediction for younger patients by developing a polygenic risk score (PRS) tailored to their unique genetic profiles. Researchers are investigating the relationship between inherited DNA variations and tumour-infiltrating lymphocytes or TILs (immune cells known to influence treatment response).

Dr Tapper's team has now genotyped DNA samples from 2,811 women with YOBC, analysing over 1.5 million genetic variants. They also updated long-term health records for these patients, capturing outcomes over an average of 17 years. The next phase will involve assessing existing PRSs and developing a new, more accurate version optimised for younger women. The study also aims to identify genetic variants linked to immune activity in tumours, opening the door to more personalised, immune-based prevention and treatment strategies.

The Search for Hidden Mutations in Familial Breast Cancer

Project Lead: Dr Miriam Smith and Dr Emma Woodward, University of Manchester. Part of the Doctor Alan H. Gowenlock PhD Studentship Award.

Despite the discovery of key breast cancer genes like BRCA1 and BRCA2, many families with a strong history of breast and ovarian cancer still receive negative results from standard genetic testing. This project aims to uncover the mechanism of action of cancer-causing mutations in non-coding regions of DNA, areas once considered "junk" but now known to play vital roles in gene regulation.

Our PhD student completed a comprehensive literature review of published BRCA1 variants, in addition to novel variants identified in the clinical laboratory in Manchester, soon to be submitted as a scientific publication. We have screened the promoter of the ATM gene to see if a similar mechanism might occur in other known breast cancer genes, but so far ATM does not seem to have this type of mutation.

The project has also involved working closely with the University's Genome Editing Unit to develop cell models using CRISPR technology to create a breast tissue derived cell line containing the specific non-coding mutation that will allow us to study previously unexplored mechanisms of inherited breast cancer predisposition.

By identifying hidden mutations that escape standard tests, this research could lead to more accurate genetic screening, earlier diagnosis for high-risk families, and the discovery of new targets for breast cancer prevention and treatment.

Predicting the Impact of Risk-Adapted Screening Using Microsimulation

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

This project is harnessing the power of microsimulation, a computational tool used to test complex screening strategies, to predict the outcomes of risk-adapted breast cancer screening in the UK. Specifically, the team is focused on women with dense breast tissue, who are at higher risk of developing breast cancer but less likely to benefit from standard mammography alone.

After gaining access to OncoSim-Breast, a leading Canadian microsimulation platform, the team is adapting it for NHS screening scenarios and conducting a detailed literature review to update key parameters. The next steps will involve validating the model with UK screening data, integrating patient and public input, and simulating a range of risk-based screening strategies. The findings will help guide future NHS policy and could significantly improve early detection for women at greatest risk.

Human Breast Tissue Explant Model for Prevention Research

Project Lead: Dr Hannah Harrison, University of Manchester.

Animal models have long dominated preclinical breast cancer research, but they often fail to replicate the complexity of human breast tissue. This project is developing a human tissue explant model as a more accurate, ethical, and personalised alternative for testing breast cancer prevention strategies.

Over the past year, the team has significantly extended the model's lifespan and refined a multi-colour imaging system to assess changes in tissue structure and response to drugs. They have observed a previously undocumented tissue reaction to oestrogen and successfully tested tamoxifen within the model. The explant system is now contributing to larger studies, including a £600,000 Cancer Research UK-funded project and work on BRCA1-related prevention.

Next steps include validating the model against real-world patient outcomes and testing new preventive agents. This innovative tool could transform how we evaluate prevention strategies, leading to safer, more effective options for women at high risk of developing breast cancer.

Dragon's Den Projects: Updates

At our Research Conference in September 2024, researchers pitched their ideas in a Dragon's Den-style session for the chance to secure up to £10,000 in funding. Five innovative 12-month pilot projects were selected for support, each aiming to advance the prevention or early detection of breast cancer.

Funding was awarded to the first three projects during the 2024–25 financial year. The remaining two projects will receive funding in 2025–26, with work due to begin later this year.

Projects Funded in 2024-25

Empowering Women with Learning Disabilities: Breast Cancer Awareness Workshops

Project Lead: Jenny Jones, Greater Manchester Cancer Alliance.

Women with learning disabilities are significantly less likely to attend breast screening appointments and are more often diagnosed at later stages. This 12-month pilot aims to reduce those inequalities by delivering 10 co-produced, accessible breast cancer awareness workshops across Greater Manchester. Led by Pathways Associates, Manchester not-for-profit Community Interest Companies (CIC) and key community partners, the project will use easy-read resources, interactive teaching and peer involvement to build understanding, reduce stigma, and increase screening confidence. The pilot will involve up to 100 women and create a replicable model for addressing health disparities in cancer prevention.

Following development of an accessible training package, the first workshops began in May 2025, with early sessions revealing a broader need for breast health education, prompting the team to widen the target age group to include women aged 18 and over.

Repurposing Existing Drugs for Breast Cancer Prevention

Project Lead: Dr Hannah Harrison and Anthony Wilby, University of Manchester and the Manchester Breast Centre.

This study explores a faster route to new prevention therapies by testing existing drugs using an advanced breast tissue explant model that accurately reflects the structure and hormonal environment of normal breast tissue. The team will assess compounds targeting metabolic, endocrine, and nerve signalling pathways to identify those that reduce cell proliferation or improve tissue health. By repurposing known drugs, the research could accelerate the discovery of safer, more effective options for high-risk women, while also generating data to support larger-scale studies and personalised prevention strategies.

Targeting Tissue Stiffness: A New Approach to Breast Cancer Prevention

Project Lead: Dr Bruno Simões, University of Manchester and the Manchester Breast Centre

Dense breast tissue, a known risk factor for breast cancer, is linked to increased tissue stiffness, but the biological mechanisms behind this association are still not well understood. This pilot study will use 3D breast organoids grown in soft and stiff collagen

matrices to mimic the mechanical conditions of dense and less-dense breasts. Researchers will use single-cell RNA sequencing, a technique that lets scientists see which genes are active in individual cells, to examine how matrix stiffness affects gene expression and cell communication, aiming to uncover new biological pathways that could be targeted for prevention, particularly for women with high breast density.

So far, we have successfully established organoid cultures from normal breast samples under soft and stiff matrix conditions and are currently preparing samples for single-cell RNA sequencing data. Preliminary analyses suggest matrix stiffness induces distinct transcriptional responses with potential implications for early transformation pathways.

Projects Funded in 2025-26

National Family History Study Day

Family History Clinics support thousands of women at moderate to high risk of breast cancer, yet services remain fragmented and underrepresented in national prevention research. With the support of Prevent Breast Cancer, the National Breast Imaging Academy, the Association of Breast Surgeons, and Breast Cancer Now, Consultant Breast Surgeon Ramsey Cutress (University of Southampton) is developing a national network of clinics to improve coordination and research participation. A key milestone in this initiative is the Family History Clinic Study Day in early 2026, hosted by Prevent Breast Cancer. Subsidised places will enable geneticists, surgeons, oncologists, and nurses from across the UK to attend, marking a vital step toward more unified, evidence-based care for women with a family history of breast cancer.

Pilot Study: Using Breast Milk in Early Breast Cancer Detection

Project Lead: Dr Niki Flaum, University of Manchester

This pilot project explores the potential of breast milk as a safe, non-invasive tool for detecting early signs of breast cancer in women with a high genetic risk who are pregnant or breastfeeding, groups currently under-served by traditional screening methods. The study will examine whether cancer-associated DNA can be reliably detected in breast milk, assess women's attitudes towards this method, and establish infrastructure for future research, including a participant registry and biobank. If successful, this novel approach could lead to earlier detection during a critical and currently inaccessible period.

New Research Projects

In December 2024, Prevent Breast Cancer launched its latest funding round, inviting applications for innovative research projects focused on breast cancer prevention across our four research pillars.

At the Trustees Meeting in June 2025, a decision was made to award funding to three exciting new projects, in addition to the Prevent Breast Cancer Research Unit. Full details will be shared in next year's report but below is a short summary of each project.

Supporting Newly Identified BRCA Carriers Through Prevention

Lead Researcher: Professor Michelle Harvie, University of Manchester and Manchester University NHS Foundation Trust.

This 24-month research project focuses on women who have recently learned they carry a BRCA1 or BRCA2 gene mutation through the NHS Jewish BRCA population testing programme. The project will explore how these women – many of whom are without a known family history – respond to their risk and make decisions about prevention. The findings will inform future clinical guidelines to ensure support and advice are tailored to this growing group.

Preventing Breast Cancer Through Breastfeeding: Identifying Early Genetic Risk Markers

Lead Researcher: Professor James Flanagan, Imperial College London

Using breast milk samples from 300 women, this 12-month study will investigate whether breastfeeding helps clear early cancer causing mutations from the breast. The goal is to improve early risk detection and strengthen the evidence behind breastfeeding as a protective factor.

Improving Equitable Access and Uptake of Breast Cancer Preventative Medications through Telehealth Innovations

Lead Researcher: Professor Juliet Usher-Smith, University of Cambridge

This 16-month pilot study will adapt a successful Australian telehealth model for UK use, offering remote support to women at higher risk. The aim is to increase uptake of preventive medications by removing access barriers and supporting informed decision-making.

Research Plans for 2025-26

The newly funded projects and the Prevent Breast Cancer Research Unit (PBC-RU) will form the foundation of our research strategy for the coming year. Alongside this, we are preparing to reopen our funding round in 2026 to ensure a strong pipeline of new projects for 2026–27.

A major highlight will be the Prevent Breast Cancer Research Conference 2026, which will bring together experts from across the prevention landscape to share knowledge, build partnerships, and inspire innovation.

Research Conference 2026

Prevent Breast Cancer's Research Conference will return on 3–4 March 2026, taking place at the Treehouse Hotel, Manchester. Building on the success of our 2024 event, the conference will bring together leading researchers, clinicians and advocates to share cutting-edge developments in breast cancer prevention, early detection and risk reduction.

A key feature of the conference will be the return of the Dragons' Den live grant-making session, offering researchers the chance to pitch their ideas for up to £10,000 in pilot funding. We will also welcome submissions for a Poster Session, providing a platform for emerging findings and fostering peer-to-peer exchange.

The Research Conference continues to play a central role in our strategy, driving collaboration, sparking innovation, and accelerating progress toward a future where breast cancer can be stopped before it starts.





The National Breast Imaging Academy

More mammograms, more research, more lives saved.

In 2025, the UK's first multidisciplinary breast imaging academy became a reality. Based at The Nightingale Centre in Manchester, the National Breast Imaging Academy is a major milestone in our mission to futureproof breast cancer screening and diagnosis.

Recognising its critical role, Manchester University NHS Foundation Trust and their charity advanced the funds to begin construction in November 2024, while Prevent Breast Cancer continued to fundraise the remaining shortfall. At the time of writing, construction is on track to be completed in November 2025, with the building expected to be fully operational by early 2026. Thanks to the dedication of our team and the generosity of supporters, we reached our fundraising milestone in September 2025.

Meeting Urgent National Need

Breast cancer remains the most common cancer for women in the UK, with nearly 57,000 people diagnosed annually – over 155 each day – and around 11,500 lives lost every year.

Worryingly, incidence rates have risen by 24% over the last 30 years and are expected to rise further. Meanwhile, demand for breast screening is increasing while workforce shortages continue to threaten timely diagnosis. Nationally, nearly 10% of breast radiologist and radiographic posts remain vacant, contributing to long waiting times and even the closure of services in some areas, including three centres in Greater Manchester.

Workforce shortages are expected to grow, with a predicted 40% shortfall in breast radiologists alone by 2028. Without intervention, the NHS risks losing its ability to deliver timely, high-quality breast imaging services.

A Solution Built to Last

The newly built National Breast Imaging Academy, an extension to The Nightingale Centre, is designed to address these challenges head-on. As the UK's first purpose-built, multidisciplinary breast imaging training centre, the Academy will:

- Provide world-class, cost-effective training in state-of-the-art facilities
- Raise awareness and increase uptake of careers in breast imaging
- Offer apprenticeship routes to widen access and diversify the workforce
- Enable faster diagnosis by reducing screening backlogs
- Expand capacity for breast cancer research and innovation
- Train a sustainable workforce to meet national demand now and in the future

The Academy is now a powerful hub for screening, diagnosis, training and research. The new facilities allow an additional 13,000 patients to be seen each year for breast screening and significantly expand the UK's capacity to train and retain the next generation of specialists.

Delivering National Impact

Even before the new building opened, the National Breast Imaging Academy had already made a tangible impact through its online programmes. Since 2019, the Academy has been delivering virtual training and national workforce support, including:

- Standardised training for mammography associates, with around 300 enrolled to date and over 200 now qualified
- Support for 35 breast radiology fellows and 25 breast clinician trainees
- A comprehensive e-Learning for Healthcare programme, featuring 157 sessions covering all aspects of breast imaging
- Annual study days and specialist courses, attended by around 200 professionals each year

These efforts are already paying off. According to NHS England's 2023 workforce survey:

- The number of mammography associates and assistant practitioners increased by 11%
- The number of consultant breast radiologists rose by 12%
- The number of breast clinicians grew by 23%

These promising figures show that the Academy is already playing a pivotal role in strengthening the UK's breast imaging workforce and ensuring more people have timely access to high-quality care.

A Cost-Saving and Life-Saving Investment

NHS England has committed £11 million in revenue funding for the Academy over the past six years, including support for staffing and specialist medical equipment. It is also projected that the Academy will save the wider health economy £50 million over the next decade by reducing late diagnoses, streamlining training, and improving workforce retention.

Just as importantly, the Academy benefits the local economy by creating jobs and offering new career pathways in healthcare through apprenticeships and outreach.

But above all, the National Breast Imaging Academy is about saving lives by ensuring that more people receive an early, accurate diagnosis and faster access to potentially life-saving treatment.

With Special Thanks

We are incredibly grateful to every Trust and Foundation that contributed to the National Breast Imaging Academy appeal. Your generosity has helped turn this vision into a reality – one that will save lives for generations to come.

We would like to extend our deepest thanks to those who made especially significant contributions:

Major Supporters

- Garfield Weston Foundation
- Sir Jules Thorn Charitable Trust
- Beaverbrooks Charitable Trust
- Denise Coates Foundation for the funding the National Breast Imaging Academy Training Suite, enabling the Academy to significantly expand its course offerings
- Patron Margo Cornish and the BooBee Ambassadors
- Louise Stephenson and LCAP Empowering Women's Network

We are also sincerely thankful to the following supporters whose generous donations played a vital role in helping us reach our target:

The Golden Bottle Trust, The Michael Cornish Charitable Trust, Medicash Foundation, The Houghton Dunn Charitable Trust, Lord Leverhulme's Charitable Trust, Sarah's Trust, Alliance Family Foundation Limited, The Hospital Saturday Fund, The Hoover Foundation, Jack Livingstone Charitable Trust and Henhurst Charitable Trust.

To all who gave, at every level, thank you for your belief in our mission to prevent breast cancer for future generations and for making this life-saving building possible.

Supporting Patients and Professionals at the Nightingale Centre

Each year, the Nightingale Centre and Prevent Breast Cancer Research Unit welcomes thousands of people through its doors: approximately 18,500 new patients referred by their GP after presenting with symptoms, 13,000 follow-up patients, and 2,600 patients attending the Family History Clinic, many accompanied by their loved ones. The Centre is also home to over 100 NHS staff.

We recognise that attending hospital appointments can be a daunting experience. That is why, as a charity, we have invested in non-clinical spaces within the Centre to make each visit as calming and supportive as possible. Two key features are our coffee bar and gift shop, both of which also play an important role in raising funds and awareness.

Coffee Bar

14,784 hot drinks served – a 14% increase from the previous year.

The coffee bar continues to be a vital part of the Centre's welcoming environment. Open weekdays from 9.30am to 4pm, it provides refreshments and comfort to patients, families, and staff alike. In the past year, coffee bar income reached £72,541 marking a 11% increase from the previous year. Beyond financial contribution, it offers visitors a moment of normality in an otherwise anxious time.

Gift Shop

Our on-site and online Gift Shop continues to play a valuable role in supporting our fundraising efforts and engaging patients, visitors and supporters. Offering a thoughtfully curated range of homeware, greeting cards, Christmas cards, and branded products, the shop generates vital income for our work.

This year, nearly 12,400 items were sold across our physical shop, website and at fundraising events, contributing to total sales of £50,007, an increase of 10% on the previous year.

Beyond fundraising, the Gift Shop provides a warm and welcoming space that offers comfort and distraction for those attending appointments, while also helping to raise awareness of our mission to prevent breast cancer for future generations.



New Merchandise: Our Boob Sketches Collection

In 2024, we proudly launched our Boob Sketches collection - an inspiring range of merchandise designed using hand-drawn illustrations by women affected by breast cancer. The collection features mugs in three colourways, t-shirts and tote bags, each printed with unique sketches that celebrate breasts of all shapes and sizes, alongside a gentle reminder to always check yours.

Breast cancer does not discriminate – it can affect anyone, regardless of gender, age, ethnicity, or background. Our goal is to spark open, everyday conversations about the importance of regular self-checks, attending screenings, and understanding your family history. Something as simple as chatting over a mug of tea or a compliment about your new t-shirt can be the start of a life-saving conversation.

Every purchase supports our vital research into breast cancer prevention. Whether it is a tote on your shoulder or a mug in your hand, we hope these pieces start conversations and help more people become breast aware.

The boob sketch t-shirts were our highest selling product from April 2024 to April 2025, raising over £2,100 towards our vital work. We plan to build upon this collection and soon will be offering jumpers, pens and water bottles in 2025. Other top selling items were our charity pin badges, Christmas jumpers and ever-popular Christmas cards.



Our Amazing Volunteers

At the heart of Prevent Breast Cancer is a dedicated team of volunteers who bring compassion, warmth and a personal touch to everything they do. Many have been personally affected by breast cancer, giving their roles a deep sense of purpose and empathy.

Our Centre-based volunteers play a vital part in the daily life of The Nightingale Centre, They serve coffee with a smile in our cafe, offer kind words at the gift shop and lend a hand in the office, all of which helps transform the Centre into a warm, welcoming place for patients, families and staff. Their consistent presence brings comfort and connection to people facing what can be a difficult and emotional time.

> "Volunteering at the Nightingale Centre is one of the most rewarding things I've ever done. Whether I'm helping someone find a moment of calm over a cup of coffee or simply offering a friendly face, I feel proud to support such an important cause."
>
> **Jan Langer, Volunteer since 2018**

> "It's amazing to know that even small actions can make a big difference to someone's day."
>
> **Val Hoffman, Volunteer since 2015**

Equally vital are our numerous event volunteers and ambassadors, whose energy and enthusiasm help bring our fundraising efforts to life across the year. They represent the charity at a wide range of activities and are instrumental in the success of key campaigns and events, including:

- The Christmas Celebration at Manchester Cathedral
- Paint Towns Pink and other October Awareness Month initiatives
- Bucket collections, bag packing and other fundraising events

We are incredibly proud of each and every single volunteer, many of whom give their time week in, week out. Whether supporting patients in The Nightingale Centre or engaging the public at events, they play a crucial role in driving forward our mission to create a future free from breast cancer.

To all our volunteers: thank you for being the strength behind our mission.



Outreach and Awareness

Each undiagnosed case of breast cancer represents a life potentially saved through early detection. At Prevent Breast Cancer, we are dedicated to ensuring that every individual has the knowledge and resources needed to detect breast cancer as early as possible.

Why Early Detection Matters

Early diagnosis can be the difference between needing a lumpectomy and facing intensive treatments like chemotherapy or radiotherapy. According to NHS data, for every 500 women screened, one life is saved[8] and in 2023-24 alone, nearly 16,700 cases were detected through screening[9]. Awareness of breast cancer signs, symptoms, risk factors, and prevention strategies can be life-saving – and that is exactly why our work matters. All our outreach and awareness activities continue to play a vital role in our mission to prevent breast cancer for future generations, one conversation at a time.

8. https://breast-screening.uhsm.nhs.uk/home.aspx
9. https://digital.nhs.uk/data-and-information/publications/statistical/breast-screening-programme/england---2023-24

Highlights from This Year



Health Hour Talks

Between April 2024 and March 2025, we delivered 60 Health Hour talks to schools, workplaces and community groups across the UK, reaching over 2,000 people both in person and online. These sessions offered more than just information; they provided practical, empowering education on breast cancer signs, symptoms, risk factors, the importance of early detection, and the groundbreaking research being led by Prevent Breast Cancer.

Our engaging, conversational approach encourages open dialogue and lasting awareness, helping people feel informed, equipped and motivated to take charge of their breast health.

Feedback from our Health Hour talks has included:

"The content was incredibly informative and equipped attendees with the knowledge and information to help them detect and understand breast cancer in more detail. It was fantastic to see male breast cancer included too."

"Struck the right tone between being informative but not overloading us all with information."

"Many women were moved and inspired by the work that Prevent Breast Cancer does and will now be more vigilant about their breast health."



Student Challenge and Schools Engagement

Empowering the next generation with knowledge about breast health is a key part of our outreach work. Through our ongoing Student Challenge campaign, we engage young people in schools and sixth form colleges to raise awareness around breast cancer prevention, while encouraging them to become advocates within their own communities.

Our community team regularly visits schools to deliver interactive breast health talks and support students taking part in the challenge. In September 2024, we hosted a School Conference at The Nightingale Centre, offering students the opportunity to tour the facility, learn about the NHS breast screening programme, and hear directly from the researchers and clinicians working at the forefront of breast cancer prevention research.

We are continually inspired by the enthusiasm and commitment of these students, who are not only helping to spread life-saving awareness messages but are also raising vital funds to support our work.



BooBee Bus Awareness Campaign

In November 2024, our iconic pink BooBee Bus Awareness campaign returned to the streets of Greater Manchester – this time with two eye-catching buses and a new partnership. Teaming up with Make 2nds Count, a charity dedicated to supporting women with secondary breast cancer, we jointly delivered an impactful public awareness campaign that highlighted both early detection and the often overlooked realities of secondary breast cancer.

Over the course of two weeks, the BooBee Bus campaign visited a range of high-footfall locations, including supermarkets, shopping centres and Manchester city centre. Supported by our brilliant BooBee ambassadors (women personally affected by breast cancer) the campaign created a powerful talking point to spark meaningful conversations about vital breast health information.

What We Delivered:

- Face-to-face conversations about breast awareness, signs and symptoms, and the importance of early detection.
- Open dialogue about secondary breast cancer, helping to dispel myths and raise awareness of its signs and challenges.
- Peer support and storytelling from BooBee ambassadors, making information more relatable and memorable.
- Distribution of breast checking cards, screening information and symptom leaflets which including content focused on secondary breast cancer.
- Free, stigma-free engagement in everyday settings, encouraging those who might not otherwise access health information.

> "This is a really important campaign that's driving awareness of the importance of spotting the signs of breast cancer early."
>
> **Marcella M'Rabety, Head of Social Sustainability, Manchester Airports Group**

Why It Matters:

For many people, a casual conversation on the street can be the catalyst for attending a screening, seeking medical advice, or learning about a condition they had never heard of. By taking breast health awareness directly to the public (rather than waiting for people to come to clinics) the BooBee Bus campaign continues to remove stigma, build trust, and spark early action.

Thank You

This powerful outreach initiative would not have been possible without the passion and generosity of Patron Margo Cornish, Manchester Airports Group, Smooth Radio, our amazing BooBee ambassadors and our valued campaign partners Make 2nds Count.

Our Community Breast Awareness Hub

Our Community Breast Awareness Hub represents a bold step forward in our mission to reach communities where breast screening uptake is low. This refurbished and branded horsebox has been transformed into a warm and welcoming mobile unit offering free teas, coffees, tote bags and pens to spark conversation and raise awareness about breast health.

Launched in May 2024, the hub travels across Greater Manchester, parking up in neighbourhoods where access and awareness are often limited.

> "One of the most exciting parts of my role has been launching our Community Breast Awareness Hub, a reconditioned horsebox turned mobile coffee shop, to bring breast cancer awareness directly into the heart of communities.
>
> Our event at ASDA Longsight was a fantastic celebration of conversation, connection and breast health. Thanks to our multilingual team, we engaged with people from all walks of life, proving that no one is hard to reach when you meet them where they are."
>
> **Azra, Health Inequalities and Community Engagement Officer**

From major events like the South Asian Mega Mela to pop-up visits across local communities, we are using this space to encourage meaningful conversations, build trust, and even offer behind-the-scenes tours of mobile screening vans, helping to demystify the screening process and encourage informed decisions about breast health.

Together, we are changing how and where breast cancer awareness happens, bringing support to the people who need it most.





Health Inequalities

Our awareness campaigns are reaching thousands, but not everyone has the same opportunity to act on what they learn. That is why tackling health inequalities is at the heart of our mission.

We are grateful to Forever Manchester and NHS Charities Together, whose generous grant has supported our efforts to reach underrepresented communities with life-saving breast health information across Greater Manchester. In communities where screening uptake is low and barriers to early diagnosis remain high, we take a more tailored, culturally sensitive approach to ensure no one is left behind.

What are Health Inequalities?

Health inequalities are avoidable, unfair, and systematic differences in health outcomes and experiences between different groups of people. These disparities often stem from factors such as income, ethnicity, education and geography, and they persist because of unequal access to healthcare, variation in quality of care, and broader social and economic inequalities.

In the context of cancer, health inequalities show up as differences in:

- Risk of developing cancer
- Likelihood of early diagnosis
- Access to, and experience of, treatment and care
- Representation in clinical research and the healthcare workforce[10]

Our Commitment

At Prevent Breast Cancer, we believe everyone, regardless of their background, ethnicity or postcode, deserves an equal chance at early diagnosis, treatment, and survival.

While breast cancer does not discriminate, access to awareness, screening and care still does. Women from ethnically diverse and socially deprived communities often face complex barriers to early detection, and the consequences are stark:

- Women in the most deprived areas have a 17% higher mortality rate[11]
- Black African and Caribbean women are more likely to receive late-stage diagnoses[12]
- Black and South Asian women have lower survival rates than white women[13]
- In Manchester, 60% of breast cancer patients come from socially deprived groups[14]

These statistics reflect lived realities that cannot be ignored.

10. Tackling Health Inequalities - Greater Manchester Cancer - https://gmcancer.org.uk/tackling-health-inequalities-2/
11. https://digital.nhs.uk/data-and-information/publications/statistical/cancer-registration-statistics/england-2020/deaths-from-cancer-increased-with-deprivation?__cf_chl_tk=YnT3eClc8TxWBXwjjgsRIi97QJ_ZhFTG.bXtHmJeVWE-1732188218-1.0.1.1-AW.n.u7FIyhv7jVITkVd6UEUwoO1IXJfDIwpziCom2w
12. https://news.cancerresearchuk.org/2023/01/27/new-analysis-reveals-black-women-in-england-more-likely-to-be-diagnosed-with-late-stage-cancer/
13. https://breastcancernow.org/support-for-you/breast-cancer-in-ethnic-communities/
14. https://democracy.manchester.gov.uk/documents/s5444/Thematic%20report%20on%20Cancer%20Prevention%20Treatment%20and%20Care%20in%20Manchester.pdf

Our Approach: Community First

We recognise that addressing health inequalities is not about ticking boxes. It is about building trust, meeting people where they are and truly listening to their concerns. Our Health Inequalities and Community Engagement Team carry out this work with empathy, cultural understanding, and a deep commitment to empowering women.

> "Nobody is hard to reach—you just need to know where to look. It's about more than just leaflets. It's about listening. It's about creating safe spaces. It's about empowering women to put their health first."
>
> **Azra, Health Inequalities and Community Engagement Officer**

Key Initiatives:

Targeted Outreach

We deliver breast awareness talks across Greater Manchester in settings ranging from community centres to cultural festivals and women's groups. Our Health Inequalities Officer tailors each session to the audience, which could mean more of an informal chat or a structured talk with visual tools like synthetic breast models. She also offers sessions in Urdu and Punjabi.

Culturally Sensitive Education

We have created multilingual resources and animations that explain what to expect during breast screening. Many women share fears around the procedure, radiation, or past negative experiences. By demystifying the process and offering reassurance, or where possible a tour of the mobile screening units, we help reduce anxiety and build confidence.

Partnerships with Local Leaders

We collaborate with trusted figures and organisations, from faith leaders to cancer support groups, creating safe spaces where women feel seen, heard and valued. This includes joint outreach with experts like Consultant Advanced Nurse Practitioner Lorraine Turner, who can provide on-the-spot answers to clinical questions.

Amplifying Community Voices

From stigma to systemic bias, many women have shared stories of being dismissed or misunderstood when seeking help for symptoms. These conversations are evidence of inequality. Our work ensures these voices are heard, supported and used to shape future services.

Real Stories, Real Impact

During one awareness session, a woman shared that cultural stigma had led her to keep her diagnosis secret, even from her own children. Thanks to our Health Inequalities Officer, she was connected with a Muslim cancer support group, providing her with much-needed emotional support. In another instance, a woman who had decided never to return for screening after a negative experience was gently encouraged to reconsider and decided that she would attend her upcoming appointment.

These stories highlight the power of culturally sensitive outreach and the importance of building trust within communities. They remind us why we must continue to listen, adapt and support women in ways that respect their lived experiences and unique challenges.

Supporting Inclusive Research and Community Engagement

One of our key focuses this past year has been supporting a community-led research project aimed at improving breast cancer awareness among women from ethnically diverse backgrounds. Our work has included co-producing culturally sensitive materials, facilitating community events, and hosting tailored workshops to share findings in accessible, meaningful ways.

South Asia Gallery Events

In February, we partnered with researchers from the University of Manchester to host two vibrant events at Manchester Museum's South Asia Gallery. These events celebrated the innovative Tree of Life methodology, an approach that uses storytelling and shared cultural experiences to spark dialogue around breast health and wellbeing. The co-produced digital art installation featured at the events remained on display until May, acting as both a creative expression of the project and a tool for awareness.

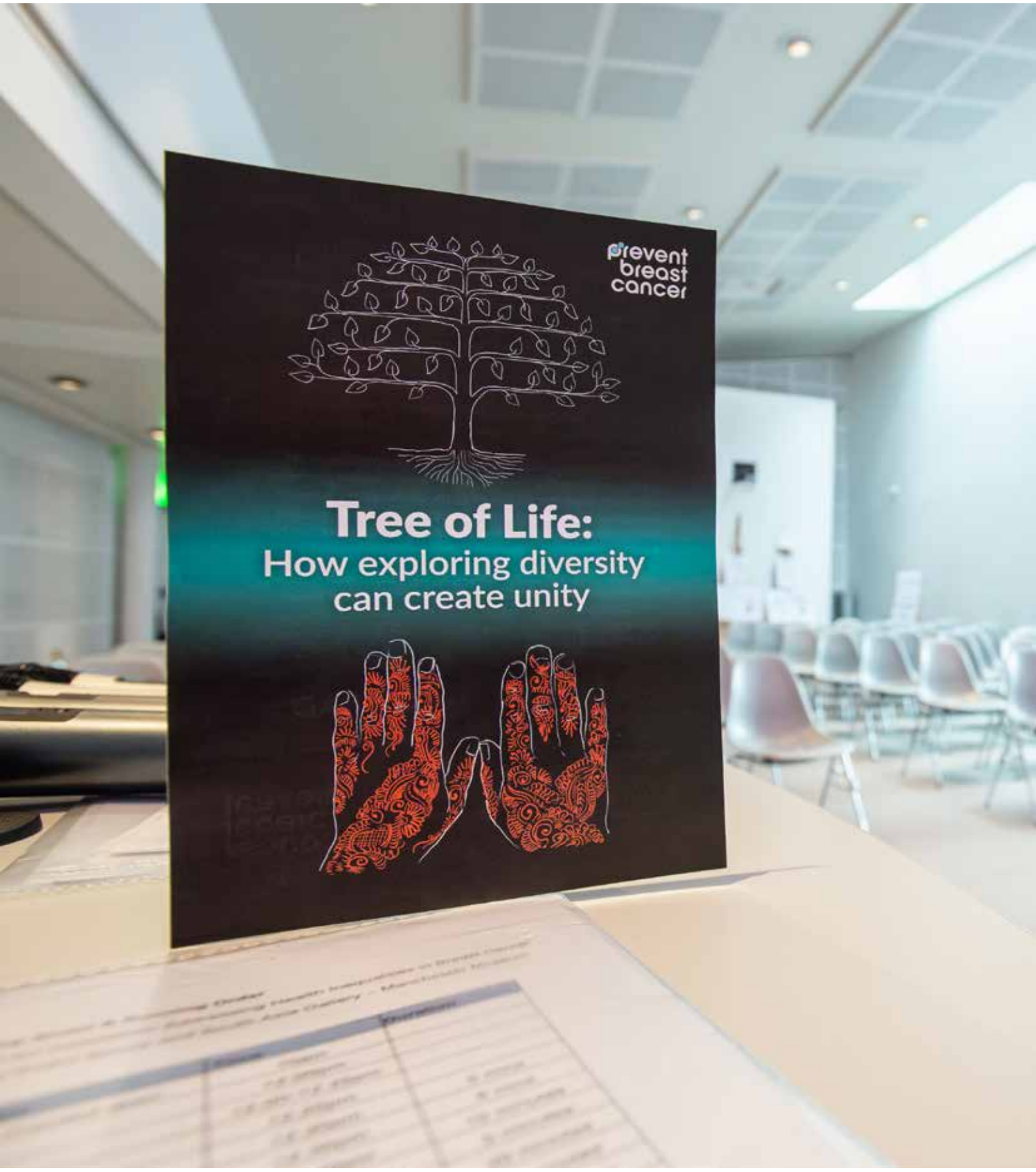
The events welcomed over 60 attendees, including representatives from the NHS, local government, academia and grassroots organisations. Significantly, the work received coverage on BBC North West Tonight, where ambassador Roma Das and Prevent Breast Cancer Founder and Honorary President Lester Barr MBE highlighted the urgent need for culturally inclusive breast health campaigns.

Culturally Relevant Intervention Videos

Another central part of this project has been the co-production of four intervention films tailored to key underrepresented communities. The videos, developed in partnership with creative agency Clear and guided by extensive community consultation, explore breast cancer signs, symptoms, and the importance of screening in a culturally nuanced and accessible way.

Notably, the videos were shaped by focus groups, who influenced both the script and practical details like clothing and language. One film, for example, is delivered in Urdu with English subtitles. The completed videos were shown to participants involved in the research, who responded positively and expressed that they saw their own lived experiences reflected onscreen. Once the research concludes, these films will be used as a vital resource in our outreach toolkit, offering a powerful and lasting way to engage diverse audiences with trusted, relevant messaging.



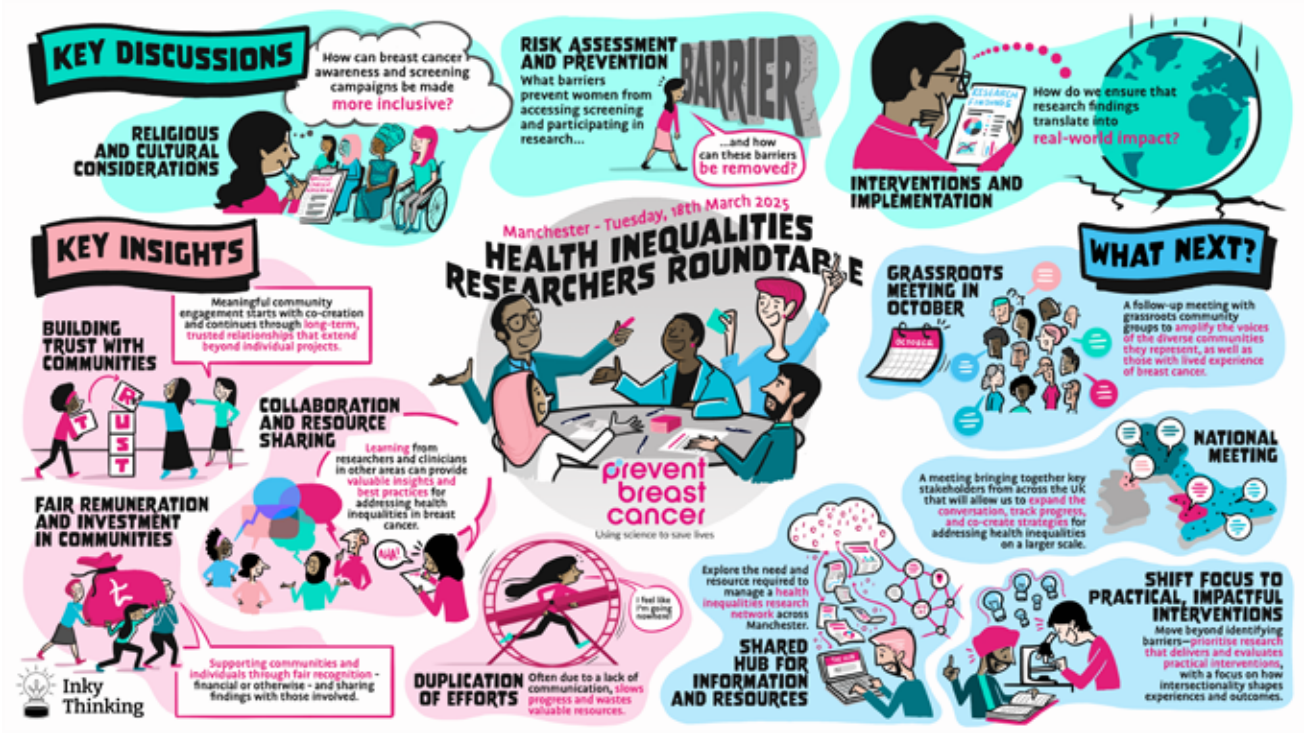

prevent
breast
cancer
Tree of Life:
How exploring diversity
can create unity

Health Inequalities Roundtable Meetings 2025

In 2025, Prevent Breast Cancer hosted two pivotal roundtable events designed to address health inequalities in breast cancer prevention and early diagnosis. These events brought together clinicians, researchers, service providers, and grassroots community groups to better understand the complex and often overlapping factors that contribute to unequal outcomes, particularly in under-served communities across Greater Manchester.

We recognised that while many important research projects and outreach initiatives exist in this space, too often they operate in isolation. This lack of coordination results in missed opportunities for collaboration, duplicated efforts, and limited overall impact. Our roundtable series aims to break down these silos by creating shared spaces for open dialogue, learning, and collective action.

Researchers Roundtable, March 2025

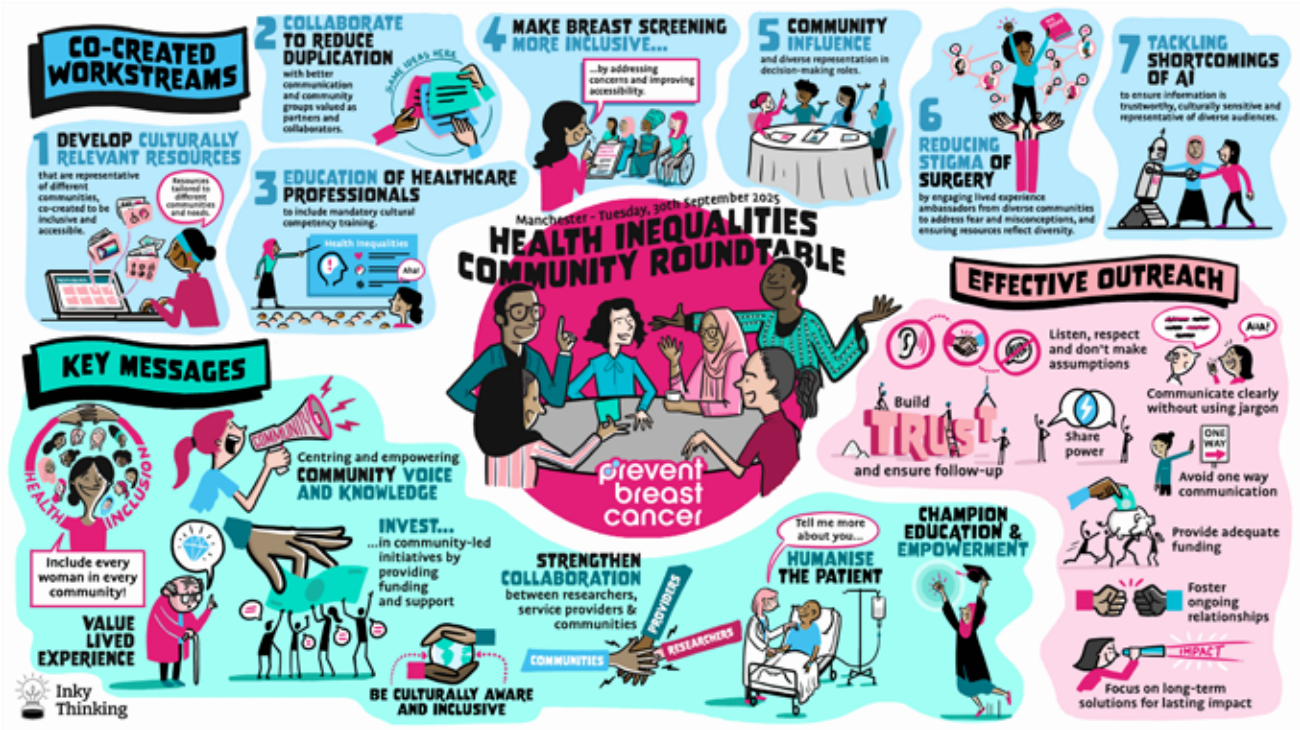


We held our first-ever Health Inequalities Roundtable in March, bringing together researchers, healthcare professionals, and patient advocates to explore how research can drive earlier detection and improved outcomes. Using the World Café Method, an inclusive and collaborative discussion format, participants examined three critical themes:

- How to ensure breast cancer campaigns and research projects are culturally inclusive
- What prevents women from accessing screening or participating in research
- How to translate research into real-world interventions

Key insights included the need to build long-term trust with communities, to fairly compensate and engage grassroots groups, and to improve coordination among organisations working in this area. Participants called for a shift from identifying problems to implementing and evaluating practical, impactful solutions.

Community Roundtable, September 2025



Building on insights from the Researchers Roundtable, our Community Roundtable put lived experience at the heart of the discussion, focusing on practical, community-led solutions. Diverse community groups and service providers from across Greater Manchester came together to share knowledge and perspectives. Participants explored the effects of stigma, language barriers, and mistrust of services, while considering how empathy, accessibility, and cultural understanding can improve engagement. Service providers shared information about existing programmes, and community groups reflected on what works well, what should be avoided, and how interventions can be better tailored to local needs.

The Roundtable marked a shift from identifying barriers to driving meaningful change. Participants co-developed seven priority areas for action, including creating culturally sensitive resources, improving healthcare professional education, enhancing the screening experience, reducing duplication through collaboration, and amplifying community voices.

From Conversation to Action

By linking research and community insight, our Roundtables have established a shared foundation for equitable breast cancer prevention and early diagnosis across Greater Manchester.

Insights from both Roundtables are now being translated into a practical roadmap for inclusive engagement.

A detailed Impact Report and infographic from the Researchers Roundtable have been published, with equivalent materials for the Community Roundtable are to follow. Thanks to the passion and commitment of everyone involved, we now have tangible actions and a clear starting point to drive meaningful, lasting change.

We are planning a national stakeholder meeting in 2026, where we will share learnings, assess progress, and work to scale successful strategies that address breast cancer inequalities at a wider level.

The Roundtable series marked a powerful step toward a more collaborative, community-informed approach to breast cancer prevention and early detection. They demonstrated what is possible when lived experience, professional expertise, and grassroots insight come together to drive meaningful change.

With Thanks

Prevent Breast Cancer extends its sincere thanks to all those who participated in the Roundtables. Our thanks also go to Catherine Hennessey for expertly facilitating the discussion and to Inky Thinking for capturing the day so powerfully through illustration.

We are deeply grateful to the Zochonis Charitable Trust and Gilead Sciences for their generous support in making these events possible. Their funding enabled us to host meaningful conversations that are now shaping future action and lasting change.

YEAR IN REVIEW



We are deeply grateful to every individual, organisation and business who has supported Prevent Breast Cancer this year. Whether through fundraising, donations, volunteering, promotion, research or professional expertise, your contributions are vital to our mission of creating a future free from breast cancer.

Thanks to your dedication, passion and generosity, we have achieved some incredible milestones. Here is a look back at just some of the amazing things you have made possible:

APRIL TO JUNE



London Marathon – 21 April

Seven incredible runners, each with a personal connection to breast cancer, raised over £30,000 in the world's most iconic marathon. Kellie, who carries the BRCA gene, ran alongside her brother Carl. Jessica works at a breast unit in Lancashire, while Arin ran for his mum, a breast cancer survivor. Fiona ran in honour of several family members. Thank you to all our amazing runners for their determination and dedication to fundraising!



Take Me Out Event – 25 April

A group of second-year Event Management students from Manchester Metropolitan University hosted a Take Me Out-themed night at The Bierkeller Manchester. With over 300 students in the audience, the fun and high-energy event raised awareness among young people, whilst raising an incredible £2,100.



Morecambe Bay Walk – 4 May

77 incredible supporters tackled the challenging cross-bay route from Arnside to Grange-over-Sands, raising an impressive £10,400.



Paint Sale & Ashton on Mersey Pink – 4-8 May

Organised by our ambassadors and a team of volunteers, this community-wide fundraiser raised £8,500 and helped paint the town pink with awareness.



Tour de Manc – 5 May

With 12 cyclists and a team of volunteers supporting at water stops and the finish line, this Manchester-based cycling event raised over £14,000, including an additional £5,600 charity donation from Tour de Manc Charitable Foundation. Tour de Manc was also our first horsebox outing!



Danceathon (LCAP fundraising) – 10 May

18 members of the Team Empower network and Prevent Breast Cancer CEO danced from midday until midnight in the basement of Bonded Warehouse in Manchester. Reform Radio sorted the tunes for a 24-hours of non-stop fun, raising around £25,000!

APRIL TO JUNE



Great Manchester Run & Half Marathon – 26 May

A total of 41 dedicated supporters took part in the Great Manchester Run and Half Marathon, raising over £25,000. We would like to acknowledge in particular Holly Oldham, Liza Watts, Lucy Noone-Blake, and Janice Halliwell, each of whom raised over £1,000.



RideLondon – 26 May

15 cyclists took part in the bike ride across the capital, motivated by colleagues affected by breast cancer and a drive to support prevention for future generations. Thanks to the support of Barratt Homes and The Mortgage Store, our cyclists raised over £16,000.



Pink Ladies Day at Bryn Masonic Hall – 2 June

A highlight in the calendar, this fun-filled and inspiring event welcomed 150 women and raised an incredible £10,600, while raising vital awareness in the community. A special thanks go to organisers Chris and Phil Hughes and the Ladies of Bryn Masonic Hall.



Polo & Luxury Holiday Raffle – 2 June

We hosted our first-ever Polo event at Cheshire Polo Club's Wirral Challenge Cup, sponsored by Brewin Dolphin. It was a great opportunity to raise awareness and connect with new supporters. The day also featured a luxury raffle, with a once-in-a-lifetime rail holiday donated by Golden Eagle Luxury Trains. Thanks to generous supporters, the raffle raised £5,500 for our cause. We are incredibly grateful to Brewin Dolphin, Golden Eagle, and everyone who took part.



Lloyd's of London Abseil – 26–27 June

A team of supporters from Hayfin, Kroll, SimCorp and Alliotts took on the exhilarating 289ft Lloyd's of London abseil, raising an impressive £13,400. The event not only boosted funds but also opened new opportunities for adrenaline-fueled fundraising in London.



Paint Cricket Pink – 21–23 June

Building on its 2023 launch, Paint Cricket Pink returned with even more teams getting involved. Over one weekend, 23 clubs across the Cheshire Cricket League went pink with themed matches, raffles, tuck shops, pink drinks, quiz nights and more, raising over £16,000 to support our work.

JULY TO SEPTEMBER



Garden Party with Allan and Sally Humphris – 21 July

Long-time supporters Allan and Sally Humphris hosted their annual Garden Party, bringing together friends, family, and local supporters to raise an impressive £3,800. Thankfully the rain held off, and guests enjoyed drinks, BBQ food, and an inspiring update from our Honorary President, Lester Barr, on the Academy and our latest research projects.

JULY TO SEPTEMBER



Justina Best's Fundraising Ball – 6 September

Long-time supporter Justina's fabulous ball raised over £7,500!



Great North Run – 7 September

Ten dedicated supporters took part in the Great North Run, the world's largest half marathon, collectively raising over £9,500 to help fund our vital breast cancer prevention research.

We would like to extend our sincere thanks to Katie Crawford, who took part in the event following her breast cancer diagnosis in 2023 and raised an impressive £1,100.



80s Night with Debbie Fricker & Patrick Holden – 14 September

A night of neon, nostalgia and non-stop dancing! Organised by Debbie Fricker and Patrick Holden, this fun-filled 80s-themed evening raised a fantastic £1,800 in support of breast cancer prevention.



Adrenaline – September

Brave members of the LCAP group took part in 3 hair-raising activities – a Tandem Skydive, zipwire and bungee jump! The challenges contributed just under £8,000 to their fundraising efforts.



The Butterfly Breast Cancer Awards – 20 September

Organised by the incredible Sarah Pickles, this inspiring evening at Vale Royal Abbey celebrated the courage, strength, and resilience of those affected by breast cancer. With emotional stories, uplifting moments, and powerful community spirit, the event raised £4,900 for Prevent Breast Cancer. We were honoured to be chosen as the charity partner for a second year running.

JULY TO SEPTEMBER



Prevent Breast Cancer Research Conference – 24-25 September

We hosted our first-ever Research Conference in Manchester, bringing together leading scientists, clinicians and researchers from across the UK and beyond, to explore the future of breast cancer prevention. The event fostered important conversations around personalised screening, risk prediction and preventative treatment.

Our thanks go to headline sponsors Hologic, TheWell BioScience, Gilead Sciences, and Exact Sciences, as well as Endomag and Berkeley Genetics, for helping make this landmark event possible.

OCTOBER TO DECEMBER



Run for Research Digital Challenge - October

211 participants ran 31 miles over 31 days, raising a record-breaking £41,900.

Two participants commented:

"Seeing everyone pushing themselves and achieving their goals was my favourite thing about Run for Research."

"I hadn't run in over 50 years and still managed to raise 47% over my target. It was amazing and inspired me to keep running. We all had our own reasons for taking part."



Manchester Half Marathon – 13 October

Five fantastic runners laced up for breast cancer prevention, raising £5,200 in support of our research.



Breast Services Education Day and Award Ceremony for Manchester University NHS Foundation Trust – 8 November

This was the first event of its kind – a special opportunity for teams from both South and North Manchester to come together and celebrate the tireless work and dedication of everyone involved in the breast service.

This event was particularly special for Prevent Breast Cancer as our Trustee and National Breast Imaging Academy Lead, Dr Mary Wilson, was honoured with a Lifetime Achievement Award in recognition of her outstanding service to the NHS and her tireless championing of women throughout her career.



Christmas Celebration – 20 December

Our much-loved Christmas concert returned for its sixth year, filling the stunning Manchester Cathedral with festive spirit. The evening featured performances from both adult and children's choirs, as well as a delightful musical nativity performed by local children. It was a joyful celebration for all ages and, thanks to our generous supporters, we raised over £11,300 for Prevent Breast Cancer.

JANUARY TO MARCH



Zumbathon – 1 February

86 energetic participants danced and shimmied their way through our Zumbathon, raising a over £8,000.



Chris and Roisin's Ball – 22 February

Our long-time and much loved Ambassadors Chris and Roisin held a ball at Bowdon Rugby Club in Timperley, with a fantastic turnout of family and friends. The evening featured numerous raffle prizes, and both Chris and Roisin delivered heartfelt speeches about why they support breast cancer awareness. The event raised just under £4,000.



Hale Golf Club – Lady Captain's Charity of the Year – March

Our time as the Lady Captain's Charity of the Year at Hale Golf Club came to a close in March. Throughout the partnership, the club raised an impressive £8,700 through fundraising events. We are grateful to Gill Kay and Hale Golf Club for their generosity and support in helping to spread awareness across a fantastic community.



March 32 Digital Challenge – March

196 people signed up to walk 32 miles over the month, raising an amazing £49,500.

One participant said:

"This challenge helped me get moving again and brought back a sense of positivity. It even gave me the confidence to leave my wig off. I was proud to take part in the hope of preventing others from going through what I have."



Paint Your Nursery or Preschool Pink – February-March

Seven nurseries, preschools, and children's classes got involved with pink-themed fundraising. From pink toddle-woddles and cake sales to pink games and grandparents open mornings, it was heart-warming to see so many little ones having fun to support our breast cancer prevention research.

Fundraising Highlights

This year, we have been inspired by the incredible generosity, creativity, and commitment of our supporters. From school students to corporate teams, from pink buses to pasta-making classes, every event, challenge and conversation has helped raise vital funds and amplify our mission: to prevent breast cancer through greater awareness, education and research.

Here are just some of the standout moments that made a big difference in 2024:



The Big Give Christmas Challenge

Our 2024 Big Give Christmas Challenge campaign raised over **£148,000** towards building The National Breast Imaging Academy. By unlocking matched funding, every donation was doubled. The campaign showcased the strength of our supporter network and brought us closer to the target of £3.9 million required to complete the build!



The BooBee Campaign

Our bold and brilliant BooBee Campaign returned in 2024, combining community fundraising with high-impact awareness activities. Led by our incredible volunteer ambassadors – the BooBees – this year's campaign included a wide range of fundraising events, from BooBee Bingo to local challenges, workplace activities, and partnerships across Greater Manchester.

As previously mentioned, a major highlight was the return of our much-loved BooBee Buses, which hit the streets in collaboration with Make 2nds Count to shine a spotlight on both early detection and secondary breast cancer.

With support from the Big Give match funding, the campaign raised an astonishing total of **£170,000**! As well as generating vital funds, the campaign once again brought the message of breast cancer prevention to the heart of communities – making a real difference on every front.



Cath & Ian Ray's 2024 Challenge

In December 2023, Cath Ray was diagnosed with breast cancer. Determined to make a difference, Cath and her husband Ian set out to raise £20,024 in 2024, with Ian running 2,024 km over the year, joined by family and friends. They surpassed their goal, raising an incredible **£20,800**, inspiring countless others along the way.



Bioderma Collaboration

For six months, every Bioderma Sensibio H2O bottle with our Prevent Breast Cancer sticker sold in Superdrug stores nationwide meant that £1 was donated to help fund our vital work, raising just under **£5,000**. The campaign helped put breast cancer prevention in front of thousands of shoppers across the country, further reinforcing our role as the UK's only charity entirely dedicated to the prediction and prevention of breast cancer.



LCAP Group – Empowering Women's Network

We were honoured to remain the chosen charity for LCAP Empowering Women's Network, which yet again delivered an outstanding year of fundraising through events including a Danceathon, Adrenaline September (featuring a zip wire, bungee jump and skydive), business networking sessions and a Christmas lunch.

Led by Louise Stephenson and supported by Prevent Breast Cancer's team, the campaign raised over **£56,000** in 2024, part of an extraordinary £150,000+ raised since the partnership began in December 2022. We are proud to partner with such a passionate, values-driven network.

Our Partners

Throughout the year, we have been fortunate to receive ongoing support from a range of corporate partners, including Hayfin, Alliotts, Amet, Circle Health Group, Kroll, SimCorp, and Pixel Inspiration. We are deeply grateful for their commitment and generosity.



Hospitality Helps

Launched by The Tim Bacon Foundation, Hospitality Helps was a new initiative uniting the hospitality sector to support cancer charities. Prevent Breast Cancer was proud to be its first charity partner with funds raised going towards The National Breast Imaging Academy.

Throughout the campaign, venues hosted a variety of activities—bespoke cocktails, ladies' lunches, charity climbs, and stewardship events—all helping to spread the message of breast cancer prevention to thousands across the UK.

Participating venues included:

- San Carlo – Donated £2 from every limited-edition Rosa cocktail
- The Alchemist – Added a discretionary £1 to bills during October
- Nightcap Group (Dirty Martini, The Cocktail Club, Tonight Josephine, Blame Gloria) – Donated 10% of sales of their rose petal cocktail across UK locations
- Gusto – Ladies' Night in Alderley Edge raised over £5,000
- Permanently Unique Group (Tattu & Fenix) – Employees took on the Three Peaks Challenge and raised over £10,000

> "Despite a challenging year for the hospitality sector, we saw venues come together to support a vital cause. This campaign shows the power of collective generosity and purpose."
>
> **Jeremy Roberts, Chair, Tim Bacon Foundation**

Thanks to generous participation from venues across the UK, the campaign raised over **£30,000**, doubled to just over **£60,000** thanks to matched funding via The Big Give.

We are incredibly grateful to all the venues involved and to Manchester Hospitality Network for their support in shaping and delivering this impactful campaign.



The Mammary Walk

On 7 September, Lisa Thomas challenged her colleagues to take on a 'Mammary Walk', where 50 NHS Nightingale Centre employees took to the streets of Manchester in inflatable boob costumes to raise funds for the National Breast Imaging Academy, to get more women to their mammograms, sooner.

As well as fundraising, they handed out over 300 breast check cards along the 10km route, spreading breast cancer awareness at the same time! With over **£30,000** raised in total, the walkers tripled their fundraising target and moved us one step closer to opening the National Breast Imaging Academy doors.

Paint Towns

Our Paint Your Town Pink campaign continues to grow, with an incredible **£59,200** raised across seven towns in 2024–2025. Altrincham, Ashton on Mersey, Bramhall, Cheadle Hulme, Gatley, Macclesfield, and Sale all turned pink in support of Prevent Breast Cancer.

Each town held a variety of pink-themed activities, from party nights and bake sales to fashion shows and sponsored challenges, all designed to bring communities together while raising funds and awareness for our vital work.

Some of the campaign's highlights included:



Paint Macclesfield Pink

Centred on a lively party night organised by Heather Tebay of Local People Macclesfield and Ambassador Heather Glover, the event raised over **£1,000**.



Paint Gatley Pink

Held from 29 September to 6 October 2024, Ambassador Sarah Saphier and her team raised **£3,400**, with standout moments including a tribute night to pop icon P!nk at Piccolo Bar & Restaurant, and a local salon Angela Lewis Hair offering ribbon tattoos and pink hair dyeing for donations.



Paint Bramhall and Cheadle Hulme Pink

This month-long effort in October 2024, led by Ambassadors Jo Hoddes, Rachel Peabody, Sally Shrigley and Caroline Tiplady, raised a remarkable **£28,000**, featuring highlights such as a bucket collection at Stockport County FC, a meat hamper raffle from J Pimlott Butchers, and a screening of The Rocky Horror Picture Show at The Rex in Wilmslow, hosted by Vanilla Fudge. Local businesses also joined in with pink coffee mornings and a vibrant pink Cheadle Hulme Market.



Paint Altrincham Pink

Taking place from 10–23 March 2025, Altrincham raised an amazing **£18,300**. Highlights included the 7th annual Pink Networking Event hosted by South Manchester Business Association, a Pink the Rink match with Manchester Storm Ice Hockey Team, a party night at Toast, pink afternoon teas, and a Spring Fashion Show organised by Altrincham BID.



Paint Sale and Ashton on Mersey Pink

Held from 10–24 May 2025, this was the third consecutive year of the campaign led by Ambassador Angie Hilton and her dedicated team—and it is growing bigger each year! Highlights included a vibrant launch event in Sale town centre, a 5K run/walk in a local park, business-led fundraising activities across the area, and even a pink-themed pub crawl. This fantastic community effort raised an impressive **£9,600**.



Pink Afternoon Tea at Ashton Central Mosque

On 1 September, Ashton Central Mosque and Tameside Health Group hosted a warm and welcoming pink afternoon tea, raising an amazing **£2,600**. Prevent Breast Cancer's Health Inequalities and Community Engagement Officer Azra joined the event to speak with guests about the charity's work and delivered an empowering breast self-examination talk in both English and Urdu, helping raise vital awareness in the community.



Paint Tennis Pink

New for 2025, this campaign was launched by supporter Jane Death and supported by the North East Cheshire Lawn Tennis League. Four clubs (Davenport, Bramhall Lane, Brooklands, and Prestbury) went pink, raising **£6,700** through fun, tennis-themed fundraising events.

Thank you for every mile walked, every pound raised, and every story shared. Together, we are creating a future free from breast cancer.

Strategic Aims and Objectives

While our strategic aims were previously set and reviewed on an annual basis, many of our priorities reflect ongoing, long-term ambitions that require sustained focus and collaboration. As such, we are now adopting a three-year strategic outlook to guide our work. This approach recognises that meaningful progress in key areas takes time to implement and embed. The aims and objectives outlined in this report represent a work in progress - a dynamic framework that will continue to evolve as we respond to emerging opportunities, challenges and learning.

Governance and Structure	
Develop a strategy to implement Environmental, Social and Governance reporting and improvement.	In Progress
Invest in improving cyber security infrastructure.	Ongoing
Work with an independent financial advisor to move employee pensions to a new provider and deliver financial advice for all staff.	Completed
Implement a project management system and CRM database to improve organisational efficiency.	In Progress
Implement an updated process to capture information for impact reporting.	In Progress
Embed new fundraising and operational staff and utilise the increased resource to improve operational effectiveness and continue to grow our income generation.	Ongoing
Review and update our Grant Terms and Conditions and Cause-Related Marketing Agreements to reflect best practice and maintain strong governance	In Progress
Establish and implement a formal contract and Terms and Conditions for the Prevent Breast Cancer Research Unit, ensuring clarity, accountability, and alignment with our governance framework.	In Progress

Research	
Organise our 2nd Breast Cancer Prevention Conference.	Confirmed for March 2026
Organise a Research Evening for the charity's supporters with a spotlight on what we have achieved so far and what still needs to be done.	In Progress
Review grant funding policies and processes and update grant application form to make it more user friendly and robust.	In Progress
Reopen annual grant funding applications and award new research grants.	Ongoing
Establish and develop the Prevent Breast Cancer Research Unit as a global Centre of Excellence in the prediction and prevention of breast cancer, enabling access to data to accelerate research breakthroughs.	In Progress
Increase investment in UK-wide research projects focused solely on the prediction and prevention of breast cancer, strengthening national collaboration and driving forward our vision to stop the disease before it starts.	Ongoing

Services to patients and to The Nightingale Centre	
Continue to lead on the capital campaign to build the National Breast Imaging Academy.	Completed
Recruit new centre volunteers for our coffee bar and shop	In Progress
Review suppliers for our coffee bar.	Ongoing
Continue to invest in new, ethically sourced merchandise for our shop.	Ongoing
Work with North Manchester Breast Centre on plans to open a Prevent Breast Cancer coffee shop in their planned new build.	Ongoing



Health Awareness and Education	
Implement strategies and campaigns developed by the Health Inequalities Team.	Ongoing
Utilise our unique Community Hub - a converted horse box - to engage the public and raise awareness.	Ongoing
Develop our library of video content by editing existing videos to provide subtitles in various languages.	In Progress
Work collaboratively with other local charities, grassroots organisations, and healthcare providers to ensure clear communication and networking to encourage breast screening uptake in hardly reached areas.	Ongoing
Identify research opportunities and collaborate with academics to develop proactive and sustainable interventions that address health inequalities.	Ongoing
Update and enhance education and awareness content delivered through our Health Hour Talks to make sessions more engaging and interactive.	In Progress

Income Generation	
Continue our partnership with Manchester Foundation Trust Charity and achieve our fundraising target of £3.9 million to build the National Breast Imaging Academy.	Completed
Sustain growth and impact achieved from the National Breast Imaging Academy campaign by developing compelling research-led funding opportunities and broadening our focus to include unrestricted funding and key charitable areas such as health inequalities, outreach, and education events.	Ongoing
Analyse our supporter database and implement a Moves Management process to increase the number of monthly donors and strengthen relationships through improved stewardship.	In Progress
Continue to develop and grow our Corporate and Major Donor Networks.	Ongoing
Continue to grow our successful Ambassador programme and build on the success of our Paint Towns Pink campaign.	Ongoing
Diversify income and increase brand awareness through ongoing digital fundraising and promotional activity – Strategy driven by analytics and data.	Ongoing

Financial Review

This year has seen Prevent Breast Cancer's income continue to grow, reaching a significant milestone by exceeding £2 million for the first time in the charity's history. Total income for the year stood at £2,169,572, compared with £1,472,692 in the previous year – a 47% increase. This growth reflects the collective impact of focused fundraising efforts, dedicated supporters, and strategic partnerships.

The primary focus over the past twelve months has been to secure the outstanding funds required to build the National Breast Imaging Academy. This campaign has shaped the overall income profile, with a large proportion allocated to restricted income. In 2024–2025 alone, over £906,000 was raised specifically for the Academy. Manchester University NHS Foundation Trust and their charity advanced the funds to begin construction in November 2024. At the time of writing, the fundraising target has been met and construction is nearly completed, with the building to be fully operational by early 2026. The capital campaign has also played a key role in expanding our network and unlocking new opportunities, laying a strong foundation for sustainable growth.

In December 2024, the Prevent Breast Cancer Research Funding Round was re-opened, with decisions made in June 2025, marking a return to one of our core charitable objectives: to fund cutting-edge, breast cancer prevention research.

Performance by Income Stream

Trusts and Foundations

This income stream accounted for 27% of overall income, with a remarkable 185% increase compared with the previous year. A generous £250,000 grant from the Garfield Weston Foundation was a standout achievement, and support from other Trusts grew significantly over the year.

Donations and Legacies

Contributions made up 16% of total income, representing a 26% increase year-on-year. Successes include our Big Give Christmas Challenge, which raised vital funds for the Academy, and a major legacy gift of £140,000.

Corporate Fundraising

Corporate partnerships delivered impressive results, with income growing by 101% compared with the previous year. This success is attributed to strong stewardship of existing relationships and the cultivation of new corporate supporters who have embraced the charity.

Sporting Challenges

Income from this stream was 18% lower than the previous year, as anticipated. This was a strategic decision, with no overseas events planned due to the high cost and recruitment challenges. These events are now run on alternate years to maximise return on investment. Encouragingly, profit exceeded forecast by 36%.

Community and Supporter Fundraising

This area saw a 34% increase in income, thanks to the enthusiasm and creativity of our community.

Despite ongoing operational challenges and the unpredictability of some income streams – particularly those affected by broader economic factors such as the retail environment – Prevent Breast Cancer has performed beyond expectations. All major income streams either grew year-on-year or outperformed forecasts, reflecting the strength of our team, the loyalty of our supporters, and the clarity of our mission.

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

Income Generated	
Trusts & Foundations	£582,347
Donations & Legacies	£353,091
Corporate Fundraising	£255,387
Community Activity	£241,317
Sport Challenges	£230,482
Gift Aid	£114,101
Digital Challenges	£79,328
Gifts-in-Kind	£74,800
Charitable Activity - Coffee Bar	£72,541
Investment Income, Bank Interest	£57,370
Merchandise	£50,077
Conference (Publicising Research)	£37,699
Events & Raffle	£21,032
Total Income	£2,169,572

Our Expenditure for 2024/25:

How we spend our funds	
Charitable Activities	£1,232,274
Cost of Raising Funds	£272,171
Merchandise Costs	£33,240
Investment Management Fee	£6,442
Total Expenditure	**£1,544,127**

Consistent with other years, our charitable activities constitute the vast majority of expenditure, with other costs kept at a minimum. During the year under review, Prevent Breast Cancer spent £1,232,274 on charitable activities. Expenditure included £239,787 from our restricted funds paid to Manchester University NHS Foundation Trust towards the construction of the National Breast Imaging Academy, in accordance with the agreed monthly payment schedule between the two organisations.

At the Prevent Breast Cancer Research Conference in September, our Dragons' Den initiative awarded over £29,000 to support new research projects and a key educational event. While we continue to fundraise proactively for these initiatives, sufficient reserves are in place to cover the committed expenditure.

A special mention goes to our work addressing health inequalities, supported by the Forever Manchester and NHS Charities Together grants. As outlined on page 30, we have made strong progress with our Health Inequalities work, laying important groundwork for future impact.

As of 31 March 2025, the charity generated a net income of £643,321, reflecting strong performance across income streams and careful cost management. These funds – both restricted and unrestricted – will support planned delivery of charitable activities in the coming year.

There is £1,553,828 held as restricted income and carried forward to 2025-2026 for future charitable expenditure.

The key components of our charitable activities include supporting patients and providing services at The Nightingale Centre, communicating health messages about breast cancer, addressing health inequalities, raising funds to build the National Breast Imaging Academy, and funding research into prevention. As mentioned previously, the priority for this financial year was to raise the restricted funds required for the Academy. This goal was successfully achieved in September 2025, and the funds will be fully utilised by March 2026. As a result, less was spent on new research during this period, as resources were directed towards this major capital commitment. However, as outlined earlier in this report, we were delighted to award new research funding in June 2025, marking the re-opening of our research programme and a renewed focus on prevention research.

The below charts outline the breakdown of our Charitable Activity for the year 2025/2026 and future charitable expenditure held as restricted reserves.

Breakdown of Charitable Activity	
Outreach and Awareness	£449,403
Patient Care and Services to the Centre	£298,784
Building the National Breast Imaging Academy	£239,787
Addressing Health Inequalities & Forever Manchester Grant	£108,148
Publicising and Disseminating Research	£82,647
Research Grants	£53,505
Total Expenditure	**£1,232,274**

Future Charitable Expenditure Restricted Reserves	
National Breast Imaging Academy Capital Build	£1,167,448
Gene Research PHDs	£302,920
Forever Manchester - Addressing Health Inequalities	£32,407
Health Inequalities Intervention Videos	£21,786
Health Inequalities Research and Community Roundtables	£19,113
Addressing Health Inequalities	£10,154
Total Restricted Reserves	**£1,553,828**

Reserves Policy

The Directors and Trustees believe that the charity should hold financial reserves, because it does not receive statutory funding and is entirely dependent on donations from the public and fundraising activities. This is inevitably subject to variation year to year. In addition, it requires the ability to continue operating and honouring grant commitments, should there be falls in income.

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

As of 31 March 2025, the charity holds reserves of £2,313,030 of which £1,553,828 are restricted funds. 75% of restricted reserves will fund the National Breast Imaging Academy, 20% are to fund the Doctor Alan H. Gowenlock PHD Studentship projects, with the remaining 5% reserved for Health Inequalities and Outreach activities.

Designated funds amount to £150,000 which have been allocated to the National Breast Imaging Academy.

The Trustees aim to maintain reserves equivalent to six to nine months of core operational expenditure, to safeguard against a worst-case scenario in which the charity receives no income from its usual sources. This level of reserve ensures that Prevent Breast Cancer can continue to operate and meet its obligations during a period of significant financial disruption.

Core costs include essential staff salaries, office and IT expenses, governance and compliance costs, and other fixed overheads required to sustain day-to-day operations and charitable oversight. The estimated total for six months of core expenditure is £436,179.

As of 31 March 2025, free reserves total £609,202, excluding designated funds of £150,000 (compared with £599,992 in 2024), equating to over 8 months of core operating costs.

Fundraising Costs Policy

The Trustees are committed to ensuring that fundraising costs are proportionate, transparent, and necessary to deliver long-term impact. We value the expertise required to fundraise effectively and are mindful of balancing cost-efficiency with quality. Our aim is to maximise the income available for research and other charitable activities, while investing wisely in the tools and people needed to raise those funds.

The financial statements that follow show that the majority of fundraising expenditure relates to essential activities such as delivering successful fundraising events and campaigns or purchasing stock for trading purposes.

In summary, we raised a total of £2,169,572 from donations and legacies, fundraising events, trading activities, funding from trusts, foundations and investments. We spent £1,232,274 on our charitable activities and research grants, with a further £1,553,828 held in restricted reserves for future charitable expenditure.

Fundraising Approach

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

Investment Policy

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

The charity continues to work with Brewin Dolphin, an experienced firm of investment advisers who manage our investments on a discretionary basis. The investment portfolios are managed in accordance with our Investment Policy.

In 2022 the charity invested a significant percentage of our cash reserves in high interest bank accounts via the Charities Aid Foundation Deposit Scheme, in partnership with Flagstone. This allows us to invest our reserve funds in high interest bank accounts for various periods to ensure the best returns possible over different time periods. Investing a significant part of our reserves in a number of different banks through this scheme also ensures that more of our reserves are protected through the Financial Services Compensation Scheme (FSCS).

The Trustees are satisfied with the investment performance and that it is in line with the investment objective set. Despite ongoing global uncertainty and a challenging economic climate, our investments delivered a modest gain of £17,876 over the year, reflecting a cautious and balanced approach to managing our portfolio. The charity remains confident in the management of its diversified portfolio by Brewin Dolphin and we are optimistic that future performance will continue to improve.



Structure, Governance and Management

Governing Documents

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

Appointment of Trustees and Induction

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

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

Organisation

The charity has successfully updated its governing document to reflect the changes implemented following the successful Board Effectiveness Review in December 2022. The updated governing document has been submitted to Companies House and the Charity Commission.

Prevent Breast Cancer has 11 Trustees who meet quarterly to ensure that the charity is fulfilling its charitable objectives and to review the fundraising, trading and finance teams' performance in raising funds for research into breast cancer prevention. According to the governing document, the maximum number of Trustees can be 13 and the minimum number is five. Each member of the Trustee Board contributes a different area of expertise including 'academic, medical, commercial, HR and public sector knowledge and experience. Two of the Trustees are Directors of the dormant trading subsidiary. The Chief Executive Officer has been appointed by the Trustees to manage the day-to-day operations of the organisation.

Related Party Transactions

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine (Trustee until November 2024) is a Director. The estimated value of such services is £2,800 (2024: £2,800) and therefore an equivalent amount has been included within gifts in kind.

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

Pay Policy for Senior Staff

The Board of Trustees and the Senior Management Team comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity. All Trustees donate their time and do not receive remuneration. Details of related party transactions are disclosed in notes 10 and 26 of the accounts.

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

Risk Management

The Trustee Board is committed to maintaining a strong risk management framework. The aim is to ensure that Prevent Breast Cancer makes every effort to manage risk appropriately by maximising potential opportunities, whilst minimising the adverse effect of risks. Oversight of risk is delegated to the Risk and Compliance Committee, which is comprised of four Trustees and the Head of Operations.

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

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

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

The charity will continue to regularly review and monitor the effectiveness of its risk management framework and update it as appropriate. In 2024-2025, the Trustees assessed the major risks to which the charity is exposed, in particular those related to the reputation, operations and finances of the charity and were satisfied that systems are in place to manage exposure to the major risks.

The charity receives no statutory funding and is dependent entirely on the donations and fundraising activities of its staff, volunteers and supporters. Therefore, the ratio of income to expenditure is constantly highlighted as a key risk as we need to ensure we can continue to fund our ongoing charitable activities and research projects. The Trustees ensure that this risk is minimised by following the Reserves Policy, outlined on page 54.

Reference and Administrative Details

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

L Barr MBE

P S Glass

D Harris

T Hopla (Re-appointed January 2025)

J Humphris

C Lee-Jones

C J Levine - Treasurer (Resigned in November 2024)

E O'Neal OBE – Chair

S Saleh

M Sellers - Treasurer (Appointed in December 2024)

Dr M Wilson

P Topham

E Wilson (Resigned March 2025)

Key Management Personnel	N Barraclough - Chief Executive Officer E Mellor - Head of Communication and Campaigns J Ruth - Head of Income Generation J Coleman-Reed - Head of Operations
Company Registered Number	04831397
Charity Registered Number	1109839
Registered Office	Prevent Breast Cancer Research Unit The Nightingale Centre Wythenshawe Hospital Southmoor Road Manchester M23 9LT

Auditors	Alliotts LLP Chartered Accountants and Business Advisors Friary Court 13-21 High Street Guildford Surrey GU1 3DL
Bankers	Royal Bank of Scotland Plc. 38 Mosley Street Manchester M2 3AZ

Statement of Trustees' Responsibilities

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

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

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

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

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

In so far as the Trustees are aware:

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

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

Eamonn O'Neal
Eamonn O'Neal (Dec 2, 2025 13:48:14 GMT)

Eamonn O'Neal - Chairman

Date: 02/12/25

Independent Auditor's Report to the trustees of Prevent Breast Cancer

Opinion

We have audited the financial statements of Prevent Breast Cancer (the 'charity') for the year ended 31 March 2025 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and the notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2025 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

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

We have nothing to report in this regard.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 requires 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 accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of Trustees

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

Auditor's responsibilities for the audit of the financial statements

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

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

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

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

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

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, was as follows:

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

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

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

Audit response to risks identified

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

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

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

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

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance.

Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the Trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: http://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

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

Alliotts
Alliotts (Dec 4, 2025 15:29:48 GMT)

Alliotts

Date: 04/12/25

Chartered Accountants
Statutory Auditor
3 London Square
Cross Lanes
Guildford
Surrey
GU1 1UJ

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

Statement of Financial Activities

including income and expenditure account for the year ended 31 March 2025

	Notes	Unrestricted funds 2025 £	Restricted funds 2025 £	Total 2025 £	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Income from:							
Donations and legacies	3	802,507	1,134,759	1,937,266	874,234	429,595	1,303,829
Charitable activities	5	110,240	-	110,240	65,110	-	65,110
Other trading activities	6	64,696	-	64,696	56,346	-	56,346
Investments	4	57,370	-	57,370	47,407	-	47,407
Total income		1,034,813	1,134,759	2,169,572	1,043,097	429,595	1,472,692
Expenditure on:							
Raising funds	7	311,853	-	311,853	294,629	-	294,629
Charitable activities	8	764,679	467,595	1,232,274	707,201	592,180	1,299,381
Total expenditure		1,076,532	467,595	1,544,127	1,001,830	592,180	1,594,010
Net gains/(losses) on investments	13	17,876	-	17,876	62,199	-	62,199
Net income/ (expenditure)		(23,843)	667,164	643,321	103,466	(162,585)	(59,119)
Transfers between funds		33,053	(33,053)	-	80,807	(80,807)	-
Net movement in funds	9	9,210	634,111	643,321	184,273	(243,392)	(59,119)
Reconciliation of funds: Fund balances at 1 April 2024		749,992	919,717	1,669,709	565,719	1,163,109	1,728,828
Fund balances at 31 March 2025		759,202	1,553,828	2,313,030	749,992	919,717	1,669,709

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

Balance Sheet
as at 31 March 2025

	Notes	£	2025 £	£	2024 £
Fixed assets					
Tangible assets	**16**		3,402		4,507
Investments	**20**		1		1
			3,403		4,508
Current assets					
Stocks	**17**	11,963		17,622	
Debtors	**18**	332,617		81,479	
Investments	**19**	903,266		868,830	
Cash at bank and in hand		1,452,030		1,146,324	
		2,699,876		2,114,255	
Creditors: amounts falling due within one year	**21**	(323,294)		(300,485)	
Net current assets			2,376,582		1,813,770
Total assets less current liabilities			2,379,985		1,818,278
Creditors: amounts falling due after more than one year	**22**		(66,955)		(148,569)
Net assets			2,313,030		1,669,709
The funds of the charity					
Restricted income funds	**29**		1,553,828		919,717
Unrestricted funds	**28**		759,202		749,992
			2,313,030		1,669,709

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 March 2025.

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 charitable 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



E O'Neal - Chairman
Chairman

Company registration number 04831397
(England and Wales)

Notes to the Financial Statements

1. Accounting policies

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

1.1 Accounting convention

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

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

The financial statements have been prepared under the historical cost convention, modified to include current asset investments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

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

1.3 Charitable funds

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

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

1.4 Income

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

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

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

1.5 Expenditure

All expenditure is accounted for on an accruals basis and has been included under expense categories that aggregate all costs for allocation to activities. Where costs cannot be directly attributed to particular activities they have been allocated on a basis consistent with the use of the resources.

Fundraising costs are those incurred in generating funds and do not include the costs of disseminating information in support of the charitable activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include project management carried out in house.

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

Grants

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

On occasions funds are raised that relate to specific grants that have been awarded in the

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

1.6 Tangible fixed assets

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

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

Computers 20% straight line

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

1.7 Fixed asset investments

Fixed asset investments are initially measured at cost and subsequently measured at cost less any accumulated impairment losses. The investments are assessed for impairment at each reporting date and any impairment losses or reversals of impairment losses are recognised immediately in net income/(expenditure) for the year.

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

1.8 Impairment of fixed assets

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

1.9 Stocks

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

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

1.10 Cash and cash equivalents

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

1.11 Financial instruments

The charity 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 charity's balance sheet when the charity 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 using the effective interest method unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Financial assets classified as receivable within one year are not amortised.

Other financial assets

Other financial assets, including investments in equity instruments which are not subsidiaries, associates or joint ventures, are initially measured at fair value, which is normally the transaction price. Such assets are subsequently carried at fair value and the changes in fair value are recognised in net income/(expenditure), except that investments in equity instruments that are not publicly traded and whose fair values cannot be measured reliably are measured at cost less impairment.

Derecognition of financial assets

Financial assets are derecognised only when the contractual rights to the cash flows from the asset expire or are settled, or when the charity transfers the financial asset and substantially all the risks and rewards of ownership to another entity, or if some significant risks and rewards of ownership are retained but control of the asset has transferred to another party that is able to sell the asset in its entirety to an unrelated third party.

1.12 Retirement benefits

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

1.13 Current asset investments

Current 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.

2. Critical accounting estimates and judgements

Current asset investments

Apart from the investment in the 100% subsidiary dormant trading company, all investment assets at year end are categorised as current asset investments. The trustees have given consideration as to how the investment portfolio is used in the future and believe that the the portfolio is more likely to be utilised/ liquidated within a period of one year.

Premises costs

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

Statement of Cash Flows
for the year ended 31 March 2025

	Notes	£	2025 £	£	2024 £
Cash flows from operating activities					
Cash generated from/(absorbed by) operations	**31**		264,896		(134,357)
Investing activities					
Purchase of tangible fixed assets		-		(2,463)	
Investment income received		40,810		35,017	
Net cash generated from investing activities			40,810		32,554
Net cash used in financing activities			-		-
Net increase/(decrease) in cash and cash equivalents			305,706		(101,803)
Cash and cash equivalents at beginning of year			1,146,324		1,248,127
Cash and cash equivalents at end of year			1,452,030		1,146,324

3 Income from donations and legacies	Unrestricted funds 2025	Restricted funds 2025	Total 2025	Unrestricted funds 2024	Restricted funds 2024	Total 2024
	£	£	£	£	£	£
Donations and gifts	581,690	1,134,759	1,716,449	647,584	429,595	1,077,179
Legacies	146,017	-	146,017	151,850	-	151,850
Donated goods and services	74,800	-	74,800	74,800	-	74,800
	802,507	1,134,759	1,937,266	874,234	429,595	1,303,829

4 Income from investments	Unrestricted funds 2025	Unrestricted funds 2024
	£	£
Other income	22,869	18,163
Interest receivable	34,501	29,244
	57,370	47,407

5 Income from charitable activities	Unrestricted funds 2025	Unrestricted funds 2024
	£	£
Patient Care and Services to the Centre		
Coffee Bar Income	71,136	64,657
Donations to the Coffee Bar	1,405	453
Publicising research and results		
Research Conference	37,699	-
	110,240	65,110

6 Income from other trading activities

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Fundraising agents	14,619	11,132
Merchandise sales	50,077	45,214
Other trading activities	64,696	56,346

7 Expenditure on raising funds

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Fundraising and publicity		
Seeking donations, grants and legacies	48,225	34,962
Fundraising consultancy	86,250	115,776
Staff costs	116,196	99,178
Support costs	21,500	17,845
	272,171	267,761
Trading costs		
Other trading activities costs	33,240	21,095
Investment management	6,442	5,773
	311,853	294,629

8 Expenditure on charitable activities

	Patient Care /Nightingale Centre	Outreach and Awareness	Publicising Research and Results	Health Inequalities	Research Grants	Forever Manchester	National Breast Imaging Academy	Total
	2025 £	2025 £	2025 £	2025 £	2025 £	2025 £	2025 £	2025 £
Direct costs								
Staff costs	176,189	157,320	37,328	43,374	-	33,869	-	448,080
Charitable expenditure	94,654	255,270	38,549	17,542	-	4,504	239,787	650,306
	270,843	412,590	75,877	60,916	-	38,373	239,787	1,098,386
Grant funding of activities (see note 11)	-	-	-	-	29,480	-	-	29,480
Share of support costs (see note 12)								
Support	23,015	30,323	5,577	4,477	19,790	2,820	-	86,002
Governance	4,926	6,490	1,193	958	4,235	604	-	18,406
	298,784	449,403	82,647	66,351	53,505	41,797	239,787	1,232,274
Analysis by fund								
Unrestricted funds - general	188,828	346,456	81,555	52,538	53,505	41,797	-	764,679
Restricted funds	109,956	102,947	1,092	13,813	-	-	239,787	467,595
	298,784	449,403	82,647	66,351	53,505	41,797	239,787	1,232,274

8 Expenditure on charitable activities

Previous year:	Patient Care /Nightingale Centre	Outreach and Awareness	Publicising Research and Results	Health Inequalities	Research Grants	Forever Manchester	Total
	2024	2024	2024	2024	2024	2024	2024
	£	£	£	£	£	£	£
Direct costs							
Staff costs	161,031	119,292	21,834	12,055	-	2,459	316,671
Charitable expenditure	490,624	255,206	16,865	217	-	3,426	766,338
	651,655	374,498	38,699	12,272	-	5,885	1,083,009
Grant funding of activities (see note 11)	-	-	-	-	137,671	-	137,671
Share of support costs (see note 12)							
Support	34,762	19,977	2,064	655	7,344	314	65,116
Governance	7,252	4,168	431	137	1,532	65	13,585
	693,669	398,643	41,194	13,064	146,547	6,264	1,299,381
Analysis by fund							
Unrestricted funds - general	269,209	380,605	41,194	792	9,137	6,264	707,201
Restricted funds	424,460	18,038	-	12,272	137,410	-	592,180
	693,669	398,643	41,194	13,064	146,547	6,264	1,299,381

9 Net movement in funds

	2025	2024
	£	£
The net movement in funds is stated after charging/(crediting):		
Exchange losses	12,686	7,357
Fees payable for the audit of the charity's financial statements	9,950	9,444
Depreciation of owned tangible fixed assets	1,105	656

10 Trustees

None of the trustees (or any persons connected with them) received any remuneration during the year, Nil Trustees were reimbursed their travelling expenses (2024 - nil).

11 Grants payable

	Research grants 2025	Research grants 2024
	£	£
Grants to institutions:		
University of Manchester	19,480	137,671
Pennine Care NHS Foundation Trust	10,000	-
	29,480	137,671

12 Support costs	Support costs	Governance costs	2025	2024
	£	£	£	£
Depreciation	1,105	-	1,105	656
Staff expenses	12,686	-	12,686	7,357
Staff training	14,218	-	14,218	2,518
Printing and stationery	4,240	-	4,240	3,523
IT/website costs	12,403	-	12,403	10,735
Insurance	4,257	-	4,257	3,649
Bank and Streamline charges	26,930	-	26,930	21,267
Legal and professional charges	26,770	3,408	30,178	30,206
Other office costs	2,093	-	2,093	2,411
Payroll	2,800	-	2,800	2,800
Audit fees	-	9,950	9,950	9,444
Accountancy	-	9,650	9,650	1,980
	107,502	23,008	130,510	96,546
Analysed between				
Fundraising	21,500	4,602	26,102	17,844
Charitable activities	86,002	18,406	104,408	78,701
	107,502	23,008	130,510	96,545

13 Gains and losses on investments

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Gains/(losses) arising on:		
Revaluation of investments	17,876	62,199

14 Employees

The average monthly number of employees during the year was:

	2025 Number	2024 Number
Administration	2	1
Operations	2	1
Charitable Activity	8	6
Generating Funds	6	6
	18	14

Employment costs	2025 £	2024 £
Wages and salaries	506,945	378,063
Social security costs	45,968	29,671
Other pension costs	11,363	8,115
	564,276	415,849

The number of employees whose annual remuneration was £60,000 or more were:

	2025 Number	2024 Number
£60,000 - £70,000	1	1

Remuneration of key management personnel
The remuneration of key management personnel was as follows:

	2025 £	2024 £
Aggregate compensation	226,120	181,794

15 Taxation

The charity is exempt from taxation on its activities because all its income is applied for charitable purposes.

16 Tangible fixed assets

	Computers £
Cost	
At 1 April 2024	5,741
At 31 March 2025	5,741
Depreciation and impairment	
At 1 April 2024	1,234
Depreciation charged in the year	1,105
At 31 March 2025	2,339
Carrying amount	
At 31 March 2025	3,402
At 31 March 2024	4,507

17 Stocks

	2025 £	2024 £
Finished goods and goods for resale	11,963	17,622

18 Debtors

	2025 £	2024 £
Amounts falling due within one year:		
Trade debtors	5,252	18,440
Other debtors	31,560	54,991
Prepayments and accrued income	295,805	8,048
	332,617	81,479

19 Current asset investments

	2025 £	2024 £
Listed investments	**903,266**	**868,830**

Included in current asset investments is £9,551 (2024: £20,796) of cash held within the portfolio.

20 Fixed asset investments

	Other investments £
Cost or valuation	
At 1 April 2024 & 31 March 2025	1
Carrying amount	
At 31 March 2025	1
At 31 March 2024	1

Other investments comprise:	Notes	2025 £	2024 £
Investments in subsidiaries	**27**	1	1

21 Creditors: amounts falling due within one year

	2025 £	2024 £
Other taxation and social security	12,163	9,834
Trade creditors	128,296	56,486
Grants payable	94,955	158,112
Other creditors	5,731	5,142
Accruals and deferred income	82,149	70,911
	323,294	300,485

22 Creditors: amounts falling due after more than one year

	2025	2024
	£	£
Trade creditors	66,955	148,569

23 Analysis of net assets between funds

	Unrestricted funds 2025	Restricted funds 2025	Total 2025
	£	£	£
At 31 March 2025:			
Tangible assets	3,402	-	3,402
Investments	1	-	1
Current assets/(liabilities)	822,754	1,553,828	2,376,582
Long term liabilities	(66,955)	-	(66,955)
	759,202	1,553,828	2,313,030

	Unrestricted funds 2024	Restricted funds 2024	Total 2024
	£	£	£
At 31 March 2024:			
Tangible assets	4,507	-	4,507
Investments	1	-	1
Current assets/(liabilities)	894,053	919,717	1,813,770
Long term liabilities	(148,569)	-	(148,569)
	749,992	919,717	1,669,709

24 Financial commitments, guarantees and contingent liabilities

At year end there is a commitment to the funding of the National Breast Imaging Academy project, with construction having begun at year end. The project is funded by the Manchester Foundation Trust Charity as well as Prevent Breast Cancer. Under legal agreement, the charities are committed to meeting the funding requirements for the project's completion as at 31 March 2025. It is estimated at year end that the commitment to the project not previously expensed is £1,599,524 (2024: no commitment).

25 Operating lease commitments

	2025 £	2024 £
Lessee		
At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:		
Within one year	2,184	2,184
Between two and five years	3,276	5,460
	5,460	7,644

26 Related party transactions

During the year invoices to the value of £5,168 (2024: £5,168) were paid to Gunnercooke Solicitors. This firm is considered a related party as Joe Glass (a Partner until 31 March 2025 at Gunnercooke Solicitors) is married to Pam Glass and is also the Company Secretary. No creditor remained outstanding at the year end (2024: Nil).

During the year fee's of £1,548 (2024: £1,800) were paid to Original Funbags. This company is considered a related party as Tammy Hopla (director of Original Funbags) is also a Trustee of Prevent Breast Cancer. No creditor remained outstanding at the year end (2024: £nil).

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine is a director. The estimated value of such services is £2,800 (2024: £2,800) and therefore an equivalent amount has been included within gifts in kind. Charles Levine ceased to be a trustee on 26 November 2024. Sheppards continued to process the payroll to 31 March 2025.

27 Subsidiaries

Details of the charity's subsidiaries at 31 March 2025 are as follows:

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

28 Unrestricted funds

The unrestricted funds of the charity comprise the unexpended balances of donations and grants which are not subject to specific conditions by donors and grantors as to how they may be used. These include designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes.

	At 1 April 2024 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2025 £
Academy	150,000	-	-	-	-	150,000
General funds	599,992	1,034,813	(1,076,532)	33,053	17,876	609,202
	749,992	1,034,813	(1,076,532)	33,053	17,876	759,202

Previous year:	At 1 April 2023 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2024 £
Research salaries	3,050	-	(3,050)	-	-	-
Academy	150,000	-	-	-	-	150,000
Database & refurbishments	28,992	-	-	(28,992)	-	-
General funds	383,677	1,043,097	(998,780)	109,799	62,199	599,992
	565,719	1,043,097	(1,001,830)	80,807	62,199	749,992

29 Restricted funds

The restricted funds of the charity comprise the unexpended balances of donations and grants held on trust subject to specific conditions by donors as to how they may be used.

	At 1 April 2024 £	Incoming resources £	Resources expended £	Transfers £	At 31 March 2025 £
AWHA Projects	16,786	-	-	(16,786)	-
Forever Manchester and NHS Charities Together Project	22,494	51,321	(41,408)	-	32,407
Adressing Health Inequalities	-	21,585	(774)	(10,657)	10,154
Health Inequalities Roundtable Events	30,002	2,150	(13,039)	-	19,113
Outreach and Awareness	-	24,863	(1,092)	(23,771)	-
Building the National Breast Imaging Academy	500,345	906,890	(239,787)	-	1,167,448
Gene PHD Legacy	350,090	-	(47,170)	-	302,920
Health Inequalities Videos	-	5,000	-	16,786	21,786
Community Hub (Horsebox)	-	5,040	(6,415)	1,375	-
Investigating The Effects of Preventative Tamoxifen	-	33,454	(33,454)	-	-
Predicting the Outcomes of Risk-Adapted Screening (POSSUM)	-	29,332	(29,332)	-	-
Alcohol Consumption and Increased Risk of Breast Cancer	-	1,774	(1,774)	-	-
Investigating Prevention Using a Human Tissue Ex-Plant Model	-	12,000	(12,000)	-	-
Breast Cancer in Younger Women	-	8,350	(8,350)	-	-
Increasing Screening Uptake in wWomen with Learning Disabilities	-	2,000	(2,000)	-	-
Understanding the Role of Matrix Stiffness	-	10,000	(10,000)	-	-
Education Event and Awards	-	21,000	(21,000)	-	-
	919,717	1,134,759	(467,595)	(33,053)	1,553,828

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

29 Restricted funds

Previous year:	At 1 April 2023 £	Incoming resources £	Resources expended £	Transfers £	At 31 March 2024 £
AWHA Projects	16,786	-	-	-	16,786
Forever Manchester and NHS Charities Together Project	-	28,375	(5,881)	-	22,494
Research Salary	-	1,000	-	(1,000)	-
Investigating The Effects of Preventative Tamoxifen	-	15,850	-	(15,850)	-
Predicting the Outcomes of Risk-Adapted Screening (POSSUM)	-	400	-	(400)	-
Alcohol Consumption and Increased Risk of Breast Cancer	-	18,175	-	(18,175)	-
Investigating Prevention Using a Human Tissue Ex-Plant Model	-	21,500	-	(21,500)	-
Breast Cancer in Younger Women	-	25,980	-	(25,980)	-
Addressing Health Inequalities	10,100	32,175	(12,275)	2	30,002
Outreach and Awareness	-	10,058	(12,154)	2,096	-
Training Suite for National Breast Imaging Academy	411,020	-	(411,020)	-	-
Building the National Breast Imaging Academy	237,703	262,642	-	-	500,345
Academy Fundraising Campaign	-	13,440	(13,440)	-	-
Genes PHD to be allocated	350,090	-	-	-	350,090
Search for Hidden BRCA Mutations PHD	137,410	-	(137,410)	-	-
	1,163,109	429,595	(592,180)	(80,807)	919,717

29. Restricted funds

AWHA projects

The Asian Women's Health Awareness Campaign will research how to better promote the importance of breast screening to ethnic minority communities from South Asia. This work stream is now part of our Health Inequalities fund and will support the production of videos.

Forever Manchester and NHS Charities Together Project

Two-year grant to support our work in addressing health inequalities. Funding for the hire of a Health Inequalities Officer and to enhance our efforts to improve breast screening uptake among different communities in Manchester.

Investigating the Effects of Preventative Tamoxifen

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

Predicting the Outcomes of Risk-Adapted Screening (POSSUM)

This project focuses on enhancing early detection and breast cancer screening through the use of microsimulation—a sophisticated computer programme that analyses data to predict the outcomes of risk-adapted screening.

Alcohol Consumption and Increased Risk of Breast Cancer

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

Investigating Prevention Using a Human Tissue Ex-Plant Model

Researchers will conduct in-depth studies to determine if our ex-plant models maintain key cell types, gene expression, and respond to treatment similarly to matching breast tissue samples from clinical prevention trials. Once fully verified, this lab-based model will provide a platform for testing new prevention treatments for women at high risk of developing breast cancer.

Breast Cancer in Younger Women

This study aims to improve risk estimates for breast cancer in younger women (known as young onset breast cancer, YOBC), for whom cancer is typically more aggressive and has differing risk factors to postmenopausal breast cancer.

Addressing Health Inequalities

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

Health Inequalities Roundtable Events

A programme of roundtable meetings for researchers, community groups, and other stakeholders working in this area. This will include the organisation, delivery, facilitation, and reporting of outcomes from these events. The aim is to use the insights to strengthen our strategy and to share findings with researchers and community groups involved in this work. The overall goal is to improve collaboration, prevent duplication of efforts, and support women in accessing the services they need.

Videos to Address Health Inequalities

A co-production project with community representatives and researchers to develop a series of videos that address concerns, answer common questions, and promote the importance of breast awareness and screening among women from South Asian and Black communities.

Outreach and Awareness

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

Community Hub

Converted horsebox, now a mobile branded unit, serves hot drinks and snacks while providing a welcoming space to share important health information with the public. The hub travels to different communities, creating a friendly and approachable environment where women can feel comfortable engaging in conversations, asking questions, and accessing essential information. Funding supports the upkeep, maintenance, storage, insurance, and provisions needed to keep this valuable service running.

Training Suite for National Breast Imaging Academy

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

Building the National Breast Imaging Academy (Academy)

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

Gene PhD Research

Restricted income received from a legacy to create the Doctor Alan H. Gowenlock PhD Studentship award. The funds will enable the Prevent Breast Cancer scientists to continue their research into how the BRCA genes work and why they cause such a dramatic increase in breast cancers.

Increasing screening uptake in women with learning disabilities

This project aims to address disparities by empowering women with learning disabilities through tailored education and personalised support. By providing accessible resources and guidance, we can help ensure that no one is left behind in the fight against breast cancer.

Understanding the role of matrix stiffness

This study aims to understand how matrix stiffness affects normal breast cells and to identify novel biological processes that could be targeted with riskreducing therapies to help lower the risk of breast cancer.

Education Event and Awards

Bringing together breast service team from across Greater Manchester. The event featured high-quality professional development sessions, sharing the latest knowledge, innovations, and best practice. It concluded with an uplifting awards ceremony, celebrating outstanding achievements and recognising individuals who have made a significant contribution to breast services in our region.

30 Analysis of changes in net funds

The charity had no material debt during the year.

31 Cash generated from/(absorbed by) operations

	2025 £	2024 £
Surplus/(deficit) for the year	643,321	(59,119)
Adjustments for:		
Investment income recognised in statement of financial activities	(57,370)	(47,407)
Fair value gains and losses on investments	(17,876)	(62,199)
Depreciation and impairment of tangible fixed assets	1,105	656
Movements in working capital:		
Decrease in stocks	5,659	5,535
(Increase) in debtors	(251,138)	(46,317)
(Decrease)/increase in creditors	(58,805)	74,494
Cash (absorbed by)/generated from operations	264,896	(134,357)


More
research
More
lives sav
prevent
breast
cancer
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prevent breast cancer


prevent breast cancer


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prevent breast cancer


prevent breast cancer


PREDICT PREVENT PROTECT

Prevent Breast Cancer
Prevent Breast Cancer Research Unit
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Prevent Breast Cancer
Using Science to Save Lives

Prevent Breast Cancer
Registered in England No. 4831397 | Registered Charity No. 1109839

Annual Report & Financial Statements 31st March 2025

Final Audit Report 2025-12-04

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Prevent Breast Cancer

England & Wales - Charity number 1109839

Accounts



prevent breast cancer

Prevent Breast Cancer

(Formerly Prevent Breast Cancer Limited)

Annual Report and Financial Statements

For the year ended 31 March 2024


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breast
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“Together we are making strides toward a future where breast cancer is preventable”.

A Message from our Chairman

Dear Friends and Supporters,

What a year it has been for Prevent Breast Cancer. Our team is growing rapidly, which is enabling us to diversify our charitable activities and secure our future fundraising efforts. This expansion is crucial as we continue to pursue our mission to prevent breast cancer for future generations. A warm welcome from me to all the new members of the Prevent Breast Cancer team.

Our top priority remains the National Breast Imaging Academy. I'm thrilled to report that the hospital has given the green light to advance this critical project, recognising how essential the Academy is – it means more mammograms, more research, and more lives saved. We have an exciting year ahead as we work to raise the remaining funds to make this vision a reality and futureproof breast cancer screening in the UK.

We are also delighted to have received a significant grant from Forever Manchester and NHS Charities Together for our work to address health inequalities. This support has enabled us to recruit our Health Inequalities Officer, who will play a vital role in raising awareness about the signs and symptoms of breast cancer and the importance of breast screening, particularly in Greater Manchester's ethnic and socially deprived communities—what we term as the "hardly reached."

Breast cancer does not discriminate, and that's why our approach to awareness is multi-generational. This year, we have delivered even more Health Hour talks to everyone from secondary school students to large companies, aiming to raise awareness year-round, not just during Breast Cancer Awareness Month. You can read more about our impactful awareness work, like our recent campaign at Piccadilly Train Station in November 2023, on page 25.

We've also made a small but significant investment in a converted horsebox, transforming it into a mobile community hub. This "cuppa and a chat" initiative allows us to engage with women – and men – throughout Greater Manchester, providing a welcoming space to discuss breast health and important information on breast screening, including how to access it and why it is so important. We're looking forward to making the most of this unique tool in the coming year.

On the research front, we are proud to say that our inaugural Prevent Breast Cancer Research Conference, which took place in September 2024, was a resounding success. World-renowned international speakers joined our Manchester-based experts to deliver lectures on both clinical and lab-based research, with highlights outlined on page 18. We're looking forward to making this conference an annual event, so watch this space!

The Prevent Breast Cancer Board would like to thank all our supporters, patrons and ambassadors for their unwavering support and dedication this year. Together, we are making strides toward a future where breast cancer is preventable.

Eamonn O'Neal
Eamonn O'Neal (Nov 27, 2024 12:47 GMT)

Eamonn O'Neal DL
Chairman of Trustees

Prevent Breast Cancer Using Science To Save Lives



About Us

The Need

- Breast cancer is the most common cancer in the UK.
- Each year, almost 57,000 people in the UK are diagnosed with breast cancer.
- Around 11,500 people lose their lives to the disease.
- Breast cancer is one of the leading causes of death in women under 50 in the UK.
- Around 400 men are diagnosed every year.
- In the UK, rates of breast cancer in women have increased by 24% in the last 30 years and are predicted to rise even further.
- In 2021, just 4.6% of government healthcare spending was directed to the prevention and early detection of all diseases (excluding Covid-19).
- We believe more needs to be done, which is why the research we undertake is absolutely vital.

Our Mission: Predict, prevent, protect

Prevent Breast Cancer is committed to using science to save lives. Our mission is to make breast cancer a preventable disease for future generations by funding vital research into its prediction, prevention, and early detection, so that no one has to go through it in the first place.

Prevent Breast Cancer is located in The Nightingale Centre and Prevent Breast Cancer Research Unit in Greater Manchester. The charity raised £2 million for its construction, which was completed in 2007, and has since contributed a further £2.45 million to its operation.

The Centre houses the Greater Manchester NHS Breast Screening Programme and the Family History Risk and Prevention Clinic. It also serves as the base for several of our researchers, whose innovative clinical studies aim to more accurately predict those at increased risk of breast cancer, so that preventative interventions can be offered to these women. Our home within the Centre ensures that there is a diverse cohort of breast cancer patients available to participate in our research.

Primarily a research-focused charity, Prevent Breast Cancer supports projects related to the prediction, early diagnosis, and prevention of breast cancer. Since becoming a registered charity in 1997, we have committed £5.1 million in grants to clinical and laboratory research aimed at preventing breast cancer. We have achieved some huge breakthroughs, including identifying previously unknown gene fragments that cause breast cancer and revolutionising screening procedures.

We have also invested £660,000 in the publication and dissemination of our research grants across the UK and internationally and a further £2.4 million in prevention education and breast awareness initiatives, striving to address health inequalities and enhance community health.



Public Benefit

Our Trustees are aware of the Charity Commission's guidance on public benefit. Given that our work and the funds we raise are entirely dedicated to research into the prediction, prevention, and early detection of breast cancer, the Trustees believe that the charity meets the public benefit test criteria. Additionally, our outreach and awareness activities further enhance public benefit by educating communities about breast cancer prevention and early detection. We provide pastoral support to The Nightingale Centre patients and staff and we are committed to building The National Breast Imaging Academy to futureproof UK breast screening and improve public health services.

Grant Making Policy

Our grant making seeks to further the prediction, prevention and early diagnosis of breast cancer. We often support the research teams at The Nightingale Centre and the Manchester Breast Centre, but we also accept applications from researchers from institutions throughout the UK. Prevent Breast Cancer is a non-commercial partner of the National Institute of Health Research.

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

Applications are assessed based on the research plan, relevance to breast cancer research, expected outcomes and the potential impact on breast cancer prevention. Projects that do not meet Prevent Breast Cancer's criteria are not considered for funding. The SAB individually reviews the eligibility of each application.

We have a rigorous system in place to review grant applications. Applications requesting more than £30,000 are initially reviewed internally by a SAB member independent of the project. If deemed suitable, the application is then reviewed by at least two external reviewers who are also independent of Prevent Breast Cancer and the host institution. Each reviewer completes a review form and provides a final summary score, justifying their recommendation.

For funding requests between £10,000 and £30,000, three members of the SAB, independent of the project, conduct an internal review. To be considered, applications must clearly address our core areas of prediction, prevention, or early detection.

The expert reviews are then presented to the Board of Trustees, which makes the final funding decision. To ensure impartiality, any SAB member with a conflict of interest is excluded from the discussion and decision-making process.

Funding requests of £10,000 and under—such as those for small pilot projects, consumables and/or equipment, or contributions to existing active research studies—are not sent for peer review. Instead, these requests are assessed for suitability by a SAB member, and the final decision is made by the Board of Trustees.

Charitable Activity

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

We spent **£1,299,381** on Charitable Activity

We spent **£411,020** on the refurbishment of an existing space into a Training Suite and an additional **£137,671** to fund a Genetic Research PHD and further research.

The charity holds

£919,717

as restricted income carried forward to 2024-2025 for future charitable expenditure.

Restricted reserves include:

£500,345
for the building of a National Breast Imaging Academy

£350,090
for gene research PhDs

£46,786
for addressing health inequalities

£22,492
as part of the Forever Manchester Grant

Digital Impact

Digital platforms and media have become vital tools for raising awareness about breast cancer, significantly enhancing our outreach and engagement efforts. Over the past year, our digital presence has continued to grow, allowing us to connect with a broader audience, disseminate crucial information, and foster a supportive community. From our website to social media channels, these platforms have proven essential in amplifying our message and driving our mission forward.



Over the last year, we had 201,482 visits to our website (up 8.14% from the year before).

The most popular three pages visited were The Nightingale Centre page, with 8451 views (up 140%), our Signs and Symptoms page, with 7931 views and our Shop page, with 6456 views (up 378%).

Our YouTube videos of our experts discussing different topics related to breast cancer had a total of 7585 views.

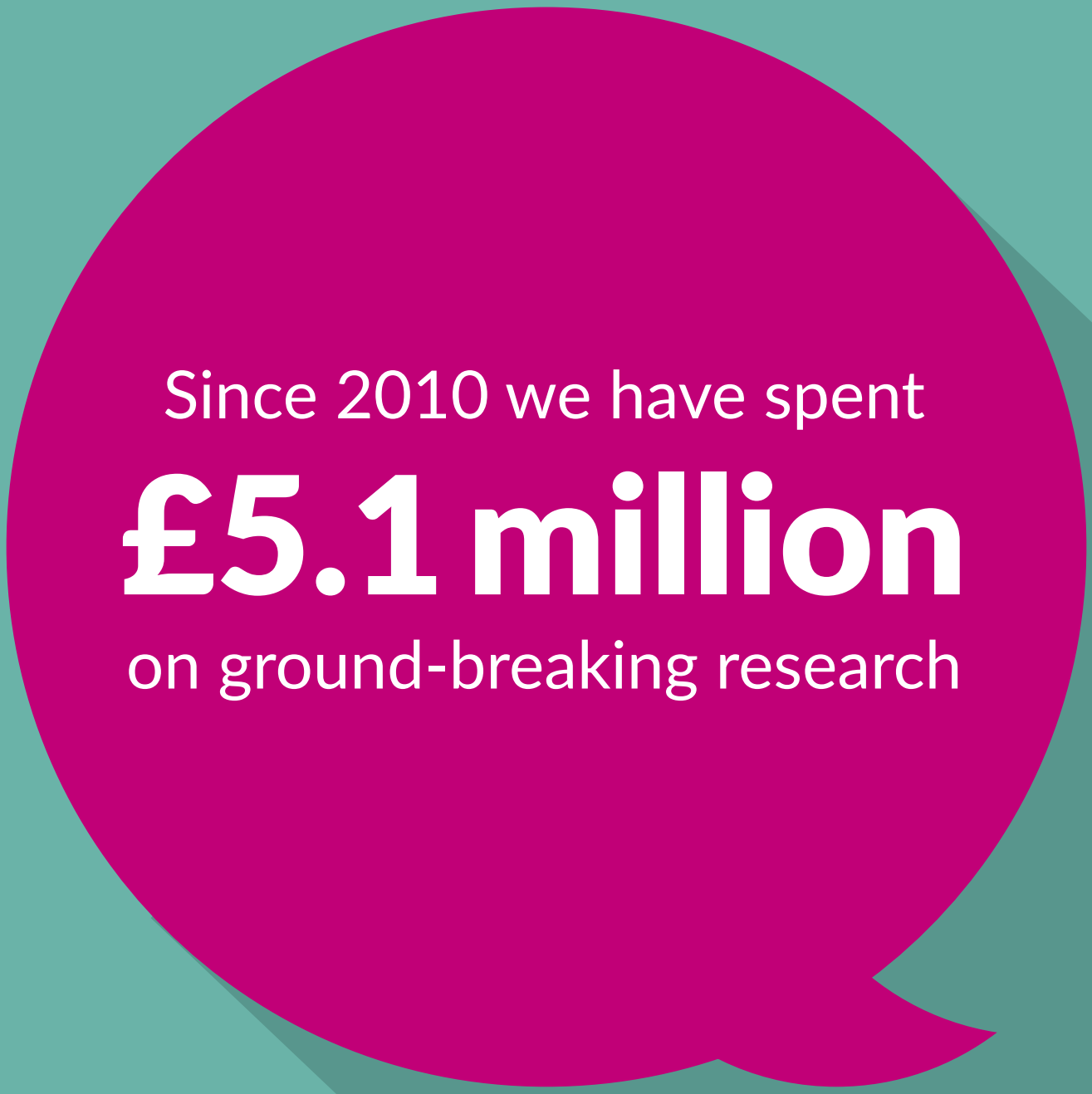
Our top 5 videos most viewed videos on YouTube were:

- What happens at a mammogram
- Breast Cancer in Men
- What are SNPs
- Diet and breast cancer risk
- HRT and Menopause

On Instagram, our most viewed reel featured Patron Victoria Ekanoye demonstrating how to check your breasts, amassing 30.7K views. Instagram has proven to be a crucial educational tool, allowing us to reach a wide audience with informative and engaging content. Other popular reels included:

- What is Breast Density: 10.3K views
- Clip of Prevent Breast Cancer's founder Lester Barr's recent TED Talk at TEDx Warrington on "How We Prevent Breast Cancer": 5.7K views
- Anastrozole Licensed to Help Prevent Breast Cancer: 4.6K views
- How to Check When You Have Lumpy Breasts: 2K views

In the past 12 months, we've secured 600 pieces of media coverage including BBC Breakfast, North West Tonight, Granada Reports, and The Guardian.


Since 2010 we have spent
£5.1 million
on ground-breaking research

Our Research Programme

Our work is conducted in partnership with numerous highly regarded research facilities throughout the UK. We fund research from institutions nationwide, fostering a collaborative network dedicated to advancing breast cancer prevention. Regionally, our researchers are part of the Manchester Breast Centre, a group of scientists and clinicians united in their commitment to breast cancer prevention research. This virtual centre brings together leading experts who share our vision of making breast cancer a preventable disease. Collaborating nationally and internationally with world leaders in cancer prevention, we enrich our research with diverse expertise and insights, enhancing the potential for groundbreaking discoveries.

Our Philosophy

While many labs and pharmaceutical companies around the world focus on developing new drugs and treatments for breast cancer, Prevent Breast Cancer takes a different approach: we believe that prevention is better than cure. Breast cancer treatments such as surgery and chemotherapy can be incredibly gruelling. To minimise this trauma and ensure everyone survives, prevention and early diagnosis are essential. For that reason, Prevent Breast Cancer is the only UK breast cancer charity funding groundbreaking research solely aimed at preventing the disease for future generations.

Risk Prediction

At Prevent Breast Cancer, we aim to refine the mechanics of predicting women's risk of developing breast cancer, allowing for personalised preventive assessments and treatments.

Historically, you may have heard statistics like "1 in 9", "1 in 8", or "1 in 7" regarding the average risk for a woman in the UK to develop breast cancer. However, these figures can be misleading. We now understand that breast cancer risk varies widely among individuals.

At one extreme are women with high-risk genetic mutations like BRCA1 or BRCA2, who face up to an 80% chance of developing breast cancer. On the other end of the spectrum are women with a low genetic and lifestyle risk, where the likelihood might be around 1 in 50. Most women fall somewhere in between, with the average risk for those without high-risk genetic mutations or a family history of breast cancer estimated around 1 in 20.

Today, we have advanced tools that allow us to predict a woman's individual risk of breast cancer with increasing accuracy. This involves genetic testing - for both high-risk genes and common genetic variants - as well as low-dose mammography to assess breast density and evaluating lifestyle risk factors. These efforts have been pivotal achievements of our research team over the past decade, led by Professor Tony Howell and Professor Gareth Evans. Accurately predicting breast cancer risk represents a crucial advancement toward effectively preventing the disease.

Research Strategy

Our vision to prevent breast cancer begins with addressing all the causes and risk factors, a complex task due to the multifactorial nature of the disease. Unlike other cancers, breast cancer results from a combination of several risk factors working together.

Our prevention research strategy is targeted and specialist, built upon four main pillars of research, each targeting a specific aspect of breast cancer prevention:



Gene Research

Understanding genetic risk is fundamental to our strategy. We investigate major gene mutations, such as BRCA1 and BRCA2, and tiny gene variations called SNPs that significantly impact breast cancer risk. By identifying these genetic factors, we can better predict who is at high risk and offer targeted preventative measures.



Screening & Early Detection

Early diagnosis is crucial for effective prevention. Breast screening can detect pre-cancerous changes before invasive cancer develops and can identify small breast cancers at Stage 1 before they become life-threatening. Our research focuses on enhancing the precision and efficacy of the UK breast screening programme. By developing advanced risk prediction models, we aim to better target high-risk individuals and optimise screening frequency, thereby improving early detection and intervention outcomes.



Lifestyle & Environmental Risk Factors

Modifying lifestyle risk factors is a key component of our prevention strategy. Factors such as diet, alcohol intake, and smoking significantly increase breast cancer risk. Led by research dietitian Professor Michelle Harvie and her team, our research explores how changes in these areas can reduce overall risk, offering practical prevention advice to the public. Ongoing research is also needed to understand the link between environmental chemicals and breast cancer.



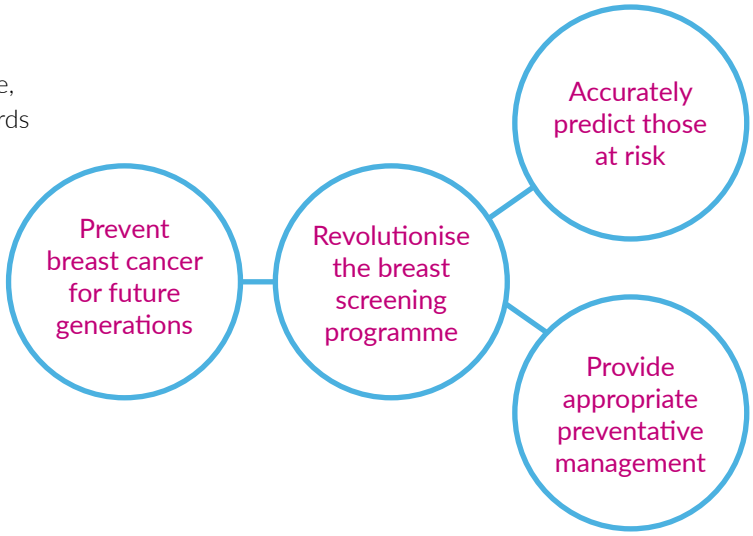
Preventative Drugs

Another crucial aspect of our strategy is the use of risk-reducing drugs for high-risk women. While tamoxifen, anastrozole, and raloxifene are currently approved by NICE guidelines in the UK, they have some unpleasant side effects and are not effective for all women. We are investigating their effectiveness and continue to search for additional options to broaden the preventative measures available.

By integrating these four pillars—gene research, screening and early detection, lifestyle and environmental risk factors, and preventative drugs—our comprehensive strategy aims to address all areas of breast cancer prevention, ultimately working towards a future where breast cancer can be prevented entirely.

Future Goals

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



Gene Research

Investigating the impact of gene mutations and variations on breast cancer risk.

- Identify all remaining undiscovered high-risk and intermediate-risk genes.
- Identify all genetic variations (SNPs) linked to breast cancer across every ethnic group and community, both nationally and internationally.
- Develop new tests for risk prediction, such as polygenic risk scores and new biomarkers.

Screening & Early Detection

Developing innovative screening methods to ensure early and accurate diagnoses.

- Improve screening accuracy through new technology.
- Enhance early diagnosis for women with high breast density and for cancers missed by current technology.
- Increase understanding of why breast density raises breast cancer risk.
- Develop tools that accurately predict individual breast cancer risk.
- Create targeted screening methods adapted to an individual's predicted risk.
- Improve screening uptake through collaboration with the NHS and grassroots organisations.
- Develop new approaches for screening and prevention in women under 50, the current age of eligibility for breast screening in the UK.

Risk Reduction

Researching modifiable risk factors to lower breast cancer risk.

- Discover mechanisms by which known risk factors influence breast cancer onset.
- Identify mechanisms for reducing known risk factors, such as diet, exercise and lifestyle interventions.
- Identify biomarkers indicating response to risk-reducing measures.
- Develop an effective lifestyle management programme to reduce breast cancer risk.

Preventative Drugs

Investigating drugs to reduce breast cancer risk.

- Develop models for testing new and repurposed drugs for breast cancer prevention.
- Identify tests for responsiveness to preventative drugs.
- Support clinical trials of new or repurposed drugs.
- Promote awareness of the drugs currently available for prevention.



Research Projects & Updates

Gene Research

Breast Cancer in Younger Women

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

Project Lead: Dr William Tapper, University of Southampton.

Update: DNA samples from 851 young breast cancer patients were genotyped, which refers to the process of determining the genetic makeup of an individual by identifying sequences or variations in their DNA. These data were quality controlled to ensure accuracy. The remaining cohort of young onset breast cancer patients (2,094 women) was genotyped in six batches, and Dr Tapper's team combined this data into a comprehensive set of 2,811 young onset breast cancer patients and just over 1.5 million SNPs (single nucleotide polymorphisms are tiny faults or variations in genetic make-up that can lead to increased cancer risk). Dr Tapper's team updated the long-term health records of these patients using NHS England data, tracking their progress over an average of 17.1 years and survival outcomes up to 2023.

Moving forward, they aim to evaluate the accuracy of the existing polygenic risk score and develop a new PRS that will be optimised for young onset breast cancer patients. This PRS will be validated using data from the Breast Cancer Association Consortium. They will also use data from the POSH cohort to identify SNPs associated with the number of tumour infiltrating lymphocytes, the white blood cells which invade tumours and play an essential role in how a patient responds to treatment.

The Search for Hidden Mutations –

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

Breast cancer has long been recognised to run in families, with a significant breakthrough occurring in the 1990s when researchers mapped the human genome and identified BRCA1 and BRCA2 as the primary genes responsible for familial breast cancers. Since then, other breast cancer genes such as PALB2, PTEN, TP53, ATM, and CHEK2 have been discovered. Despite these advances, some families with a strong history of breast cancer still test negative for known gene mutations, suggesting an undiscovered genetic fault.

Professor Gareth Evans, Professor of Clinical Genetics at the Prevent Breast Cancer Research Unit in Manchester, recently suggested that a single BRCA3 gene is unlikely to be found. Instead, he believes that undiscovered mutations may be hidden within or around the genes we already know about. Supporting this hypothesis, recent research in Manchester has identified hidden cancer-causing DNA mutations in three families with a history of breast and ovarian cancer.

Standard DNA testing examines the coding regions of DNA, known as 'exons', which contain instructions for making proteins. These exons are separated by non-coding regions called 'introns'. The gene can be likened to an instruction manual, where exons are the chapters, and introns are the spaces between chapters. Previously, introns and other non-coding areas of DNA were considered 'junk DNA,' but recent findings suggest that these regions may hold critical mutations contributing to breast cancer.

As more is discovered about DNA each year, it becomes clear that the so-called 'junk DNA' plays crucial roles in gene regulation. Standard DNA testing typically focuses on exons, leaving mutations within non-coding areas such as introns undetected. Recently, cancer-causing mutations were found in non-coding DNA just in front of the first exon of BRCA1.

The search for other hidden DNA mutations is ongoing and Prevent Breast Cancer have funded a PhD studentship to carry out this research aiming to uncover more mutations in non-coding DNA. This research will be conducted in the labs of Dr Miriam Smith and Dr

Emma Woodward at the University of Manchester and will directly enhance the diagnosis of breast and ovarian cancers in families where no mutations have been identified. Additionally, the study aims to understand how intron mutations affect gene function, potentially leading to new treatment strategies.

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

Update: Ffion Langston started her PhD in January 2024. She completed her initial training provided by the University and submitted her literature report on BRCA1 pathogenic variants, which will be reworked for publication as a review article.

For Ffion's project work, the team are coordinating with the University's Genome Editing Unit, where she will learn CRISPR genome editing techniques to create a breast tissue cell line containing our initial BRCA1 variant of interest for downstream experiments. Additionally, she has designed pyrosequencing primers for some initial ATM promoter methylation analyses.

Screening & Early Detection

Predicting the Outcomes of Risk-Adapted Screening

This project focuses on enhancing early detection and breast cancer screening through the use of microsimulation—a sophisticated computer programme that analyses data to predict the outcomes of risk-adapted screening. Microsimulation models are invaluable tools for answering complex questions about screening without the need for costly and impractical clinical trials. By simulating various scenarios, these models can provide insights into the effectiveness of different screening strategies.

The research aims to refine the implementation of risk-adapted screening based on breast density, building on current trials investigating screening methods for women with high breast density. This approach has the potential to significantly improve early detection and intervention, ultimately leading to better outcomes for women at high-risk of developing breast cancer.

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

Update: The team has gained access to OncoSim-Breast, familiarised themselves with the model and online platform, and received training on microsimulation models. They have also completed a comprehensive literature review to identify parameters that need updating to adapt OncoSim-Breast for NHS breast screening.

Moving forward, the team will validate the adapted model using NHS screening data and gather input from patients and the public (PPI). They will then use the model to predict outcomes of a UK-based risk-adapted screening programme, disseminate their findings through peer-reviewed publications, and apply for follow-on funding.

Lifestyle and Environmental Risk Factors

Alcohol Consumption and Increased Breast Cancer Risk

This project aims to explore the most effective strategies for raising awareness about the link between alcohol consumption and breast cancer. Specifically, we will identify tools to help middle-aged women reduce their alcohol intake, including positive framing of health messages to encourage behavioural change.

Project Lead: Dr Emma Davies, Oxford Brookes University

Update: The project successfully ended in March 2024 and had several key findings. The project identified four audience segments based on psychological and demographic profiles: Hard Hitters, Sensitive Storytellers, Hard-hitting Compromisers, and Campaign Doubters. It highlighted the preference for evidence-based media like podcasts and the importance of discussing statistics in relatable ways.

Behaviour Change Techniques (BCTs) such as substitution and social support were found effective, while challenges included addressing societal norms and stigma associated with alcohol consumption among women. The SPACES (Storytelling Promoting Alcohol Choice, Empowerment, and Sharing) intervention proposal aims to leverage personal stories and practical tools to promote alcohol reduction and support behaviour change.

Preventative Drugs

Investigating The Effects of Preventative Tamoxifen

This study aims to compare the composition of breast tissue from women in clinical trials before and after taking preventative drugs, such as tamoxifen, to identify markers indicating whether women are responding to the treatment. By understanding why preventative drugs are effective in only about half of high-risk women, we can better tailor preventative treatments to individuals. This personalised approach could spare many women from unnecessarily experiencing tamoxifen's challenging side effects.

Project Lead: Dr Andrew Gilmore, University of Manchester.

Update: The pilot project concluded in June 2024, successfully collecting preliminary data essential for securing funding for a larger project funded by CRUK. This project will further investigate tamoxifen's effectiveness and investigate the relationship between breast density and breast cancer risk.

Investigating Prevention Using a Human Tissue Ex Plant Model

Our previous research developed an ex plant model, which allows fragments of human breast tissue to be cultured in the lab. This follow-on project will conduct in-depth studies to determine if our ex plant models maintain key cell types, gene expression, and respond to treatment similarly to matching breast tissue samples from clinical prevention trials. Once fully verified, this lab-based model will provide a platform for testing new prevention treatments for women at high risk of developing breast cancer.

Project Lead: Dr Hannah Harrison, University of Manchester.

Update: Anthony Wilby has been selected as the PhD student and is now working full-time on the project under the supervision of Dr Hannah Harrison. Dr Harrison and Anthony Wilby have published a methods paper providing a detailed account of the ex plant model's development and optimisation in the Journal of Mammary Gland Biology and Neoplasia (April 2024). Additionally, Dr Harrison recorded a webinar titled A Novel Pre-Clinical Model of the Normal Human Breast for TheWell Bioscience, and Dr Harrison and Anthony Wilby have created a user-friendly lab guide to using the model, which will be published in the coming months on TheWell Bioscience website. Both Dr Harrison and Anthony have presented their work at conferences in Switzerland, Manchester, Liverpool and London, further disseminating their findings to the global scientific community.

During the initial phase of this project, Dr Harrison and Anthony Wilby successfully compared different gels for culturing breast tissue, ultimately selecting a superior option that enhances tissue preservation and viability. This achievement was crucial in optimising the model.

Another key advancement has been extending the tissue culture period to 14 days, allowing for more comprehensive studies of tissue and drug effects. This extension provides a longer window to observe and analyse tissue responses, improving the model's utility for studying breast cancer prevention strategies.

They are also optimising tamoxifen dosages to compare drug effects in the model with patient responses. Early data indicate that some tissue samples respond well to treatment, while others do not, mirroring patient reactions. Moving forward, they will collect samples from women in the BCCP trial, who will receive tamoxifen for 3 months, to validate the model by comparing responses in both explant and patient tissues.

We received 200 pieces of media coverage on our Hydrogel Breast Model project, including a feature in The Guardian.

Research Plans for 2024-25

Funding Round 2025

In early 2025, Prevent Breast Cancer will launch its next funding round, inviting applications for innovative research projects focused on breast cancer prevention across our four research pillars. We are particularly interested in projects focused on advancements in breast screening methodologies, strategies for preventative drugs, lifestyle modifications, and surgical prevention techniques. Additionally, we seek proposals addressing breast cancer prevention and early diagnosis among 'hardly reached' populations, aiming to reduce disparities in healthcare access and outcomes.





Prevent Breast Cancer Research Conference

Prevent Breast Cancer proudly hosted its first-ever Research Conference on 24th and 25th of September 2024, at INNSiDE by Melia in Manchester City Centre. This two-day event was a milestone for the organisation, bringing together some of the brightest minds in breast cancer prevention research. The conference fostered crucial discussions on topics like Breast Density and Stratified Screening, Genomic Risk Prediction and Ethnicity, and Targeted Breast Cancer Prevention, offering a comprehensive look at how risk prediction and prevention strategies can shape the future.

The conference was organised by Prevent Breast Cancer and leading clinicians and scientists Professor Cliona Kirwan, Lester Barr, Sumohan Chatterjee, Dr Sacha Howell, and Professor Rob Clarke, offering an interdisciplinary platform for exploring original research and clinical developments. Attendees had the opportunity to engage with presentations from both local and international experts, creating a vibrant atmosphere of collaboration.

Key Highlights

With a focus on risk prediction and prevention, the conference featured keynote presentations from some of the most respected figures in the field. Professor Fiona Gilbert from The University of Cambridge provided an exciting update on the UK's BRAID study and its integration into personalised screening efforts. Professor Adetunji Toriola from Washington University discussed the role of Denosumab in premenopausal women with high breast density. Dr Andrea De Censi from Genoa, Italy, highlighted his groundbreaking work on low-dose therapy studies for risk reduction, while Professor Rama Khokha from the University Health Network, Toronto, shared her insights into breast cancer prevention through understanding precursor biology.

In addition to these keynote presentations, the event covered a wide range of topics including genetics, polygenic risk scores, breast density, and lifestyle interventions. Attendees earned CPD points while deepening their understanding of innovative breast cancer prevention strategies.

Three promising scientists were invited to present their latest work in proffered paper presentations. Five took part in a Dragons' Den-style session where they pitched





their research ideas for a chance to win a Prevent Breast Cancer grant of up to £10,000. In a surprise announcement, it was revealed that all five participants would receive funding, making this live grant-making round one of the conference's standout moments.

Another one of the highlights of the conference was an interactive Panel Discussion titled "How Can We Implement Risk Prediction and Prevention?", chaired by Professor Cliona Kirwan. This dynamic session invited delegates to engage with a panel of experts, focusing on how breast cancer prediction and prevention strategies can be translated into real-world public policy and NHS frameworks.

The session was opened by Andy Burnham, Mayor of Manchester, who shared his personal connection to breast cancer prevention, setting the tone for the discussion. Rebecca Hartley, a patient representative and Prevent Breast Cancer ambassador, was also invited to the stage, bringing a crucial patient perspective to the forefront.

In the 'Risk Prediction' segment, Lester Barr, Dr Emma Woodward, and Professor David French proposed ideas on personalised risk prediction as an NHS service, population gene testing to reduce rates of breast cancer, and personalised breast screening for the NHS. The conversation then opened to the floor, allowing delegates to explore the challenges and opportunities these strategies might face when implemented on a national level.

The second half of the session focused on 'Prevention', with Professor Michelle Harvie, Dr Sacha Howell, and James Harvey discussing public policy changes needed to reduce rates of breast cancer, improving access to preventative medication, and improving access to risk-reducing surgery. The audience then engaged with the speakers about these preventative options and Rebecca Hartley added her invaluable insights from a patient's point of view.

"This meeting is one of the best I attended this year"

Professor Rama Khokha praised the event, stating, "It had such an excellent mix of local and international attendees and well highlighted the dynamic Manchester scene in breast cancer prevention research and clinical translation. Frankly, this meeting is one of the best I attended this year." Delegates also commended the seamless organisation and high standards, with one noting, "I have organised and been at many conferences, and can attest, this was top quality! The presenters, facilities, and overall fluency of the event were excellent."

We are thrilled with the success of our inaugural conference and look forward to building on this momentum in the years to come. The event was made possible thanks to the generous support of our headline sponsors Hologic, TheWell BioScience, Gilead Sciences and Exact Sciences, as well as event sponsors Endomag, and Berkeley Genetics.

The National Breast Imaging Academy

More mammograms, more research, more lives saved.

We want to build the UK's first truly multidisciplinary breast imaging academy to futureproof breast cancer screening.



The Urgency

Breast cancer is the most common cancer in the UK, with every year almost 57,000 diagnoses — equivalent to over 155 every day—and approximately 11,500 precious lives lost, leaving behind grieving families and loved ones. Most worryingly of all, rates have increased by 24% in the past 30 years and are predicted to rise even further. The need for preventative measures and early diagnosis is more critical than ever.

The demand for breast imaging is growing concurrently with severe shortages of clinicians, radiographers, and radiologists. The Government recently pledged £10 million to deliver 29 new breast cancer screening units within the NHS. However, this does not address the shortage of trained staff required to carry out the screening. Nearly 10% of breast radiologist and radiographic posts are vacant nationwide, leading to the closure of several breast centres, including three in Greater Manchester (Trafford, Salford, and Stockport). This issue is particularly acute in the North West, further disadvantaging an area with high levels of social deprivation. Workforce shortages across the NHS are projected to exceed 570,000 by 2036 (The Guardian, 2023).

These shortages are only set to worsen, with the most recent Royal College of Radiologists workforce survey predicting a 40% shortfall by 2028.

The Solution: Build to Beat Breast Cancer

We have joined forces with Manchester Foundation Trust Charity to raise funds to build The National Breast Imaging Academy to train the next generation of breast imaging staff and provide more screenings, more staff, and more research.

The UK's first truly multidisciplinary breast imaging academy will allow us to:

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

The Academy will extend The Nightingale Centre, the home of Prevent Breast Cancer, and provide a solution to workforce shortages by offering space and facilities to train a sustainable workforce supporting breast services across the country. This cutting-edge building will also allow for additional research capacity into breast cancer diagnosis and treatment and enable an extra 13,000 patients to be seen each year for breast screening.

Impact to Date

The National Breast Imaging Academy team has been running virtual Academy training programmes since 2019, which has already benefited 57 hospital trusts across England.

In January 2024, the National Breast Imaging Academy Training Suite, funded by the Denise Coates Foundation and NHS England, was completed. This state-of-the-art, multipurpose teaching space within the Nightingale Centre is part of the broader capital project, enabling the Academy to significantly expand its course offerings. These courses cover a wide range of topics for both qualified staff and trainees, addressing the urgent need for more trained personnel in breast units across the UK.

The suite's national impact is profound, as it not only addresses the shortage of trained staff but also plays a crucial role in upskilling existing personnel, improving staff retention, and creating fully staffed, cost-effective breast units. With enhanced training capacity, the Academy is better positioned to contribute to the advancement of breast cancer care and prevention.

We extend our deepest gratitude to the Denise Coates Foundation for their generous donation of £411,020 to create this essential training suite.

NHS England has committed to fund the staffing and revenue costs for the National Breast Imaging Academy, awarding approximately £10 million over the last six years. The Academy project team has also secured an NHS England revenue award for hiring and maintaining specialist medical equipment used within the Academy.

The Academy is predicted to save the health economy £50 million over a 10-year period. It will also benefit the local community by providing job opportunities and widening access to NHS careers through apprenticeship schemes. Most importantly, by significantly alleviating the crisis facing the breast imaging workforce and preventing delays in breast cancer diagnosis and treatment, the Academy will save lives.

Fundraising Update

We are nearly there! At the time of writing this report, together, with Manchester Foundation Trust Charity, we have raised and designated over £3.3 million of the £3.9 million total project cost, leaving a shortfall of just under £600,000. To raise the remaining amount, we have recently launched our public appeal with new charity patron Sarah Ferguson, Duchess of York. This resulted in over 600 pieces of media coverage and an influx in donations. Other initiatives include our 100 Club Campaign, an exclusive donor circle for individuals and companies contributing £10,000 and above with the aim to raise £100,000. Our goal is to have raised the remaining funds by the summer 2025.

We are also grateful for the support from the Mayor of Greater Manchester, Andy Burnham, and MP for Wythenshawe and Sale East, Mike Kane.

Supporting Patients and Professionals at the Nightingale Centre

The Nightingale Centre and Prevent Breast Cancer Research Unit sees thousands pass through its doors each year: approximately 18,500 new patients referred by their GP after presenting with symptoms, 13,000 follow-up patients and 2,600 family history clinic patients. Many patients are accompanied by family members or close friends, adding to the number of visitors. Additionally, over 100 NHS staff work at the Centre.

We understand that attending appointments can be extremely daunting. Therefore, we strive to make every visit to The Nightingale Centre as stress-free as possible. As a charity, we have introduced several non-clinical areas in the main reception, including a coffee bar and a newly renovated gift shop.

Coffee Bar

Coffee shop income for the year was £65,110 – an increase of 10% from the previous year. Open weekdays from 9.30 am to 4 pm, the coffee bar has been serving food and drinks since The Nightingale Centre opened in 2007, providing an essential service for both NHS staff and patients.

"Over 13,000 hot drinks sold to NHS staff and patients waiting for appointments: a 15% increase from the previous year"

Gift Shop

In August 2023, our Gift Shop underwent a significant renovation, including a repurposing of the space and a complete overhaul of all merchandise. Reopening in September, the shop now offers a fresh selection of homeware, cards, and branded merchandise, with all proceeds supporting our charitable activities. Every item available in the shop is also for sale on our website, ensuring wider accessibility. Visits to our online shop increased by 378% this year compared to last!

Beyond the appealing array of items for browsing, the Gift Shop provides informative leaflets about our charity and breast cancer awareness. Our investment in refurbishing the shop was driven by its role as a welcome distraction for those waiting for appointments, while also serving as a crucial avenue for raising funds and awareness for Prevent Breast Cancer.



We are pleased with the positive feedback we have received since the shop reopened and merchandise sales in the shop, online and at events were £45,496, increasing 39% compared to the previous year. This demonstrates the continued support and interest from our community, reinforcing the shop's importance in our mission.

Our Amazing Volunteers

Both the coffee bar and gift shop are run by our dedicated team of 37 volunteers. This not only helps us keep costs down but also allows our volunteers, many of whom have personal experiences with breast cancer, to connect with those visiting the centre. We are incredibly grateful to our volunteers for their unwavering support and dedication.

"Volunteering at the coffee bar allows me to give back to a cause that deeply resonates with me. Having experienced the impact of breast cancer amongst my friends, I am passionate about making a difference. Every cup of coffee I serve is a step towards raising awareness and supporting vital research. It's incredibly fulfilling to contribute to an environment where patients and their families can find a moment of comfort and support."

Pat, Prevent Breast Cancer volunteer since 2017.

Outreach and Awareness

Each undiagnosed case of breast cancer represents a life potentially saved through early detection. At Prevent Breast Cancer, we are dedicated to ensuring that every individual has the knowledge and resources needed to detect breast cancer as early as possible.

Why Early Detection Matters

The importance of early diagnosis cannot be overstated. It can mean the difference between minor surgery and more invasive treatments like chemotherapy or radiotherapy. In fact, for every 500 women screened, one life is saved. In 2022-23 alone, nearly 19,000 breast cancers were detected through screening. Knowing breast cancer signs, symptoms, risk factors and preventative measures could save your life. This is why our work is so crucial.

Our Impactful Outreach and Awareness Initiatives

At Prevent Breast Cancer, we're actively engaged in a range of initiatives aimed at raising awareness, promoting early detection, and tackling barriers to screening uptake:

- **Community Outreach:** Through targeted campaigns, we are on the ground encouraging women to attend their screening appointments. By gathering valuable insights through outreach activities, we're continuously improving our approach to reach those most in need.
- **Health Hour Talks:** Our engaging talks reach diverse audiences, from corporate settings to community groups and schools, both in person and online. This year, we delivered 50 talks to over 5,600 people across the UK and beyond!

  We believe that it is important that breast awareness starts from a young age and so we are proud to have delivered 14 talks to high school and university students.

  - Feedback for our Health Hour talks:

    "A fantastic, intimate, honest and pragmatic conversation around breast cancer screening and a risk-based approach to breast cancer."

    "Many women were moved and inspired by the work that Prevent Breast Cancer does and will now be more vigilant about their breast health".
- **Breast Awareness Campaigns:** Partnering with organisations like Network Rail, Brands2Life and Manchester Airports Group, we take our message directly to communities with low screening uptake. From awareness buses to campaigns in train stations, we're making a tangible impact where it matters most.
- **Health Information Literacy:** We disseminate vital health information through leaflets, social media, and educational videos featuring expert clinicians. These resources empower individuals to make informed decisions about their health.
- **Offline Awareness:** We had the opportunity to raise awareness at the Girls Aloud Manchester tour dates in May 2024. As well as distributing breast checking cards, we also had an 8 second awareness advert playing on a continuous loop on the screens throughout the arena. We creatively incorporated breast awareness messaging into Girls Aloud song names and lyrics using bold fonts and colours to capture attention. Our marketing team also shared these assets on social media, reaching 18,762 people on Instagram, thanks to Girls Aloud member Nicola Roberts sharing the asset on her Instagram Stories.



The Prevent Breast Cancer Horsebox

Recognising the need for innovative approaches to promote breast health and increase screening appointment uptake, we introduced the Prevent Breast Cancer Horsebox. This converted horsebox, now a branded mobile unit, serves snacks and hot drinks and provides crucial breast health information.

Debuting at the Tour de Manc cycling event in May 2024, the horsebox is set to travel to communities across Manchester with historically low breast screening rates. Stationed in these areas, the horsebox will create a welcoming space for women to ask questions about screening and receive vital breast health information. As an added incentive, we will offer free teas and coffees to encourage women to attend their breast screening appointments, inspired by a successful initiative in Salford.

We envision the horsebox as a dynamic community hub, fostering valuable interactions and providing access to essential information in a friendly and approachable manner.

Network Rail Campaign

In November 2023, Prevent Breast Cancer carried out our 'Donate #6Minutes' four-day campaign at Manchester Piccadilly train station, during which we engaged with members of the public and asked them to donate 6 minutes of their time to complete a breast awareness survey. Partnering with a leading health communications agency, their expertise ensured that we amplified our campaign messaging. We chose 'Donate #6Minutes' because every hour, 6 people in the UK are diagnosed with breast cancer.

Staff and volunteers distributed cards with a QR code for accessing the online survey, which was also displayed on digital screens around the station. We handed out pocket-sized breast checking cards with self-examination instructions. Our celebrity patrons, Coronation Street stars Sue Cleaver and Sally Dynevor, recorded Tannoy announcements with the slogan 'See it. Feel it. Sort it,' which was displayed on station screens. Sue and Sally joined us on the campaign's first day, drawing public interest and media coverage on Granada Reports. A flash mob by our volunteers and a singer playing the piano on Saturday further enhanced engagement.

Key Highlights

The campaign successfully engaged over 1,000 individuals, providing diverse preliminary data on public breast health awareness. Additionally, 260 people shared their email addresses for more information about Prevent Breast Cancer, reflecting increased awareness and interest in our cause. The involvement of our celebrity patrons, the flash mob, and the piano performance significantly boosted public engagement. The strategic use of digital screens amplified our messaging, contributing to the campaign's overall impact.

Future Plans

The insights gathered from the survey will play a crucial role in shaping and informing the direction of future Prevent Breast Cancer breast awareness campaigns. We are now considering how to refine and improve the survey so that it can be distributed among diverse community groups throughout Manchester to gather more targeted data. We are also planning a similar awareness campaign in train stations in other UK cities, broadening the reach and impact of our breast cancer awareness efforts and extending our support beyond Manchester.

Acknowledgments

We are very grateful for the dedicated efforts of our staff, volunteers, ambassadors, partners and the team at Network Rail who played pivotal roles in the success of this breast cancer awareness campaign.

Health Inequalities

What are health inequalities?

At Prevent Breast Cancer, we are dedicated to addressing health inequalities. Despite advancements in breast cancer treatment and awareness improving survival rates across the UK, certain communities and socially deprived areas still face significant disparities in diagnosis and outcomes. We believe that a woman's chance of survival should not be determined by socioeconomic status or ethnicity, and that's why addressing health inequalities is at the core of our mission.

Why is addressing health inequalities so important?

- Breast cancer mortality rate is 17% higher for women in the most deprived areas.
- 60% of breast cancer patients in Manchester are from socially deprived groups.
- Black African and Caribbean women are more likely to be diagnosed with late-stage breast cancer.
- Survival rates for black and South Asian women are lower compared to white women.

While our primary focus is on pioneering research, we also recognise the urgency of addressing health inequalities related to breast cancer outcomes. Located at the UK's only breast cancer prevention centre and alongside the Greater Manchester Breast Screening Programme, we are uniquely positioned to implement strategies that reduce these disparities by bridging gaps in awareness, access to screening, and understanding of breast health.

With a proven track record of outreach and awareness activities in Manchester—a city known for its cultural diversity and high levels of social deprivation—we are committed to a future where breast cancer prevention is universal and equitable.

Our Approach to Tackling Health Inequalities

We understand that certain communities face disproportionate barriers to accessing screening services. Therefore, we are taking proactive steps to address these disparities:

- Health Inequalities Committee: Our dedicated committee is actively exploring strategies to remove barriers to screening and ensure equitable access for all.
- Hiring a Health Inequalities Officer: Focused on engaging with underrepresented groups, this new role will be pivotal in increasing screening uptake.
- Culturally Relevant Resources: We are tailoring our approach with multilingual video adverts and targeted outreach efforts to resonate with diverse communities, including those of South Asian backgrounds.

Forever Manchester & NHS Charities Together Grant

We are thrilled to have received a two-year grant totalling £105,000 from Forever Manchester and NHS Charities Together to support our work in addressing health inequalities. This funding has allowed us to hire a Health Inequalities Officer and enhance our efforts to improve breast screening uptake among different communities in Manchester.

Forever Manchester is Greater Manchester's Community Foundation, the only charity raising money to fund and support community activity across Greater Manchester. NHS Charities Together is the national charity supporting the NHS, providing essential support to staff, patients, and communities. Working with over 230 NHS Charities across the UK, they ensure that support reaches where it's needed most.

By tackling health inequalities head-on, we aim to create a future where every woman has an equal opportunity to access life-saving breast cancer screening and breast health information.

Future Plans

Health Inequalities Roundtable Meetings 2024-2025

Bringing Together Key Stakeholders in Greater Manchester

In late 2024 and early 2025, we plan to host two pivotal roundtable meetings to address health inequalities in Greater Manchester. These meetings will bring together vital stakeholders to collaboratively explore and understand the complex landscape of health disparities in our local community and the ongoing efforts to tackle them.

Acknowledging the numerous research projects and community initiatives underway in Greater Manchester, we have observed that most are operating in isolation, leading to minimal collaboration and occasional overlap. This fragmented approach impedes the potential for charities, community groups, and researchers to magnify their impact through informed communication and coordinated awareness campaigns.

Researchers' Roundtable Meeting: Engaging Academics and Researchers

The first meeting will focus on engaging academics and researchers. Our goal is to bring together those currently researching health inequalities to discuss their projects and foster a collaborative environment where knowledge gaps can be identified, findings can be shared, and efforts can be coordinated. This meeting aims to open opportunities for further research funding for collaborative projects and magnify the impact of our collective efforts.

This strategic effort will map ongoing projects, document completed work, and compile a directory of relevant individuals. Additionally, it will strengthen our links with universities in Manchester, promoting a more cohesive research community.

Community Stakeholders' Roundtable Meeting: Engaging Charities, VCSE Sector, and Community Groups

We are also organising a second meeting to engage community stakeholders, including charities, VCSE sector representatives, and local community groups. The focus will be to explore ongoing grassroots initiatives, particularly those working to improve cancer screening uptake, and discuss opportunities for collaboration. Our Health Inequalities Officer, Azra, has identified key areas needing attention to help more women attend screening appointments, such as transportation access and language barriers that may prevent women from booking appointments. By bringing these groups together, we aim to identify other remaining barriers and discuss strategies to address them, fostering a more unified approach to tackling health disparities and sharing successful practices to avoid duplicating efforts.

Support and Funding

We are grateful to the Zochonis Charitable Trust and Gilead Sciences for their generous donations, which will cover organisational and facilitation costs, including staff salaries, venue hire, and refreshments, for both meetings. These roundtables will enable us to create collaborative strategies to address health inequalities throughout Greater Manchester, ensuring greater impact and improved breast cancer health outcomes for all.

YEAR IN REVIEW



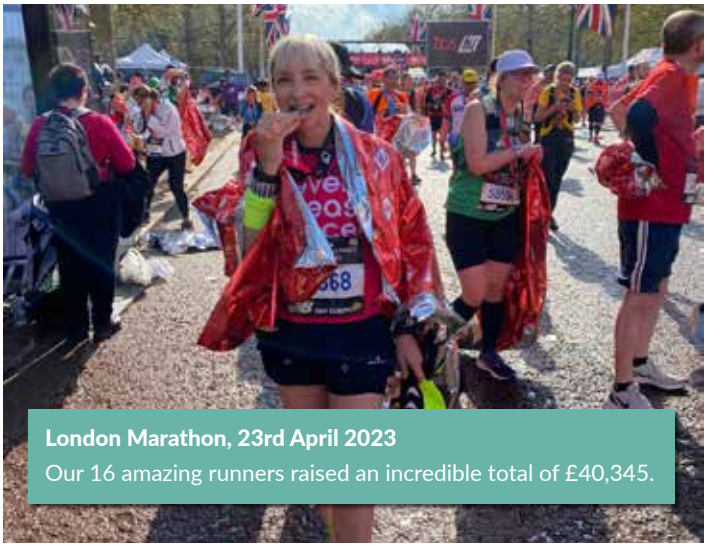
We are deeply grateful to every individual and business who has supported Prevent Breast Cancer. Whether through fundraising, donations, volunteering, promotion, research, or professional expertise, your contributions are invaluable to our mission to prevent breast cancer. The charity relies on your support, and we extend our heartfelt thanks to each and every one of you.

Here's a glimpse of the many incredible achievements made possible by our dedicated supporters this year.

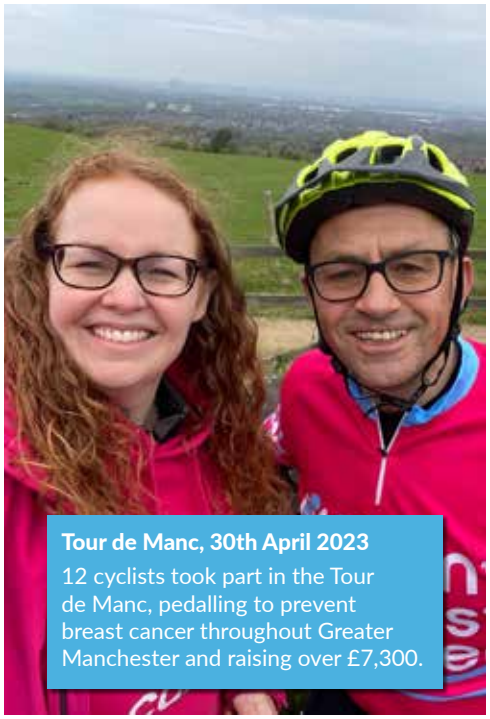
APRIL TO JUNE



Manchester Marathon, 16th April 2023
Eight runners took on the Manchester Marathon and raised £9,181.



London Marathon, 23rd April 2023
Our 16 amazing runners raised an incredible total of £40,345.



Tour de Manc, 30th April 2023
12 cyclists took part in the Tour de Manc, pedalling to prevent breast cancer throughout Greater Manchester and raising over £7,300.



Great Manchester Run 10K and Half Marathon, 21st May 2023
30 runners joined us for the Great Manchester Run and raised a total of £23,690.



MT Finance Victory at Villa Event, 1st June 2023
MT Finance organised their second fundraising football event at Aston Villa, raising over £5,400.



Bryn Ladies Circle , 2nd June 2023
160 ladies joined Christine Hughes for the annual ladies' lunch at Bryn Masonic Hall and had a fabulous time, raising just over £10,600.



Morecambe Bay Walk, 24th June 2023
We were joined by over 110 walkers as we took on the Morecambe Bay cross bay walk between Grange-over-Sands and Arnside, raising a total of £16,210.

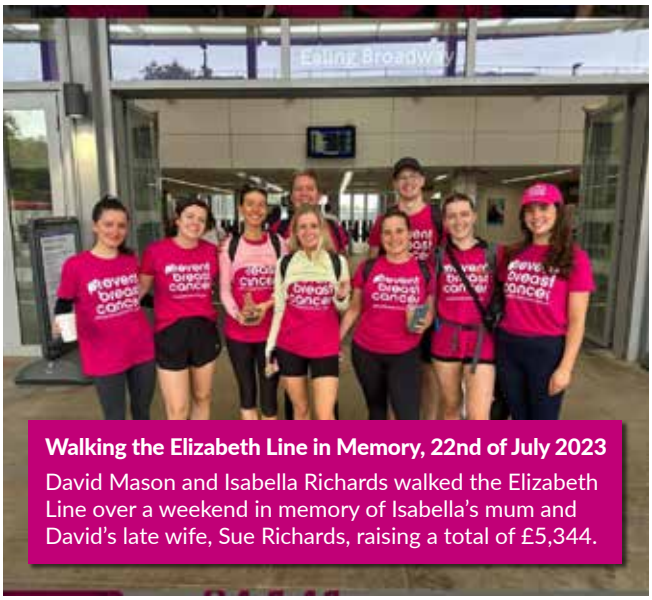
APRIL TO JUNE



Trafford Centre Abseil, 25th June 2023

13 abseilers took their fundraising to new heights at our first Trafford Centre Abseil. Together, they raised £9,680.

JULY TO SEPTEMBER



Walking the Elizabeth Line in Memory, 22nd of July 2023

David Mason and Isabella Richards walked the Elizabeth Line over a weekend in memory of Isabella's mum and David's late wife, Sue Richards, raising a total of £5,344.



Manchester Pride, 27th of August 2023

We joined the Manchester Pride Parade to celebrate 10 years of legal same-sex marriage in the United Kingdom. We adorned our float with Pride flags and handed out thousands of our self-check cards to raise awareness of breast cancer, while also celebrating the LGBTQIA+ community. Two of our supporters even got engaged during the parade!



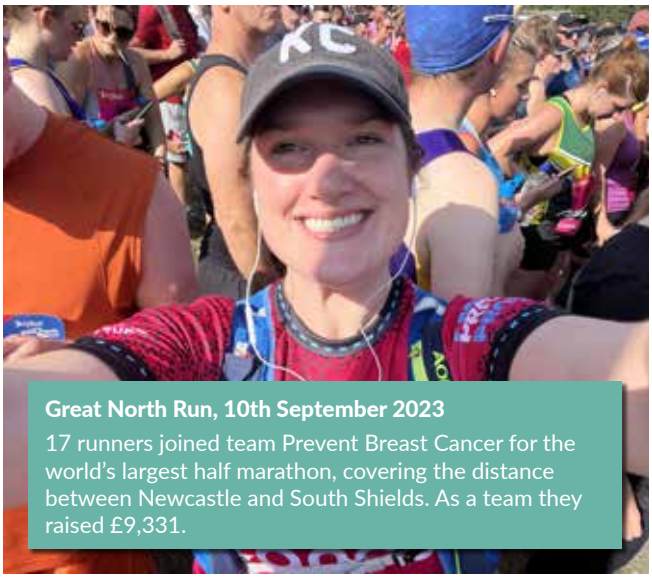
Supporter Hetty Roach Reached Everest Base Camp, September 2023

In memory of her mum who passed away from breast cancer, supporter Hetty Roach climbed to Everest Base Camp, single-handedly raising over £3,000 for Prevent Breast Cancer.



London to Brighton Cycle, 10th September 2023

A team of 25 cyclists pedalled 55-miles from London to Brighton and raised £4,675.



Great North Run, 10th September 2023

17 runners joined team Prevent Breast Cancer for the world's largest half marathon, covering the distance between Newcastle and South Shields. As a team they raised £9,331.



Camino de Santiago, 30th September 2023

A team of 20 walkers took on the Camino trek, covering a 126-kilometre route over 6 days, from the historic town of Baiona, through picturesque towns and villages, to the UNESCO World Heritage site of Santiago de Compostela. As a team, they raised an incredible £79,075.

OCTOBER TO DECEMBER



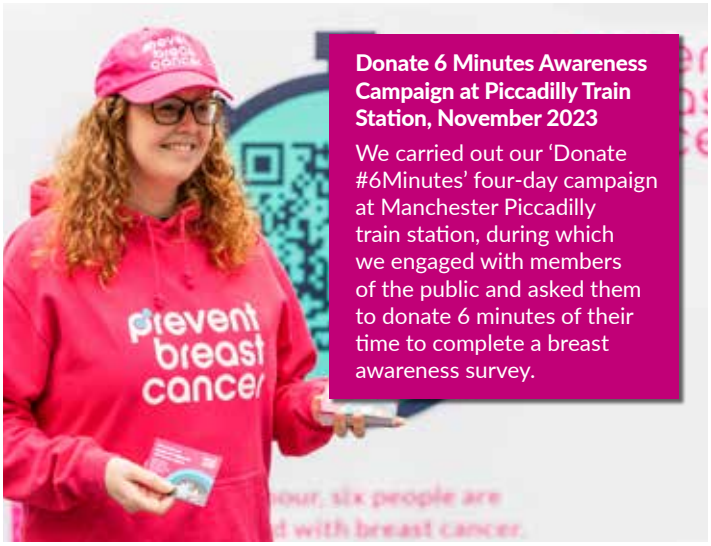
Manchester Half Marathon, 15th October 2023

4 runners took to the streets of Manchester to take on the October Half Marathon. Together, they raised £3,600.



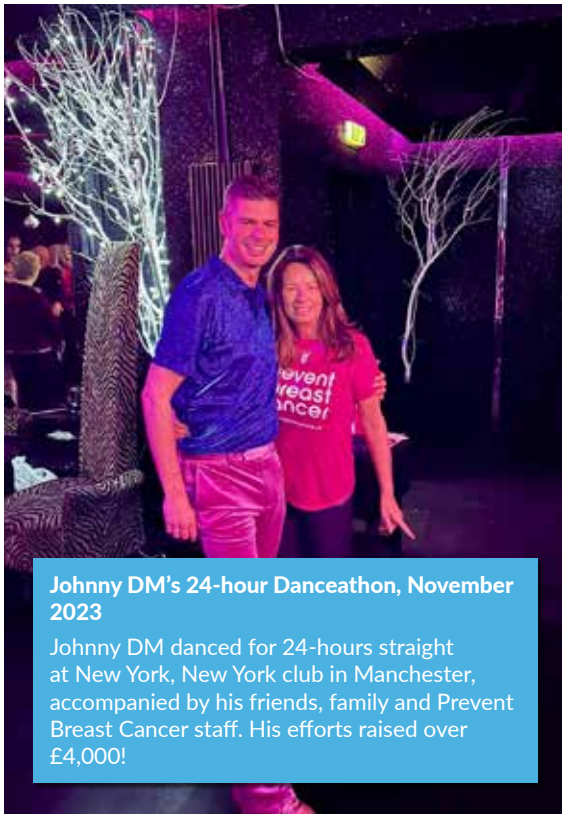
Think Pink & Sparkle Event, October 2023

Supporters Sam, Catherine and Steph's annual event, including a raffle and food, has been running for the last 13 years. Their 13th and final Think Pink & Sparkle Ladies Evening was an absolute success, raising an amazing £6,047. This brings makes their fundraising grand total a whopping £58,163!



Donate 6 Minutes Awareness Campaign at Piccadilly Train Station, November 2023

We carried out our 'Donate #6Minutes' four-day campaign at Manchester Piccadilly train station, during which we engaged with members of the public and asked them to donate 6 minutes of their time to complete a breast awareness survey.



Johnny DM's 24-hour Danceathon, November 2023

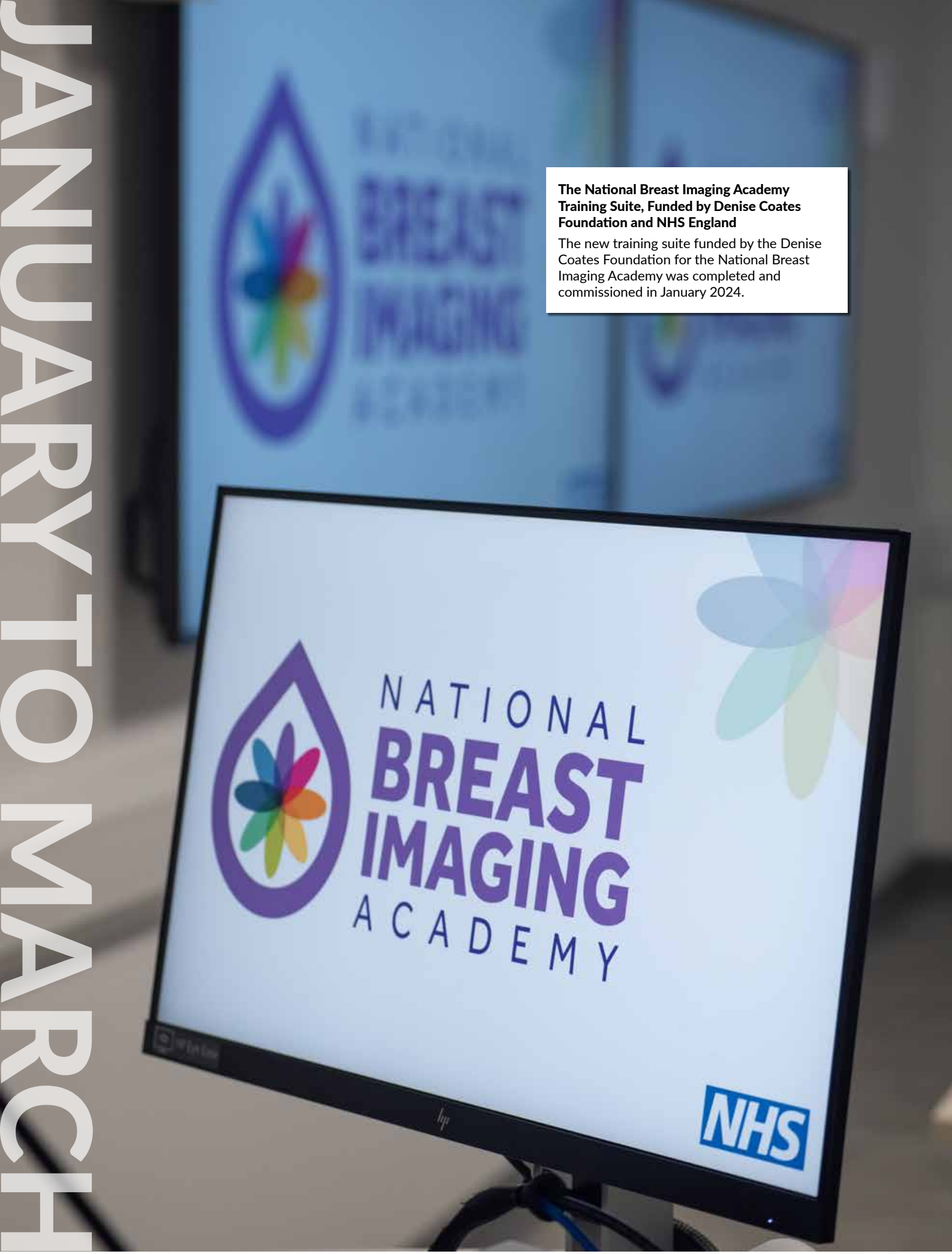
Johnny DM danced for 24-hours straight at New York, New York club in Manchester, accompanied by his friends, family and Prevent Breast Cancer staff. His efforts raised over £4,000!



Christmas Celebration, 8th December 2023

Over 500 people joined us at Manchester Cathedral for our annual Christmas celebration, a fun filled, festive afternoon of live music and entertainment, raising £8,400. And, keeping with the Christmas theme, our Christmas Cards generated over £13,821.

JANUARY TO MARCH



The National Breast Imaging Academy Training Suite, Funded by Denise Coates Foundation and NHS England

The new training suite funded by the Denise Coates Foundation for the National Breast Imaging Academy was completed and commissioned in January 2024.

JANUARY TO MARCH



Zumbathon, February 2024
Our first Zumbathon since the pandemic had over 70 people joining us to dance and shimmy their way to raising an incredible £9,365.



Paint Altrincham Pink, March 2024
Our longest running Paint Towns returned in March 2024 to raise over £10,000.

Fundraising Highlights





Paint Towns

Our Paint Your Town Pink Campaign, which has been running since 2016, saw unprecedented success this year, with 11 towns participating and raising a combined £76,940!

The towns of Altrincham, Ashton on Mersey, Bramhall, Heald Green, Cheadle Hulme, Knutsford, Macclesfield, Mobberley, Sale, Stretford, and Urmston turned pink for periods ranging from a week to a month. Local businesses, schools, and community groups in these areas sold pink items and hosted, pink-themed events and activities, demonstrating incredible community spirit and support.

Some of the campaign's highlights included:

- **Manchester Storm Ice Hockey Team's "Pink the Rink" Weekend:** An exciting and vibrant event that brought the community together at the ice hockey game, including a bucket collection and a pub crawl with some of the players.
- **Pink Lunch and Fashion Show:** A stylish gathering that combined good food and fashion for a great cause.
- **Pink Pub Crawl:** A fun and lively event that painted the town pink, pub by pub.
- **School Colour Run:** Engaging students in a colourful and active way to support breast cancer awareness.
- **Pink Networking Events, Coffee Mornings and Ladies Night:** Bringing together community members for socialising and fundraising.
- **Zumbathon:** An afternoon of high energy, movement and fundraising.

Additionally, the Cheshire Country Cricket League joined in with Paint Cricket Pink one weekend in June, featuring pink events, pink drinks, and pink clothing, further expanding the campaign's reach.

We owe a huge thanks to our ambassadors Jo Hoddes, Emma J Riley, Jen Rodger, Emma L Riley, Caroline Tiplady, Rachel Peabody, Kerri Reece, Jane Taylor, Heather Glover, Angie Hilton, Liz Copeland, Debbie Boland, Celia Hynes, Maggi Hassall, Emma Slater, the pink teams in each town and the business group Altrincham BID for their invaluable support and dedication in making this year's Paint Your Town Pink campaign the most successful yet.



Run 56 and March 31 Digital Campaigns

The Run 56 Facebook fundraising challenge involved participants covering 56km, running or walking, over the month of November. The 56km represents the almost 56,000 people who are diagnosed with breast cancer each year. The challenge pack included a pair of Prevent Breast Cancer running socks as an incentive, produced by ILoveBoobies, a South African charity dedicated to breast cancer awareness and education. For every 10 pairs of socks ordered, one South African woman in a rural community received a free breast cancer screening. 1396 people registered for the challenge, with 538 of them activating their fundraising page, raising an impressive £63,162.

Building on the success of Run 56, we launched our second digital challenge, March 31, in March. This challenge honoured the 31 people who lose their lives to breast cancer each day. Organised internally, March 31 had 125 participants who committed to running or walking 31 miles over 31 days. The campaign raised £13,436 from 66 participants, demonstrating our ability to successfully manage digital challenges both in-house and through third-party platforms like Social Sync.



Afternoon Tea Campaign

In October 2023, we launched our Pink Afternoon Tea campaign. As well as being an opportunity for people to get together for cake and a cuppa, the campaign also highlighted the importance of having those difficult conversations around breast cancer. From garden get togethers to office cake sales, every brew helped fundraise towards a future free from breast cancer. 94 people joined our Pink Afternoon Tea campaign, which has raised £10,400 to date. We are continuing to develop and expand this campaign into the next financial year.



Empowering Women's Network

In 2023, LCap Group dedicated its efforts to raising funds for our National Breast Imaging Academy capital campaign. Led by Partner, Louise Stephenson, they hosted a series of networking events known as The Empowering Women's Network, with our support in planning and delivery. These events aimed to bring together women in senior roles within Manchester to establish new business connections, empower and support women in their careers and personal lives, whilst also raising vital funds.

On the 14th of October 2023, Rowan's 'Team Empower' took on the Yorkshire Three Peaks Challenge, tackling the peaks of Pen-y-Ghent, Whernside and Ingleborough in under 12 hours. The team, which included Louise Stephenson and Prevent Breast Cancer Chief Executive Officer Nikki, raised £14,000 through sponsorship.

The success of the fundraising events was evident in the growth of the network and increased attendance rates, with up to 200 attendees at the Empowering Women's Network December 2023 event, doubling the attendance of earlier events. Louise and her community have not only reached but exceeded their 2023 fundraising target, raising an impressive £25,000.

We are excited to continue this partnership into 2024, with plans to extend these successful networking events to the group's London network. The next event is scheduled for September 2024, where we aim to further empower women in senior roles, foster new business connections, and support our mission to build the National Breast Imaging Academy. LCap Group has committed to raising £50,000 through these events in the coming year, reinforcing their dedication to our cause.



Kroll

Our partnership with Kroll began in early 2023 with health awareness talks at their London offices. Recognising their colleagues' enthusiasm for sports, we provided opportunities to participate in events such as the London Marathon, the Big Half Marathon, the London 2 Brighton Cycle Challenge, and the London Landmarks Half Marathon. By supporting their teams through our corporate fundraising efforts, we maintained strong relationships and advanced our shared goal of preventing breast cancer.

Kroll held a Network of Women Quiz across their global offices, and hosted wine tasting and bake-off events at their Manchester office. Regular meetings with their Network of Women allowed us to collaborate effectively and tailor our support. As a result, we developed a comprehensive content directory for Kroll, featuring breast cancer awareness information, upcoming events, groundbreaking research findings, inspiring breast cancer blogs, volunteering opportunities, and items from our shop that fund our vital research. This content directory empowered Kroll to support their colleagues in a manner that aligned with their corporate culture, enhancing internal engagement and promoting our mission to prevent breast cancer. In total, Kroll have raised an outstanding £24,946.



Booths Charity of the Year

In April 2023, Booths Knutsford and Hale Barns selected Prevent Breast Cancer as their Charity of the Year. Through the Pennies scheme, customers could donate 25p when paying by card or digital wallet, with 34% of these donations going to Prevent Breast Cancer. Combined with various bucket collections, these efforts raised £24,704.

Duncan from the Hale Barns store participated in the Manchester Half Marathon. Additionally, the stores hosted Pink Days, where employees dressed in pink and organised bucket collections. The two stores were adorned with bunting and balloons, and a dedicated charity spot was set up to highlight Prevent Breast Cancer and encourage donations. This collaborative effort not only raised significant funds but also increased community engagement and awareness, showcasing Booths' commitment to supporting breast cancer prevention.



Roisin and Chris Lawlor

Our fabulous supporters Roisin and Chris Lawlor hosted their annual fundraising ball on 7th October. Combined with their fundraising efforts for both the Barcelona and Paris marathons, this year they raised £8,391.25 for our charity. They also became 100 Club members in February 2024 and aim to raise £10,000 in the 2024-2025 financial year.


prevent
breast
cancer

Strategic Aims and Objectives

2023-2024

Governance & Structure	
Review our governing documents	Completed
Continue to review the organisational policies including an updated Equality Diversity and Inclusion policy and write and implement policies on the environment and menopause.	In progress
Implement new Risk Register model	Completed
Organise cyber security training	Completed
Review employee benefits package	Completed
Review different platforms and processes to look at integration to improve efficiency	In progress
Implement an updated process to capture information for impact reporting	In progress

Research	
Plan and hold our first Prevent Breast Cancer Prevention Conference in September 2024	Completed
Organise a Research Evening for the charity's supporters with a spotlight on what we have achieved so far and what still needs to be done	In progress
Review grant funding process and update grant application form to make it more user friendly	In progress
Work with our researchers to improve dissemination of their research and communication of its success both internally and externally	In progress

Services to Patients and to The Nightingale Centre	
Finish the shop refurbishment, invest in new ethically sourced merchandise and where possible work with local suppliers	Completed
Invest in new screens to display important and engaging information to patients waiting for their appointments	Completed
Continue to lead on the capital campaign to build the National Breast Imaging Academy	In progress
Recruit new volunteers for our coffee bar and refurbished shop	In progress

Health Awareness & Education	
Apply for funds for a Health Inequalities Officer who will develop and implement a strategy for future campaigns	Completed
Work with a health communication agency to produce a multifaceted campaign to engage with women about breast awareness and the importance of attending routine screening. A key objective will be to capture data, which can inform future outreach campaigns	Completed
Finish Asian Women's Health Awareness advert and work with the Health Inequalities Committee to agree a timeline to run the campaign	In progress
Continue to collaborate with Close to Home Productions, a female led theatre company who have written and produced 'Identities' a play about breast cancer. Be part of their tour by providing information about the charity and breast cancer awareness to audiences and community groups, as well as sitting on their Post-Show Q&A panel	Completed
Develop our library of video content by editing existing videos to provide subtitles in various languages	In progress

Income Generation	
Continue to work with MFT Charity, achieve a fundraising target of £3.9 million to build the National Breast Imaging Academy.	In progress
Balance the above with raising funds for new research projects, health promotion activity and for the general, core need of the charity	In progress
Continue to grow income from companies and secure new corporate partnerships and/or Charity of the Year opportunities	In progress
Implement the monthly donor strategy	In progress
Develop Major Donor Strategy with board of Trustees	In progress
Continue to grow our successful Ambassador programme and build on the success of our Paint Towns Pink campaign	In progress
Diversify income and increase brand awareness through digital fundraising and promotional activity – Strategy driven by analytics and data	In progress

2023-2024

Governance & Structure

Develop a strategy to implement Environmental, Social and Governance reporting and improvement

Invest in improving cyber security infrastructure

Work with an independent financial advisor to move employee pensions to a new provider and deliver financial advice for all staff

Implement a new project management system to improve organisational efficiency

Implement an updated process to capture information for impact reporting

Embed new fundraising and operational staff and utilise the increased resource to improve operational efficiency and continue to grow our income generation.

Research

Organise our 2nd Breast Cancer Prevention Conference

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

Review grant funding policies and processes and update grant application form to make it more user friendly and robust

Reopen grant funding applications and award new research grants

Services to Patients and to The Nightingale Centre

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

Recruit new volunteers for our coffee bar and refurbished shop

Review suppliers for our coffee bar

Continue to invest in new, ethically sourced merchandise for our shop

Work with North Manchester Breast Centre on plans to open a Prevent Breast Cancer coffee shop in their planned new build

Health Awareness & Education

Implement strategies and campaigns developed by Health Inequalities and Community Engagement Officer

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

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

Work collaboratively with other local charities, grassroots organisations, and healthcare providers to ensure clear communication and networking to encourage breast screening uptake in hardly reached areas.

Income Generation

Grow all income sources to meet the target for the Academy and to fund new research, health promotion activity and core charity costs

Continue to work with MFT Charity, achieve a fundraising target of £3.8 million to build the National Breast Imaging Academy

Implement the monthly donor strategy

Continue to develop and grow the 100 Club campaign to future proof our Corporate Fundraising

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

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

Financial Review

This year has seen Prevent Breast Cancer's growth continue as the changes implemented in the previous year have taken effect. We have reviewed and updated our charitable aims and objectives, completed the refurbishment of the Prevent Breast Cancer shop, invested in new tools to support online fundraising efforts, worked with partners to implement wide reaching awareness raising campaigns and redoubled our efforts to raise the £3.9million needed to build the National Breast Imaging Academy. We have also planned our first ever research conference, due to take place in September 2024.

- Total income is £1,472,692, compared with £1,448,751in the previous year. This is lower than the forecast income due to pledged funding for the Academy not being received in this financial year, we are hopeful that this pledged donation will be received in 2025. Despite the pledged donation not being realised, all other major areas of fundraising have exceeded their targets for the year.
- We were awarded a two-year grant of £105,416 to recruit a Health Inequalities and Community Engagement Officer to increase uptake of breast screening in hardly reached communities, this income will be received in instalments over the next three financial years.
- Income from individual giving and legacies totalled £280,069, an increase of 33% on the previous year.
- Sporting Events continues to grow, seeing a 63% increase on the previous year and subsequently income from Gift Aid increased by 92%.
- Income from merchandise, following the shop refurbishment and investment in new lines, has grown by 39%.
- Digital Challenges have raised £76,598. This is a new area of fundraising being explored by the charity, and one we plan to build on in 2024/25.

This year the ongoing cost of living crisis has created an environment that makes fundraising an increasingly difficult task. Prevent Breast Cancer has also experienced resourcing constraints, with key roles not recruited. Despite these challenges our staff have performed beyond expectations with all major income streams seeing growth compared with the previous year.

Income Generated	
Sport Challenges	£281,774
Donations & Legacies	£280,069
Trusts & Foundations	£204,458
Community Activity	£179,750
Corporate Fundraising	£127,056
Gift Aid	£79,325
Digital Challenges	£76,598
Gifts-in-Kind	£74,800
Charitable Activity - Coffee Bar	£65,110
Merchandise	£45,496
Investment Income, Bank Interest and other	£47,407
Events	£10,851
Total Income	£1,472,692

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

Our Expenditure for 2023/24:

How we spend our funds	
Charitable Activities	£1,299,381
Cost of Raising Funds	£267,761
Merchandise Costs	£21,095
Investment Management Fee	£5,773
Total Expenditure	**£1,594,010**

Consistent with other years, our charitable activities constitute the vast majority of expenditure, with other costs kept at a minimum. During the year under review, Prevent Breast Cancer spent £1,299,381 on charitable activities which is an increase of 55%. We spent £411,020 on the refurbishment of an existing space into the National Breast Imaging Academy Training Suite (more information can be found on page 20) and an additional £137,671 to fund new research. These expenses have created an operational deficit; however the funds were from restricted income secured from previous financial years.

There is £919,717 held as restricted income and carried forward to 2024-2025 for future charitable expenditure.

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

The below charts outline the breakdown of our Charitable Activity for the year 2023/2024 and future charitable expenditure held as restricted reserves.

Breakdown of Charitable Activity	
Patient Care and Services to the Centre	£693,669
Outreach and Awareness	£398,643
Research Grants	£146,547
Publicising and Disseminating Research	£41,194
Addressing Health Inequalities & Forever Manchester Grant	£19,328
Total Expenditure	**£1,299,381**

Future Charitable Expenditure Restricted Reserves	
National Breast Imaging Academy Capital Build	£500,345
Gene Research PHDs	£350,090
Addressing Health Inequalities and AWHA Project	£46,788
Forever Manchester - Addressing Health Inequalities	£22,494
Total Restricted Reserves	**£919,717**

Reserves Policy

The Directors and Trustees believe that the charity should hold financial reserves, because it does not receive statutory funding and is entirely dependent on donations from the public and fundraising activities. This is inevitably subject to variation year to year. In addition, it requires the ability to continue operating and honouring grant commitments, should there be falls in income.

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

As of 31 March 2024, the charity holds reserves of £1,669,709, of which £919,717 are restricted funds. 54% of restricted reserves will fund the National Breast Imaging Academy, 38% are to fund the Doctor Alan H. Gowenlock PHD Studentship projects, with the remaining 8% reserved for Health Inequalities and Outreach activities.

Designated funds amount to £150,000 which have been allocated to the National Breast Imaging Academy.

The Trustees aim to keep in reserve six to nine months of core costs to guard against a worst-case scenario where the charity receives no income from any of its sources. These costs cover our office staff, support costs, critical fundraising activity and governance. They total £344,763 for six months.

Free reserves are £599,992, excluding the designated funds (in 2023 free reserves were £383,677). The charity currently holds over 10 months' worth of core costs. While this exceeds our reserve policy, the Board considers it acceptable, given that fundraising efforts have been largely focused on the Academy's capital project. Our goal is to begin awarding new research funding in 2025, starting with seed funding at our inaugural research conference and launching a new grant funding round.

Fundraising Costs Policy

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

In summary, we raised a total of £1,472,692 from donations and legacies, fundraising events, trading activities, funding from trusts, foundations and investments. We spent £1,299,381 on our core charitable activities and research grants, with a further £919,717 held in restricted reserves for future charitable expenditure.

Fundraising Approach

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

Investment Policy

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

The charity continues to work with Brewin Dolphin, an experienced firm of investment advisers, who manage our investments on a discretionary basis. The investment portfolios are managed in accordance with our Investment Policy.

In 2022, the charity decided to invest a significant portion of our cash reserves in high-interest bank accounts via the CAF Deposit Scheme, in partnership with Flagstone. This approach allows us to invest our reserve funds in high-interest bank accounts for various periods, maximizing returns over different time frames. Additionally, investing a significant part of our reserves in multiple banks through this scheme ensures greater protection of our funds under the Financial Services Compensation Scheme (FSCS).

The Trustees are satisfied with the investment performance and that it is in line with the investment objective set. The assets experienced an increase in value of £62,199 during this financial period. This is a significant improvement on the performance in the previous financial period and the charity remains confident in the management of its diversified portfolio by Brewin Dolphin and we are optimistic that future performance will continue to improve.


prevent
breast
cancer

Structure, Governance and Management

Governing Documents

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

Appointment of Trustees and Induction

New Trustees are nominated by Trustee Board members, invited to attend and observe at least two Board meetings and to meet with the Chief Executive, interviewed by a panel of Trustees for that purpose and appointed where they have the necessary skills to contribute to the charity's strategic leadership and development. On appointment they receive an induction pack, which comprises a range of information to support them in their new role. This encompasses the charity's strategy, structure, financial performance and forecast and an overview of Trustee's legal obligations. The pack includes governing documents and other relevant documentation available from the Charity Commission e.g., CC3 – The Essential Trustee and CC20 – Charity Fundraising: A Guide to Trustees' Duties. All new Trustees are introduced to the charity's staff team.

Trustees receive ongoing training whilst in post. This year they took part in a workshop focusing on the legal responsibilities of trustees, delivered by a charity solicitor. This training will be repeated annually alongside ad hoc training around focusing on specific issues related to Prevent Breast Cancer.

Organisation

The charity has successfully updated its governing document to reflect the changes implemented following the successful Board Effectiveness Review in December 2022. Updated governing document has been submitted to Companies House and the Charity Commission.

Prevent Breast Cancer has 11 trustees who meet quarterly to ensure that the charity is fulfilling its charitable objectives and to review the fundraising, trading and finance teams' performance in raising funds for research into breast cancer prevention. According to the governing document the maximum number of trustees can be 25 and the minimum number is four. Each member of the Trustee Board contributes a different area of expertise including medical, commercial, HR and public sector knowledge and experience. Two of the Trustees are directors of the dormant trading subsidiary. The Chief Executive Officer has been appointed by the Trustees to manage the day-to-day operations of the organisation.

Related Party Transactions

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine (Trustee) is a director. The estimated value of such services is £2,800 (2023: £2,800) and therefore an equivalent amount has been included within gifts in kind.

Fees of £1,800 (2023: £1,122) were paid to Original Funbags. This company is considered a related party as Tammy Hopla (director of Original Funbags) was also a Trustee at the time of the transaction.

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

Pay Policy for Senior Staff

The Board of Trustees and the senior management team comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity. All Trustees donate their time and do not receive remuneration. Details of related party transactions are disclosed in notes 10 and 26 of the accounts.

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

Risk Management

The Trustee Board is committed to maintaining a strong risk management framework. The aim is to ensure that Prevent Breast Cancer makes every effort to manage risk appropriately by maximising potential opportunities, whilst minimising the adverse effect of risks. Oversight of risk is delegated to the Risk and Compliance Committee, which is comprised of four trustees and the Head of Operations.

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

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

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

The charity will continue to regularly review and monitor the effectiveness of its risk management framework and update it as appropriate. In 2023-2024, the Trustees assessed the major risks to which the charity is exposed, in particular those related to the reputation, operations and finances of the charity and were satisfied that systems are in place to manage exposure to the major risks.

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

Reference and Administrative Details

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

L Barr

P S Glass

D Harris

T Hopla (Resigned January 2024)

J Humphris

C Lee-Jones

C J Levine - Treasurer

E O'Neal – Chair

S Saleh

Dr M Wilson

P Topham (appointed March 2024)

E Wilson (appointed 10 June 2024)

Key Management Personnel	N Barraclough - Chief Executive Officer E Mellor - Head of Communication and Campaigns J Ruth - Head of Income Generation J Coleman-Reed - Head of Operations
Secretary	J M Glass
Company Registered Number	04831397
Charity Registered Number	1109839
Registered Office	Prevent Breast Cancer Research Unit The Nightingale Centre Wythenshawe Hospital Southmoor Road Manchester M23 9LT

Auditors	Alliotts LLP Chartered Accountants and Business Advisors 3 London Square Cross Lanes Guildford Surrey GU1 3DL
Bankers	Royal Bank of Scotland Plc. 38 Mosley Street Manchester M2 3AZ
Solicitors	Gunnercooke LLP 53 King Street Manchester M2 4LQ

Statement of Trustees' Responsibilities

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

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

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

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

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

In so far as the Trustees are aware:

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

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



Eamonn O'Neal - Chairman

Date: 27/11/24

Independent Auditor's Report

Opinion

We have audited the financial statements of Prevent Breast Cancer (the 'charity') for the year ended 31 March 2024 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and the notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2024 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

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

We have nothing to report in this regard.

Matters on which we are required to report by exception

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

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

Responsibilities of Trustees

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

Auditor's responsibilities for the audit of the financial statements

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

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

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

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, was as follows:

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

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

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

Audit response to risks identified

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

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

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

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

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

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: http://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

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



(Statutory Auditor)
for and on behalf of Alliotts LLP

Date: 27/11/24

Chartered Accountants
3 London Square
Cross Lanes
Guildford
Surrey
GU1 1UJ

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

Statement of Financial Activities

including income and expenditure account for the year ended 31 March 2024

	Notes	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
Income from:							
Donations and legacies	3	874,234	429,595	1,303,829	767,705	548,360	1,316,065
Charitable activities	5	65,110	-	65,110	59,159	-	59,159
Other trading activities	6	56,346	-	56,346	56,191	-	56,191
Investments	4	47,407	-	47,407	17,336	-	17,336
Total income		1,043,097	429,595	1,472,692	900,391	548,360	1,448,751
Expenditure on:							
Raising funds	7	294,629	-	294,629	305,777	-	305,777
Charitable activities	8	707,201	592,180	1,299,381	762,805	75,284	838,089
Total expenditure		1,001,830	592,180	1,594,010	1,068,582	75,284	1,143,866
Net gains/(losses) on investments	16	62,199	-	62,199	(35,150)	-	(35,150)
Net income/ (expenditure)		103,466	(162,585)	(59,119)	(203,341)	473,076	269,735
Transfers between funds		80,807	(80,807)	-	22,787	(22,787)	-
Net movement in funds	9	184,273	(243,392)	(59,119)	(180,554)	450,289	269,735
Reconciliation of funds: Fund balances at 1 April 2023		565,719	1,163,109	1,728,828	746,273	712,820	1,459,093
Fund balances at 31 March 2024		749,992	919,717	1,669,709	565,719	1,163,109	1,728,828

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

Balance Sheet
as at 31 March 2024

	Notes	£	2024 £	£	2023 £
Fixed assets					
Tangible assets	**15**		4,507		2,700
Investments	**19**		1		1
			4,508		2,701
Current assets					
Stocks	**17**	17,622		23,157	
Debtors	**18**	81,479		35,162	
Investments	**20**	868,830		794,241	
Cash at bank and in hand		1,146,324		1,248,127	
		2,114,255		2,100,687	
Creditors: amounts falling due within one year	**21**	(300,485)		(289,642)	
Net current assets			1,813,770		1,811,045
Total assets less current liabilities			1,818,278		1,813,746
Creditors: amounts falling due after more than one year	**22**		(148,569)		(84,918)
Net assets excluding pension liability			1,669,709		1,728,828
Net assets			1,669,709		1,728,828
The funds of the charity					
Restricted income funds	**23**		919,717		1,163,109
Unrestricted funds - general			599,992		383,677
Unrestricted funds - designated	**27**		150,000		182,042
			1,669,709		1,728,828

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 March 2024, 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

Eamonn O'Neal
Eamonn O'Neal (Nov 27, 2024 12:47 GMT)

27/11/24

E O'Neal - Chairman
Trustee

Company registration number 04831397
(England and Wales)

Statement of Cash Flows
for the year ended 31 March 2024

	Notes	£	2024 £	£	2023 £
Cash flows from operating activities					
Cash (absorbed by)/generated from operations	**30**		(134,357)		534,582
Investing activities					
Purchase of tangible fixed assets		(2,463)		(1,943)	
Purchase of investments		-		(280,000)	
Investment income received		35,017		7,947	
Net cash generated from/(used in) investing activities			32,554		(273,996)
Net cash used in financing activities			-		-
Net (decrease)/increase in cash and cash equivalents			(101,803)		260,586
Cash and cash equivalents at beginning of year			1,248,127		987,541
Cash and cash equivalents at end of year			1,146,324		1,248,127

Notes to the Financial Statements

1. Accounting policies

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

1.1 Accounting convention

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

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

The financial statements have been prepared under the historical cost convention, modified to include current asset investments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

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

1.3 Charitable funds

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

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

1.4 Income

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

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

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

1.5 Expenditure

All expenditure is accounted for on an accruals basis and has been included under expense categories that aggregate all costs for allocation to activities. Where costs cannot be directly attributed to particular activities they have been allocated on a basis consistent with the use of the resources.

Fundraising costs are those incurred in generating funds and do not include the costs of disseminating information in support of the charitable activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include project management carried out in house.

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

Grants

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

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

1.6 Tangible fixed assets

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

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

Computers 20% straightline

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

1.7 Fixed asset investments

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

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

1.8 Impairment of fixed assets

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

1.9 Stocks

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

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

1.10 Cash and cash equivalents

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

1.11 Retirement benefits

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

2. Critical accounting estimates and judgements

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

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

Critical judgements

Current asset investments

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

Premises costs

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

3 Donations and legacies	Unrestricted funds 2024	Restricted funds 2024	Total 2024	Unrestricted funds 2023	Restricted funds 2023	Total 2023
	£	£	£	£	£	£
Donations and gifts	647,584	429,595	1,077,179	655,621	548,360	1,203,981
Legacies receivable	151,850	-	151,850	55,284	-	55,284
Donated goods and services	74,800	-	74,800	56,800	-	56,800
	874,234	429,595	1,303,829	767,705	548,360	1,316,065

Funds of £350,000 formally pledged towards the building cost of the National Breast Imaging Academy have not been recognised as income and therefore are not included in restricted funds to 31st March 2024 as they are conditional on the target of £3.9 million being reached to finance the project. The charity is confident that the remaining funds required will be raised within the next 12 months. Costs incurred applying for the pledged donations have been accounted for in this financial year.

4	Income from investments	Unrestricted funds 2024 £	Unrestricted funds 2023 £
	Interest from investments	18,163	11,007
	Interest receivable	29,244	6,329
		47,407	17,336

5	Charitable activities Patient Care and Services to the Centre	2024 £	2023 £
	Coffee Bar Income	64,657	57,846
	Donations to the Coffee Bar	453	1,313
		65,110	59,159

6	Other trading activities	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £	Total 2023 £
	Fundraising events	11,132	-	11,132	23,530
	Merchandise sales	45,214	-	45,214	32,661
	Other trading activities	56,346	-	56,346	56,191
	For the year ended 31 March 2023	56,191	-		56,191

7	Expenditure on raising funds	2024 £	2023 £
	Fundraising and publicity		
	Events, income generation and promotion costs	34,962	52,515
	Fundraising agents	115,776	140,039
	Staff costs	99,178	77,203
	Support costs	17,845	20,834
	Fundraising and publicity	267,761	290,591
	Trading costs		
	Merchandise costs	21,095	9,178
	Investment management	5,773	6,008
		294,629	305,777

8 Charitable Activities

	Patient Care /Nightingale Centre	Outreach and Awareness	Publicising Research and Results	Health Inequalities	Research Grants	Forever Manchester	Total 2024	Total 2023
	£	£	£	£	£	£	£	£
Staff costs	161,031	119,292	21,834	12,055	-	2,459	316,671	279,340
Charitable expenditure	490,624	255,206	16,865	217	-	3,426	766,338	203,554
	651,655	374,498	38,699	12,272	-	5,885	1,083,009	482,894
Grant funding of activities (see note 11)	-	-	-	-	137,671	-	137,671	271,860
Share of support costs (see note 12)	34,762	19,977	2,064	655	7,344	314	65,116	72,908
Share of governance costs (see note 12)	7,252	4,168	431	137	1,532	65	13,585	10,427
	693,669	398,643	41,194	13,064	146,547	6,264	1,299,381	838,089
Analysis by fund								
Unrestricted funds	269,209	380,605	41,194	792	9,137	6,264	707,201	
Restricted funds	424,460	18,038	-	12,272	137,410	-	592,180	
	693,669	398,643	41,194	13,064	146,547	6,264	1,299,381	
For the year ended 31 March 2023								
Unrestricted funds	203,815	244,198	12,915	-	301,877	-		762,805
Restricted funds	33,972	41,312	-	-	-	-		75,284
	237,787	285,510	12,915	-	301,877	-		838,089

9 Net movement in funds

	2024	2023
	£	£
The net movement in funds is stated after charging/(crediting):		
Exchange losses	7,357	6,334
Fees payable for the audit of the charity's financial statements	9,444	10,260
Depreciation of owned tangible fixed assets	656	516

10 Trustees

None of the trustees (or any persons connected with them) received any remuneration during the year, Nil Trustees were reimbursed their travelling expenses (2023 - One trustee was rembursed their travelling expenses for a total of £104).

11 Grants payable

	2024	2023
	£	£
Grants to institutions:		
University of Southampton	-	39,871
Manchester Cancer Research Centre	-	99,963
Oxford Brookes University	-	29,772
University of Manchester	137,671	89,564
Other	-	12,690
	137,671	271,860

12 Support costs	Support costs	Governance costs	2024	2023
	£	£	£	£
Depreciation	656	-	656	516
Staff expenses	7,357	-	7,357	6,334
Staff training	2,518	-	2,518	4,561
Printing and stationery	3,523	-	3,523	3,178
IT/website costs	10,735	-	10,735	10,829
Insurance	3,649	-	3,649	3,472
Bank and Streamline charges	21,267	-	21,267	12,602
Legal and professional charges	24,965	5,241	30,206	29,536
Other office costs	2,411	-	2,411	18,280
Payroll	2,800	-	2,800	2,800
Audit fees	-	9,444	9,444	10,260
Accountancy	-	1,980	1,980	1,800
	79,881	16,665	96,546	104,168
Analysed between				
Fundraising	14,765	3,080	17,845	20,833
Charitable activities	65,116	13,585	78,701	83,335
	79,881	16,665	96,546	104,168

13 Employees

Number of employees
The average monthly number of employees during the year was:

	2024 Number	2023 Number
Administration	1	1
Operations	2	1
Charitable Activity	5	7
Generating Funds	6	4
	14	13

The full time equivalent for employees during the year was:

	2024 Number	2023 Number
Administration	1	1
Operations	2	1
Charitable Activity	4	6
Generating Funds	5	4
	12	12

Employment costs	2024 £	2023 £
Wages and salaries	378,063	322,164
Social security costs	29,671	27,274
Other pension costs	8,115	7,105
	415,849	356,543

The number of employees whose annual remuneration was £60,000 or more were:

	2024 Number	2023 Number
£60,000 - £70,000	1	1

14 Taxation

The charity is exempt from taxation on its activities because all its income is applied for charitable purposes.

15 Tangible fixed assets

	Computers £
Cost	
At 1 April 2023	4,622
Additions	2,463
Disposals	(1,344)
At 31 March 2024	5,741
Depreciation and impairment	
At 1 April 2023	1,922
Depreciation charged in the year	656
Eliminated in respect of disposals	(1,344)
At 31 March 2024	1,234
Carrying amount	
At 31 March2024	4,507
At 31 March 2023	2,700

16 Gains and losses on investments

	Unrestricted funds 2024 £	Unrestricted funds 2023 £
Gains/(losses) arising on:		
Revaluation of investments	62,199	(35,150)

17 Stocks

	2024 £	2023 £
Finished goods and goods for resale	17,622	23,157

18 Debtors

	2024 £	2023 £
Amounts falling due within one year:		
Trade debtors	18,440	503
Other debtors	54,991	23,855
Prepayments and accrued income	8,048	10,804
	81,479	35,162

19 Fixed asset investments

	Other investments £
Cost or valuation	
At 1 April 2023	1
At 31 March 2024	1
Carrying amount	
At 31 March 2024	1
At 31 March 2023	1

Other investments comprise:	Notes	2024 £	2023 £
Investments in subsidiaries	28	1	1

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

20 Current asset investments

	2024 £	2023 £
Listed investments	868,830	794,241

Included in current asset investments is £20,796 (2023: £25,160) of cash held within the portfolio.

21	Creditors: amounts falling due within one year	2024 £	2023 £
	Other taxation and social security	9,834	5,138
	Trade creditors	56,486	41,397
	Grants payable	158,112	182,161
	Other creditors	5,142	4,444
	Accruals and deferred income	70,911	56,502
		300,485	289,642

22	Creditors: amounts falling due after more than one year	2024 £	2023 £
	Grants payable	148,569	84,918

23 Restricted funds

The restricted funds of the charity comprise the unexpended balances of donations and grants held on trust subject to specific conditions by donors as to how they may be used.

	Balance at 1 April 2023 £	Incoming resources £	Resources expended £	Transfers £	Balance at 31 March 2024 £
AWHA Projects	16,786	-	-	-	16,786
Forever Manchester and NHS Charities Together Project	-	28,375	(5,881)	-	22,494
Research Salary	-	1,000	-	(1,000)	-
Investigating The Effects of Preventative Tamoxifen	-	15,850	-	(15,850)	-
Predicting the Outcomes of Risk-Adapted Screening (POSSUM)	-	400	-	(400)	-
Alcohol Consumption and Increased Risk of Breast Cancer	-	18,175	-	(18,175)	-
Investigating Prevention Using a Human Tissue Ex-Plant Model	-	21,500	-	(21,500)	-
Breast Cancer in Younger Women	-	25,980	-	(25,980)	-
Addressing Health Inequalities	10,100	32,175	(12,275)	2	30,002
Outreach and Awareness	-	10,058	(12,154)	2,096	-
Training Suite for National Breast Imaging Academy	411,020	-	(411,020)	-	-
Building the National Breast Imaging Academy	237,703	262,642	-	-	500,345
Academy Fundraising Campaign	-	13,440	(13,440)	-	-
Genes PHD to be allocated	350,090	-	-	-	350,090
Search for Hidden BRCA Mutations PHD	137,410	-	(137,410)	-	-
	1,163,109	429,595	(592,180)	(80,807)	919,717

23 Restricted funds

Previous year:	Balance at 1 April 2022 £	Incoming resources £	Resources expended £	Transfers £	Balance at 31 March 2023 £
AWHA Projects	16,786	-	-	-	16,786
Breast Cancer Awareness Videos	38	210	(248)	-	-
BRCA2 and PALB2 Research Project	-	22,787	-	(22,787)	-
Gene PHDs	487,500	-	-	-	487,500
Addressing Health Inequalities	10,000	100	-	-	10,100
Building the National Breast Imaging Academy	198,496	39,207	-	-	237,703
Academy Fundraising Campaign	-	19,804	(19,804)	-	-
Training Suite for National Breast Imaging Academy	-	411,020	-	-	411,020
Investigating The Effects of Preventative Tamoxifen	-	10,000	(10,000)	-	-
Alcohol Consumption and Increased Risk of Breast Cancer	-	4,168	(4,168)	-	-
House of Commons Event	-	2,500	(2,500)	-	-
Outreach and Awareness	-	38,564	(38,564)	-	-
	712,820	548,360	(75,284)	(22,787)	1,163,109

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

23. Restricted funds

AWHA projects

The Asian Women's Health Awareness Campaign will research how to better promote the importance of breast screening to ethnic minority communities from South Asia. This work stream is part of our Health Inequalities fund.

Forever Manchester and NHS Charities Together Project

Two-year grant to support our work in addressing health inequalities. Funding for the hire of a Health Inequalities Officer and to enhance our efforts to improve breast screening uptake among different communities in Manchester.

Research Salary

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

Investigating the Effects of Preventative Tamoxifen

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

Predicting the Outcomes of Risk-Adapted Screening (POSSUM)

This project focuses on enhancing early detection and breast cancer screening through the use of microsimulation—a sophisticated computer programme that analyses data to predict the outcomes of risk-adapted screening.

Alcohol Consumption and Increased Risk of Breast Cancer

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

Investigating Prevention Using a Human Tissue Ex-Plant Model

Researchers will conduct in-depth studies to determine if our ex-plant models maintain key cell types, gene expression, and respond to treatment similarly to matching breast tissue samples from clinical prevention trials. Once fully verified, this lab-based model will provide a platform for testing new prevention treatments for women at high risk of developing breast cancer.

Breast Cancer in Younger Women

This study aims to improve risk estimates for breast cancer in younger women (known as young onset breast cancer, YOBC), for whom cancer is typically more aggressive and has differing risk factors to postmenopausal breast cancer.

Addressing Health Inequalities

Funds to enable the charity to develop its strategy and expand its outreach work and communication campaigns aimed at communities around Greater Manchester where uptake of breast screening is low. Includes funding to deliver a series of roundtable meetings for researchers, community groups and other stakeholders working in this area.

Outreach and Awareness (Health Promotion)

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

Training Suite for National Breast Imaging Academy

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

Building the National Breast Imaging Academy (NBIA)

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

Academy Fundraising Campaign

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

BRCA Gene PhD Research

Restricted income received from a legacy to create the Doctor Alan H. Gowenlock PhD Studentship award. The funds will enable the Prevent Breast Cancer scientists to continue their research into how the BRCA genes work and why they cause such a dramatic increase in breast cancers.

Search for Hidden BRCA Mutations

The first project awarded as part of the Doctor Alan H. Gowenlock PHD Studentship Award. The search for other hidden DNA mutations is ongoing and this PhD studentship will carry out research aiming to uncover more mutations in non-coding DNA.

24 Analysis of net assets between funds	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
At 31 March 2024:			
Tangible assets	4,507	-	4,507
Investments	1	-	1
Current assets/(liabilities)	894,053	919,717	1,813,770
Long term liabilities	(148,569)	-	(148,569)
	749,992	919,717	1,669,709

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £
At 31 March 2023:			
Tangible assets	2,700	-	2,700
Investments	1	-	1
Current assets/(liabilities)	647,936	1,163,109	1,811,045
Long term liabilities	(84,918)	-	(84,918)
	565,719	1,163,109	1,728,828

25 Operating lease commitments	2024 £	2023 £
Lessee At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:		
Within one year	2,184	1,498
Between two and five years	5,460	3,369
	7,644	4,867

26 Related party transactions

The remuneration of key management personnel is as follows:

	2024 £	2023 £
Aggregate compensation	181,795	181,964

During the year invoices to the value of £5,168 (2023: Nil) were paid to Gunnercooke Solicitors. This firm is considered a related party as Joe Glass (a Partner at Gunnercooke Solicitors) is married to Pam Glass and is also the Company Secretary. No creditor remained outstanding at the year end (2023: Nil).

During the year fees of £1,800 (2023: £1,122) were paid to Original Funbags. This company is considered a related party as Tammy Hopla (director of Original Funbags) is also a Trustee of Prevent Breast Cancer. No creditor remained outstanding at the year end (2023: £nil).

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine is a director. The estimated value of such services is £2,800 (2023: £2,800) and therefore an equivalent amount has been included within gifts in kind.

27 Designated funds

The unrestricted funds of the charity comprise the unexpended balances of donations and grants which are not subject to specific conditions by donors and grantors as to how they may be used. These include designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes.

	Balance at 1 April 2022 £	Expenditure £	Balance at 1 April 2023 £	Expenditure £	Transfers £	Balance at 31 March 2024 £
Research salaries	3,050	-	3,050	(3,050)	-	-
National Breast Imaging Academy	150,000	-	150,000	-	-	150,000
Database & refurbishments	40,000	(11,008)	28,992	-	(28,992)	-
Grants	200,000	(200,000)	-	-	-	-
	393,050	(211,008)	182,042	(3,050)	(28,992)	150,000

28 Subsidiaries

Details of the charity's subsidiaries at 31 March 2024 are as follows:

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

29 Analysis of changes in net funds

The charity had no material debt during the year.

30 Cash generated from operations

	2024 £	2023 £
(Deficit)/surpus for the year	(59,119)	269,735
Adjustments for:		
Investment income recognised in statement of financial activities	(47,407)	(13,953)
Fair value gains and losses on investments	(62,199)	29,141
Investmant charges	-	6,008
Depreciation and impairment of tangible fixed assets	656	515
Movements in working capital:		
Decrease/(increase) in stocks	5,535	(8,309)
(Increase) in debtors	(46,317)	(4,427)
Increase in creditors	74,494	255,872
Cash (absorbed by)/generated from operations	(134,357)	534,582


More
mammograms
build to beat
breast cancer
prevent
breast
cancer
More
lives saved
build to beat
breast cancer
prevent
breast
cancer




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Prevent Breast Cancer
Prevent Breast Cancer Research Unit
The Nightingale Centre
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Southmoor Road
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Prevent Breast Cancer
Using Science to Save Lives

Prevent Breast Cancer
Registered in England No. 4831397 | Registered Charity No. 1109839

Prevent Breast Cancer

England & Wales - Charity number 1109839

Accounts

Prevent Breast Cancer

Annual Report and Financial Statements

For the year ended 31 March 2023

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Foreword from Lester Barr MBE

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

However, I am not stepping away entirely!

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

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

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

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



Lester
Co-founder and Honorary President of Prevent Breast Cancer


prevent
breast
cancer

A Message from our Chairman

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

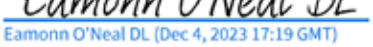
As part of the development of the charity, we arranged and attended an independently moderated event which concentrated on governance, strategic development and the ongoing effectiveness of the Board. It was acknowledged during that session that the Board remains fully committed to the charity's objects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

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

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

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

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



Eamonn O'Neal DL
Chairman of Trustees





About Us

The Need

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

Our Mission: Predict, prevent, protect

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

Prevent Breast Cancer is located in The Nightingale Centre and Prevent Breast Cancer Research Unit in Greater Manchester, the construction of which the charity raised £2 million for and which opened in 2007. The Centre houses the services of the Greater Manchester NHS Breast Screening Programme and Family History Risk and Prevention Clinic. It also acts as a base for several of our researchers, whose innovative clinical studies aim to more accurately predict those at increased risk of breast cancer, so that preventative interventions can be offered to these women. Our home within the Centre ensures that there is a diverse cohort of breast cancer patients available to participate in our research.

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

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





Public Benefit

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

Grant Making Policy

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

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

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

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

Funding requests between £10,000 and £30,000 are reviewed internally by three members of the Scientific Advisory Board, who are each independent of the project.

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

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

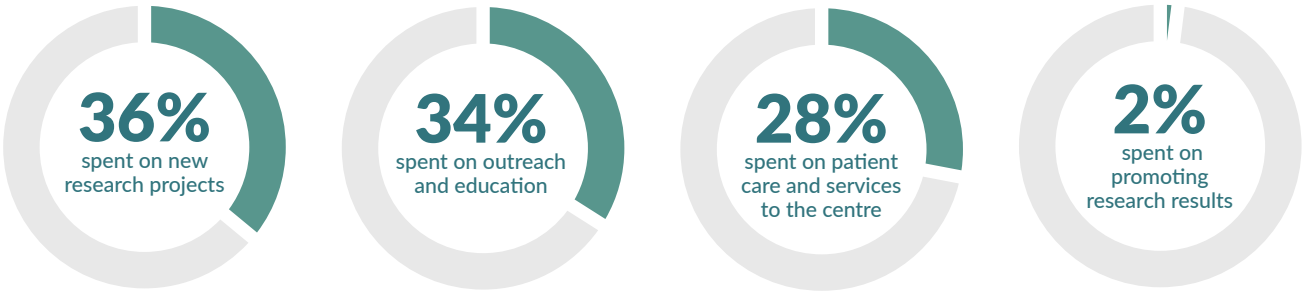
Funding requests of £10,000 and under – for small pilot projects, requests for consumables and/or equipment, or for a contribution to an existing active research study – will not be sent for peer review. They will be assessed for suitability by a member of the Scientific Advisory Board and a decision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

Prevent Breast Cancer does not fund experiments on animals.

Charitable Activity

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

We spent £838,089 on Charitable Activity



The charity holds

£1,163,109

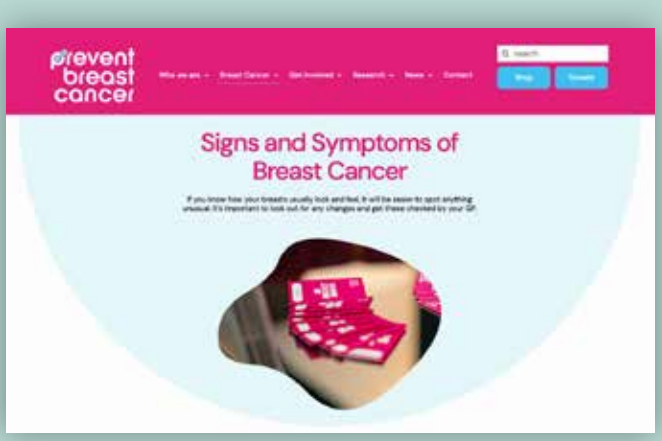
in restricted reserves for the building of a National Breast Imaging Academy and to fund two PHD projects specifically related to genetic research

We awarded

£259,172

to five new innovative pilot research projects

Our most visited webpages are **'Signs & Symptoms'** and **'About Breast Cancer'**





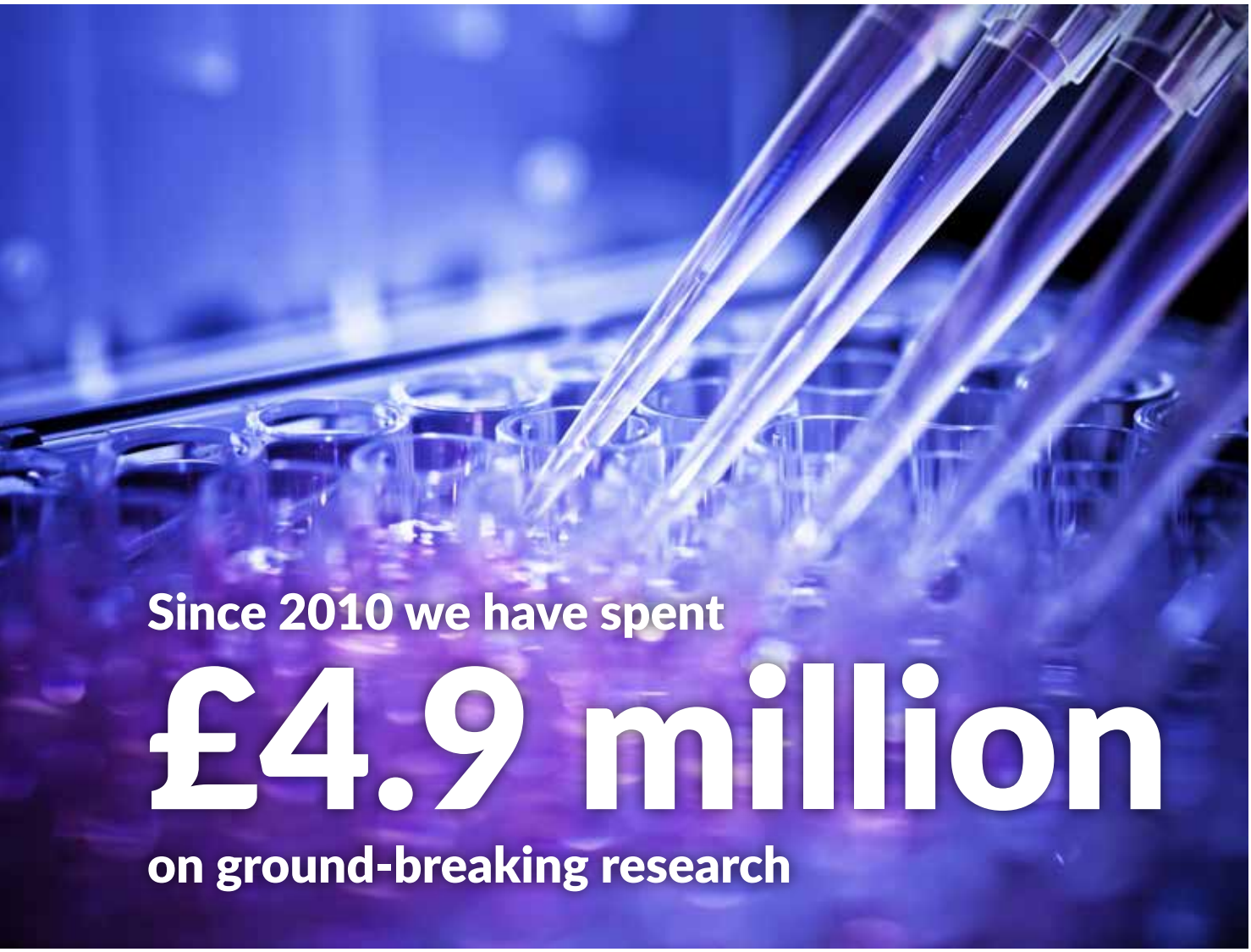


In the past 12 months we secured

over 300

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

Our Research Programme



Our scientists have published

over 250

research papers in peer reviewed journals since August 2015

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

Our Philosophy

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

The obvious place to start in our vision to prevent breast cancer is to address all the causes and risk factors one by one. But there is no one single easy way to do this because of these multiple risk factors all working together. Each risk factor has to be addressed one by one and in combination. Tackling the risk factors is the first challenge, but another important prevention strategy is early diagnosis through screening. Screening can pick up pre-cancer changes before an invasive cancer has begun and can detect small breast cancers at Stage 1 before they become life-threatening. Included within this strategy is the concept of 'prediction'. We now have the technology to predict which women are at particularly high risk of the disease and so by offering regular screening to this group we can prevent or detect early many more cancers.

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

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



Genetic risk factors

Gene mutations and Single Nucleotide Polymorphisms (SNPS)



Screening and early detection

Density research, screening techniques and risk prediction models



Lifestyle and environmental risk factors

Diet, exercise, hormones, environmental chemicals



Risk reducing drugs

Clinical and lab research using non-animal models.

We call these our four pillars of research.

Predicting who is at risk

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

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

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

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

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

We are now in a position where we can fairly accurately predict an individual woman’s risk of developing breast cancer in their lifetime. The most accurate method involves taking a gene test (of which there are two types - one for high and moderate risk genes, and one for common genetic variants), having a low dose mammogram to assess breast density, and then assessing lifestyle issues - and this work has been one of the most important achievements of our research team over the last decade under the leadership of Professor Tony Howell and Professor Gareth Evans. Accurately predicting who is at risk of breast cancer is a very important step towards prevention of the disease.

Research Strategy

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

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

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

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

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

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



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

Gene Research

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

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

Early Detection and Screening

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

- To improve the accuracy of screening through new technology
- To improve early diagnosis for women with high breast density and for cancers missed by current technology
- To improve our understanding of why breast density increases the risk of developing breast cancer
- To develop tools that accurately predict an individual's risk of breast cancer
- To identify more targeted ways to provide breast screening adapted to an individual's predicted risk
- To improve uptake of screening, including by collaborating with the NHS and grassroots organisations
- To develop new approaches for screening and prevention in young women before the age of eligibility for breast screening (currently age 50 in the UK).

Risk Reduction

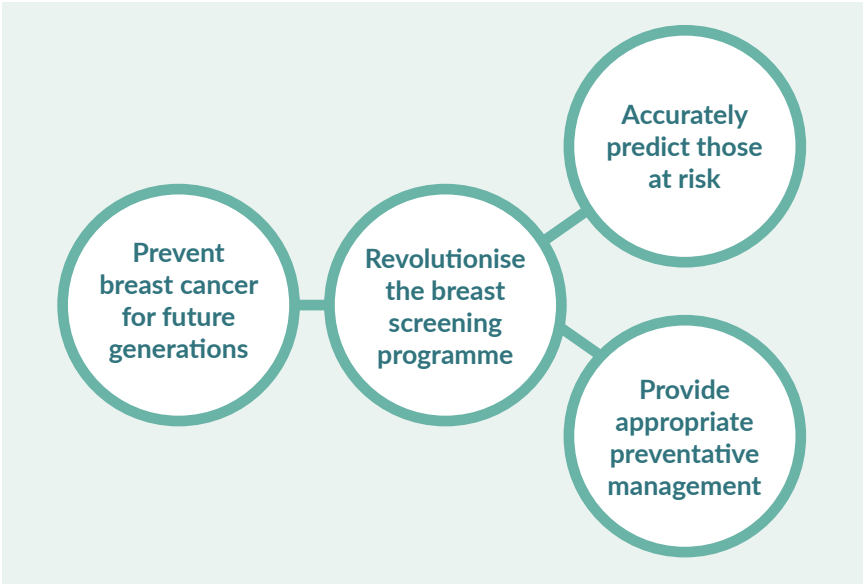
Research into risk factors that can be modified to lower breast cancer risk.

- To discover the mechanisms through which known risk factors impact the onset of breast cancer
- To identify mechanisms for reducing known risk factors, such as diet, exercise and lifestyle interventions
- To identify biomarkers of response to risk reducing measures
- To develop a lifestyle management programme that is effective in reducing risk of breast cancer.

Preventative Drugs

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

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



Research Plans for 2023-2024

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

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

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

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

Research Projects

Gene Research

Breast cancer in younger women

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

Project Lead: Dr William Tapper, University of Southampton.

The Search for Hidden Mutations –

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

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

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

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



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

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

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

Early detection and screening

Predicting outcomes using microsimulation

This project looks at improving early detection and breast cancer screening by using microsimulation to predict outcomes of stratified screening. Microsimulation are computerised analytical tools that can perform analysis. The models can be used to answer complex questions about screening without the need for costly and impractical clinical trials. This research has the potential to fine-tune the stratification of screening based on breast density, building on current trials investigating screening strategies in women with high breast density.

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

Lifestyle and Environmental Risk Factors

Alcohol consumption and increased breast cancer risk

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

Project Lead: Dr Emma Davies, Oxford Brookes University

Risk Reducing Drugs

Effects of preventive tamoxifen on high-risk breast microenvironment

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

Project Lead: Dr Andrew Gilmore, University of Manchester.

Investigating prevention using a human tissue ex-plant model

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

Project Lead: Dr Hannah Harrison, University of Manchester.

The National Breast Imaging Academy

Our solution to the national workforce shortages in breast imaging



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

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

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

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

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

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

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

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

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

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

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

Supporting Patients and Professionals at the Nightingale Centre

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

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

"Over 11,310 hot drinks sold to NHS staff and patients waiting for appointments; a 54% increase to the prior year thanks to a steady return to face-to-face appointments – an encouraging step closer to pre-pandemic activity"

Coffee shop income for the year was £59,160 – a 42% increase from the previous year. This year also saw the reopening of the Welcome Desk and Shop after Covid, and we have begun plans to refurbish and enhance the space, which will be implemented later in 2023.

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

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



Our Amazing Volunteers

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

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

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

Judith, Prevent Breast Cancer volunteer since 2017

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

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

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

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

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

What we achieved in 2022-2023

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

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

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

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

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

https://www.rcr.ac.uk/posts/rcr-launch-2022-workforce-census-reports

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

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

10.4%

increase in users to our website



Our Highest Performing Social Media Posts

Feel them on the First

Look out for your invite

World Cancer Day

Most popular pages

Signs and Symptoms

The Nightingale Centre

Causes and Risk Factors

Blog on 'Is breast pain a sign of cancer?'

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



What should you expect from your breast screening



What happens at a mammogram

Addressing Health Inequalities

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



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

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

Our Plans

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

In January 2023 we formally established a Health Inequalities Committee to explore how we can continue to address health inequalities across socioeconomic and ethnic groups, with the aim of improving engagement with marginalised communities and ultimately reduce breast cancer mortality. The interventions proposed by the group are to be mainly targeted across the North West of England, specifically in areas with poor engagement with health services. However, some of these initiatives may also be suitable for adoption across the UK.

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

Asian Women's Health Awareness

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

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

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

Our Year in Review: 2022/23

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

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

April to June

Prevent Breast Cancer



After experiencing breast cancer, Sally Budd and husband Mike raised funds through Mere Golf Club, where Mike was Captain. Sally and Mike have been wonderful promoters of the charity and raised over £17,000 in total.

Prevent Breast Cancer



Ben Chapman donned his boots and walked from Land's End to John O'Groats, raising a whopping £14,000. Wild camping along the way, Ben spread the awareness message across the length of Britain. He completed the 874 mile journey in only 51 days!

Prevent Breast Cancer



Paint Bramhall & Cheadle Hulme Pink took place in May this year, raising over £29,000! Organised by four of our wonderful ambassadors, Jo Hoddes, Emma Riley, Jen Rodgers and Emma Riley – yes, there really are two Emma Rileys! The month-long campaign was a great success, seeing many businesses and social spaces going pink, raising awareness and vital funds. We look forward to Paint Towns 2023.

Prevent Breast Cancer



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

Prevent Breast Cancer



Our brilliant Great Manchester 10K Runners raised over £16,000.

Prevent Breast Cancer



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

Prevent Breast Cancer



Ambassador Maggie Weatherall and her husband Darren organised a summer ball, raising over £14,600.

Prevent Breast Cancer



Auditors Alliotts continued to support the charity. A team of 15 took on the gruelling 24 hour Three Peaks Challenge, raising over £5,440. To date, their fundraising for Prevent Breast Cancer now exceeds £55,000.

Prevent Breast Cancer



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



Prevent Breast Cancer

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

July to September

Prevent Breast Cancer



Our Great North Run participants raised over £6,000.

Prevent Breast Cancer



The Insurance Institute of Manchester chose Prevent Breast Cancer as the charity for its annual 'Style in the City' event: afabulous, fun filled lunch with a Club Tropicana theme, which raised over £2,400.

Prevent Breast Cancer



Over 130 supporters completed the Morecambe Bay Walk, together raising over £12,700.

Prevent Breast Cancer



Several of our supporters decided to jump out of a plane and raise funds for the charity. Brave sky divers included Prevent's Community Fundraiser Judi Hibbert, her son Jamie, Ambassador Sarah Leary and long-term supporter Michelle Clayton who jumped with her son Kai. Thank you to all who took part; together they raised over £5,000.

Prevent Breast Cancer



Dream the Impossible Dream 2, a mammoth event organised by the Tim Bacon Foundation, saw more than 1,350 people attend over 11 restaurants supported by 18 different corporate sponsors, all raising funds for eight cancer charities in the Manchester region. In total the event raised a staggering £425,000 and we are incredibly grateful to the Tim Bacon Foundation Team for donating over £62,000 to the charity. We also extend our thanks to our corporate sponsors Kroll and Palatine Private Equity.

October to December



Prevent Breast Cancer

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

Prevent Breast Cancer



Our incredible London Marathon team together raised over £49,000.

Prevent Breast Cancer



Manchester Publicity Association continued to show their support through two events in October and December and raised over £4,700.

Prevent Breast Cancer



Patron Margo Cornish and the Prevent Breast Cancer Team joined forces to organise Boobee's Bedlam Bingo, a high octane 80s themed evening of emotion, inspiration and fun. The event raised over £20,000.



Prevent Breast Cancer

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

Prevent Breast Cancer



Supporter Kathryn Walsh organised a super ball, raising over £15,000.

Prevent Breast Cancer



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

Prevent Breast Cancer



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

January to March

Prevent Breast Cancer



Friends Alyson Wilson, Ali Morgan and Prevent Breast Cancer Trustee, Diana Harris organised a fabulously fun ceilidh. Tartan outfits, kilts and sporrans were fully encouraged! Raising over £6,300

Prevent Breast Cancer



Champneys and Elemis organised a delicious afternoon tea at Mottram Hall Hotel. The event raised over £1,400 and the Champneys Charitable Foundation presented a cheque for £10,000 to support our vital work.

Prevent Breast Cancer



Manchester Airports Group donated £11,000 from its annual charity golf day.

Prevent Breast Cancer



Paint Altrincham Pink was back for another year, seeing numerous businesses, ambassadors and groups get involved. In total they raised an impressive £10,000.

Prevent Breast Cancer



We successfully applied to a charitable trust and received a donation of £411,020 which will refurbish space within The Nightingale Centre, creating a Training Suite to train the next generation of breast imaging experts. After an unexpected delay, building work on the refurbishment will start in September 2023.

Strategic Aims and Objectives

2022-2023

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

2023-2024

Governance & Structure

Review our governing documents

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

Implement new Risk Register model

Organise cyber security training

Review employee benefits package

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

Implement an updated process to capture information for impact reporting

Research

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

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

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

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

Services to Patients and to The Nightingale Centre

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

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

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

Recruit new volunteers for our coffee bar and refurbished shop

Health Awareness & Education

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

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

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

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

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

Income Generation

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

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

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

Implement the monthly donor strategy

Develop Major Donor Strategy with board of Trustees

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

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

Financial Review

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

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

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

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

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

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

Our Expenditure for 2022/23:

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

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

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

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

How we spend our funds	
Charitable Activities	£838,089
Cost of Raising Funds	£290,591
Merchandise Costs	£9,178
Investment Management Fee	£6,008
Total Expenditure	**£1,143,866**

Future Charitable Expenditure Restricted Reserves	
Gene Research PHDs	£487,500
Training Suite (Refurbishment of existing space)	£411,020
National Breast Imaging Academy Capital Build	£237,703
Asian Women's Health Awareness Campaign	£16,786
Addressing Health Inequalities	£10,100
Total Restricted Reserves	**£1,163,109**

Reserves Policy

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

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

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

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

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

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

Fundraising Costs Policy

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

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

Fundraising Approach

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

Investment Policy

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

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

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





Structure, Governance and Management

Governing Documents

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

Appointment of Trustees and Induction

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

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

Organisation

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

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

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

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

Related Party Transactions

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

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

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

Pay Policy for Senior Staff

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

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

Risk Management

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

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

Risk policy objectives:

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

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

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

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

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

Reference and Administrative Details

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

L Barr - Chairman

P S Glass

D Harris

T Hopla (appointed September 2022)

J Humphris (appointed November 2022)

K James (resigned September 2023)

C Lee-Jones

C J Levine - Treasurer

J Lovell (resigned November 2022)

E O'Neal

S Saleh

Dr M Wilson

Key Management Personnel	N Barraclough - Chief Executive Officer E Mellor - Head of Communication and Campaigns J Ruth - Head of Income Generation J Coleman-Reed - Head of Operations
Secretary	J M Glass
Company Registered Number	04831397
Charity Registered Number	1109839
Registered Office	Prevent Breast Cancer Research Unit The Nightingale Centre Wythenshawe Hospital Southmoor Road Manchester M23 9LT

Auditors	Alliotts LLP Chartered Accountants and Business Advisors Friary Court 13-21 High Street Guildford Surrey GU1 3DL
Bankers	Royal Bank of Scotland Plc. 38 Mosley Street Manchester M2 3AZ
Solicitors	Gunnercooke LLP 53 King Street Manchester M2 4LQ

Statement of Trustees' Responsibilities

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

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

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

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

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

In so far as the Trustees are aware:

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

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

Eamonn O'Neal DL

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

Eamonn O'Neal - Chairman

Date: 04/12/2023

Independent Auditor's Report

Opinion

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

In our opinion, the financial statements:

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

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

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

We have nothing to report in this regard.

Matters on which we are required to report by exception

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

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

Responsibilities of Trustees

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

Auditor's responsibilities for the audit of the financial statements

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

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

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

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

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

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including
fraud and non-compliance with laws and regulations, was as follows:

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

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

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

Audit response to risks identified

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

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

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

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

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

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

Use of our report

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



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

Date: 08/12/2023

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

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

Statement of Financial Activities

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

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

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

All income and expenditure derive from continuing activities.

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

Balance Sheet
as at 31 March 2023

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

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

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

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

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

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

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

E O'Neal - Chairman
Trustee

Company registration number 04831397

Statement of Cash Flows
for the year ended 31 March 2023

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

Notes to the Financial Statements

1. Accounting policies

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

1.1 Accounting convention

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

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

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

1.2 Going concern

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

1.3 Charitable funds

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

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

1.4 Income

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

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

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

1.5 Expenditure

All expenditure is accounted for on an accruals basis and has been included under expense categories that aggregate all costs for allocation to activities. Where costs cannot be directly attributed to particular activities they have been allocated on a basis consistent with the use of the resources.

Fundraising costs are those incurred in generating funds and do not include the costs of disseminating information in support of the charitable activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include project management carried out in house.

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

Grants

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

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

1.6 Tangible fixed assets

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

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

Computers 20% straightline

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

1.7 Fixed asset investments

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

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

1.8 Impairment of fixed assets

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

1.9 Stocks

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

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

1.10 Cash and cash equivalents

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

1.11 Retirement benefits

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

2. Critical accounting estimates and judgements

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

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

Critical judgements

Current asset investments

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

Premises costs

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

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

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

4 Income from investments	Unrestricted funds 2023	Unrestricted funds 2022
	£	£
Interest from investments	11,007	7,523
Interest receivable	6,329	43
	17,336	7,566

5 Charitable activities Patient Care and Services to the Centre	2023	2022
	£	£
Coffee Bar Income	57,846	40,270
Donations to the Coffee Bar	1,313	1,364
	59,159	41,634

6 Other trading activities	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Total 2022 £
Fundraising events	23,530	-	23,530	30,544
Merchandise sales	32,661	-	32,661	42,394
Other trading activities	56,191	-	56,191	72,938
For the year ended 31 March 2022	72,938	-		72,938

7 Expenditure on raising funds	2023 £	2022 £
Fundraising and publicity		
Events, income generation and promotion costs	52,515	27,936
Fundraising agents	140,039	49,950
Staff costs	77,203	45,585
Support costs	20,834	11,064
Fundraising and publicity	290,591	134,535
Trading costs		
Merchandise costs	9,178	8,751
Investment management	6,008	5,358
	305,777	148,644

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

9 Trustees

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

10 Grants payable

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

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

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

Gene Research

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

Early Detection and Improved Screening

Predicting outcomes using microsimulation - £30,000

Lifestyle and Environmental Risk Factors

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

Risk Reducing Drugs

Effects of preventive tamoxifen - £59,564

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

Research Salary

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

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

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

12 Employees

Number of employees
The average monthly number of employees during the year was:

	2023 Number	2022 Number
Administration	1	2
Operations	1	4
Charitable Activity	7	3
Generating Funds	4	3
	13	12

The full time equivalent for employees during the year was:

	2023 Number	2022 Number
Administration	1	2
Operations	1	2
Charitable Activity	6	4
Generating Funds	4	3
	12	11

Employment costs	2023 £	2022 £
Wages and salaries	322,164	215,812
Social security costs	27,274	13,635
Other pension costs	7,105	4,437
	356,543	233,884

The number of employees whose annual remuneration was £60,000 or more were:

	2023 Number	2022 Number
£60,000 - £70,000	1	-

13 Taxation

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

14 Net gains/(losses) oninvestments

	Unrestricted funds 2023 £	Unrestricted funds 2022 £
Revaluation of investments	(35,150)	(14)
Gain/(loss) on sale of investments	-	5,320
	(35,150)	5,306

15 Tangible fixed assets

	Computers £
Cost	
At 1 April 2022	2,679
Additions	1,943
At 31 March 2023	4,622
Depreciation and impairment	
At 1 April 2022	1,407
Depreciation charged in the year	515
At 31 March 2023	1,922
Carrying amount	
At 31 March2023	2,700
At 31 March 2022	1,272

16 Stocks

	2023 £	2022 £
Finished goods and goods for resale	23,157	14,848

17 Debtors

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

18 Fixed asset investments

	Other investments
Cost or valuation	
At 1 April 2022	1
At 31 March 2023	1
Carrying amount	
At 31 March 2023	1
At 31 March 2022	1

Other investments comprise:	Notes	2023 £	2022 £
Investments in subsidiaries	27	1	1

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

19	Current asset investments	2023 £	2022 £
	Listed investments	794,241	543,384

Included in current asset investments is £25,160 (2022: £17,646) of cash held within the portfolio.

20	Creditors: amounts falling due within one year	2023 £	2022 £
	Other taxation and social security	5,138	4,333
	Trade creditors	41,397	54,149
	Grants payable	182,161	22,119
	Other creditors	4,444	2,841
	Accruals and deferred income	56,502	35,246
		289,642	118,688

21	Creditors: amounts falling due after more than one year	2023 £	2022 £
	Grants payable	84,918	-

22	Analysis of net assets between funds	Unrestricted funds 2023 £	Restricted funds 2023 £	Total 2023 £	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £
	Fund balances at 31 March 2023 are represented by:						
	Tangible assets	2,700	-	2,700	1,272	-	1,272
	Investments	1	-	1	1	-	1
	Current assets/(liabilities)	647,936	1,163,109	1,811,045	745,000	712,820	1,457,820
	Long term liabilities	(84,918)	-	(84,918)	-	-	-
		565,719	1,163,109	1,728,828	746,273	712,820	1,459,093

23 Restricted funds

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

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

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

23. Restricted funds

AWHA projects

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

Breast cancer awareness videos

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

Research Salary

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

Clotting and Breast Density

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

BRCA2 and PALB2

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

Forget-me-not 2

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

BRCA Gene PHD Research

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

Addressing Health Inequalities

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

Outreach and Awareness (Health Promotion)

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

Building a National Breast Imaging Academy (NBIA)

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

NBIA fundraising campaign

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

Creation of a Breast Imaging Training Suite

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

Defining the Effects of Preventative Tamoxife

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

Alcohol Consumption and Breast Cancer

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

Awareness Event at House of Commons

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

24 Operating lease commitments

	2023 £	2022 £
At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:		
Within one year	1,498	2,393
Between two and five years	3,369	1,196
	4,867	3,589

25 Designated funds

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

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

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

26 Related party transactions

	2023 £	2022 £
Remuneration of key management personnel The remuneration of key management personnel is as follows.		
Aggregate compensation	181,964	103,979

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

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

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

27 Subsidiaries

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

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

28 Analysis of changes in netfunds

The charity had no debt during the year.

29 Cash generated from operations

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




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CAN KISS MY
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PREDICT PREVENT PROTECT
preventbreastcancer.org.uk
MAG
prevent breast cancer
YX22 DKG

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Prevent Breast Cancer Limited Registered in England No. 4831397 Registered Charity No. 1109839

Prevent Breast Cancer

England & Wales - Charity number 1109839

Accounts

prevent breast cancer

Annual Report

Annual Report and Financial Statements

For the year ended 31 March 2022





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“Thank you to each and every one of you who took part, pledged sponsorship and showed your support for Prevent Breast Cancer.”

A message from our Chair

I am pleased to begin this year's report with some welcome news regarding Prevent Breast Cancer's research. Following a tough two years managing the impact of Covid restrictions on our research workload, we've been able to open our pipeline once again – enabling our excellent researchers to continue their groundbreaking work into preventing breast cancer.

You may recall from last year's annual report that a major impact for us from Covid was the need to temporarily close our pipeline of new research projects, in line with other medical research charities who had to do exactly the same thing. This allowed us to concentrate on completing our existing research work without interruption. Our hope now is that the first new project will start shortly, thanks to an extraordinary legacy that we have received from a valued and sadly missed supporter.

This project will be looking at extending previous research into BRCA breast cancer genes, and our aim is to fund a PhD Scholarship in the name of The Doctor Alan H Gowenlock PhD studentship Award. Further projects will follow under this new scholarship scheme. We reopened our call for research grant applications on 1 April 2022 – meaning that the next funding round of grants is now underway! New projects are being reviewed by our scientific research committee, and will be featured in next year's report as they progress.

The last year has been a time for us to consolidate – but we are ready to 'spring back'! In fact, Spring Back was the nickname we've given to this year, as our focus has been on getting the charity back to where it was pre-pandemic.

Our fundraising team have opened up new fundraising to generate more income for our work once again. Sporting challenges have been one of our biggest revenue streams, and it has been wonderful to see the return of many sporting events including the Great Manchester Run and the London Marathon and various cycling and other challenges by you, our valued supporters. Thank you to each and every one of you who took part, pledged sponsorship and showed your support for Prevent Breast Cancer.

The National Breast Imaging Academy (NBIA) continues to be one of our top priorities. You may well have seen several newspaper headlines in recent months concerning long waiting lists for NHS diagnosis and treatment as a consequence of the Covid pandemic. This includes delays in access to breast clinic appointments, with many parts of the country unable to meet the 'two week wait' target, and also delays within the NHS breast screening programme. An underlying reason for this is a lack of trained staff in breast imaging: mammographers; radiology doctors; and advanced practitioners. The NBIA is our solution – a significant and major national initiative to address this problem. It is already running training programs online for new staff, but the pressing need is for a physical building, which we plan to build alongside the existing Nightingale Centre and Prevent Breast Cancer Research Unit.

The NHS has committed to fully funding the running costs of the NBIA, but little funds are currently available for construction. Thus, we are applying for capital to independent trusts and foundations. During the past few years the fundraising team has been working hard to raise funds for the new building and to date have secured pledges of £600,000. These formal pledges will be included in our income once the £3.57 million required to build the NBIA has been reached. Funding of over £2.1 million has been raised to date. Please see page 18 for more information.

We enter the coming year in very good shape, with an excellent fundraising team in place and a truly magnificent research team. We have invested in the infrastructure of the charity by designating funds to neglected areas such as our database, our office, our shop, and our online digital systems. As always, the most important element of this is the support and dedication of our many supporters, for whom we are infinitely grateful.

We dedicate this report in memory of our wonderful supporter Mrs Thelma Gowenlock.

DocuSigned by:
3A9F95E822C24D8...

Lester Barr MBE
Chair of Prevent Breast Cancer

About us

Prevent Breast Cancer's mission is to make breast cancer a preventable disease for future generations by funding ground-breaking research into the prediction and prevention of the disease.

The Need

- Each year 55,920 people in the UK are diagnosed with breast cancer. Approximately 11,499 a year people lose their lives to the disease[1]
- Breast cancer is the biggest cause of death in women aged between 35 and 49
- In the UK, rates of breast cancer in women have increased by 24% in the last 30 years
- 1 in 10 breast cancers are diagnosed late
- In 2020, the government spent just 8.6%[2] on preventive care and early detection of all diseases. We believe more needs to be done, which is why the research we undertake is absolutely vital

Our Mission: Predict, prevent, protect

Prevent Breast Cancer's mission is to make breast cancer a preventable disease for future generations by funding ground-breaking research into the prediction and prevention of the disease.

Breast cancer is the most common cancer in the UK, with 153 people being diagnosed each day. Each year, we lose 11,499 people to this disease.

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

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

Public Benefit

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

Grant Making Policy

Our grant making seeks to further the prediction, prevention and early diagnosis of breast cancer, particularly in terms of supporting the research team working within The Nightingale Centre and the Manchester Breast Centre.

[1] http://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breast-cancer

[2] https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthcaresystem/bulletins/ukhealthaccounts/2020#government-healthcare-expenditure



Prevent Breast Cancer is also a non-commercial partner of the National Institute of Health Research.

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

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

We have a rigorous system in place to review grant applications.

Once received, each application is reviewed internally by a member of the SAB, who must be independent of the project. If deemed suitable, the application is then sent to two external reviewers, who are independent to Prevent Breast Cancer and the host institution. Each reviewer will complete a review form and give a final summary score. A project has to be achievable and the reviewer has to explain why a project is recommended. Funding requests between £10,000 and £30,000 are reviewed internally by three members of the SAB, who are each independent of the project.

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

The expert reviews are then presented to the Board of Trustees, which takes the final decision on whether to provide funding.

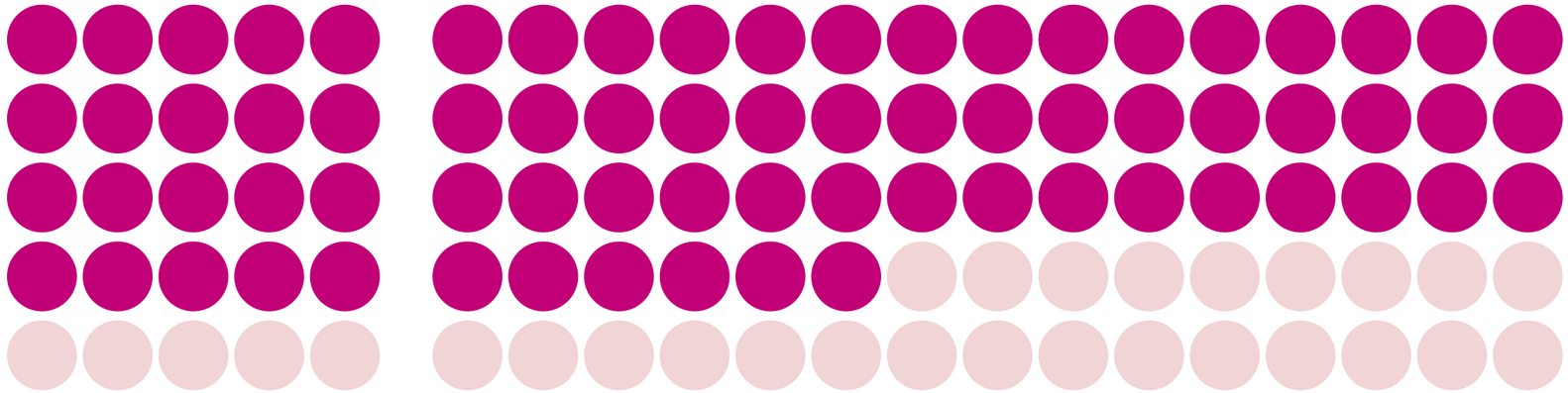
If the Chair or any other SAB member has a conflict of interest on an application, they are excluded from the discussion and decision-making process in order to ensure complete impartiality.

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

Prevent Breast Cancer does not fund experiments on animals.

Charitable activity

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



For every £1 spent this year, 71p went on charitable activity

£712,820

The charity holds **£712,820** in restricted reserves for future research projects and towards the building of the National Breast Imaging Academy

10%

There has been a 10% increase in new users to our website

Our most visited webpages continue to be 'Signs & Symptoms' and 'About Breast Cancer'

We have designated

over £200,000

to fund new research in 2022/2023

967

967 pieces of media coverage for and about the charity, including on ITV News, Loose Women, Dancing on Ice, The Times and Daily Mail

Our research programme

Since 2010 we have spent £3.79 million on ground-breaking research. And since August 2015 our scientists have published over 200 research papers in peer review journals.



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

Our Philosophy

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

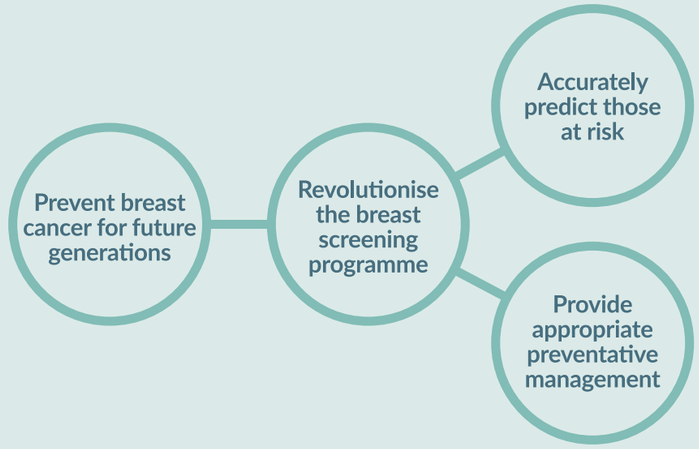
Our research is targeted and specialist, focused on four key areas: gene research, early detection and improved screening, risk reduction and preventative drugs.

Predicting who is at risk

In the past you will have read that the average risk for a woman in the UK to develop breast cancer was “1 in 9”, or “1 in 8” , or even “1 in 7”. These numbers are in fact a bit misleading. We now know that the risk of an individual woman getting breast cancer is a spectrum.

At one end of the spectrum are those women who are carrying a very high risk gene such as BRCA1 or BRCA2, whose risk can be as high as 85% – which is effectively one in one! At the other end of the scale are women who, as a result of their genetics and lifestyle have only a risk of around 1 in 50. Most women are somewhere in the middle, and in fact for the average woman who does not carry a high risk gene the risk is probably around 1 in 20. We are now in a position where we can fairly accurately predict an individual woman’s risk of developing breast cancer in their lifetime. The most accurate method involves taking a gene test (for high and intermediate risk genes and genetic variations called SNPs), having a low dose mammogram to assess breast density, and then assessing lifestyle issues. Adding these risk factors together gives a personalised risk prediction - and this work has been one of the most important achievements of our research team over the last decade under the leadership of Professor Tony Howell and Professor Gareth Evans.

Predicting who is at risk of breast cancer is a very important step towards prevention of the disease. Knowing who is at risk gives early warning, allows regular screening, and can lead to an extremely early diagnosis even at the pre-cancer stage (DCIS - ductal carcinoma in situ).



We now have preventative drugs for those at high risk. For those at an extremely high level of risk there is even the option of preventative surgery.

Research Strategy

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

Our research strategy involves four main areas of research working in parallel. We call these our four pillars of research.

The first is **gene research.** This researches the major gene mutations that can cause breast cancer, and in addition looks at tiny gene variations called SNPs that can also have a major impact on risk.

The second area of research is **early detection and screening.** Breast screening through regular mammograms already saves lives. Our research into risk prediction suggests that screening can be further improved by targeting those at high risk. It also raises the possibility of being able to start screening at a younger age, screening currently starts at 50 years of age in the UK. There are still several problems to overcome, such as the best technology to screen women with high breast density, and those of a younger age, and to detect those types of breast cancer which are difficult to see on a mammogram.

The third area of research is in the area of **risk reduction.** We know of several lifestyle factors, which are particularly prevalent in western countries, that increase risk. Research into how these risk factors can be modified could reduce risk for the whole population of the UK. This area of research has been driven forward by our research dietitian Michelle Harvie and her team.

Our fourth pillar of research is into **preventative drugs.** There are already three drugs (a daily tablet) approved for breast cancer prevention in the UK - Tamoxifen, Anastrozole and Raloxifene. These can be prescribed for women predicted at high risk, but each has side effects and so our intention is to continue looking for others.

Research plans

In collaboration with the Manchester Breast Centre, Prevent Breast Cancer scientists are working towards achieving the following by 2025:

Gene research

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

1. To identify all the remaining undiscovered high risk and intermediate risk genes
2. To identify all the genetic variations (SNPs*) linked to breast cancer in every ethnic group and community across the country and internationally
3. To identify new tests for risk prediction such as polygenic risk scores and new bio-markers
4. To develop tools that accurately predict an individual's risk of breast cancer
5. To identify more targeted ways to provide breast screening adapted to an individual's predicted risk.
6. To improve uptake of screening, collaborating with the NHS and grassroots organisations
7. To develop new approaches for screening and prevention in young women before the age of eligibility for breast screening (age 50 in the UK).

Early Detection and Screening

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

1. To improve the accuracy of screening through new technology
2. To improve early diagnosis for women with high breast density and for cancers missed by current technology
3. To improve our understanding of why breast density promotes breast cancer

Risk Reduction

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

1. To discover the mechanisms through which known risk factors work to impact breast cancer
2. To identify mechanisms for reducing known risk factors such as diet, exercise and lifestyle interventions
3. To identify biomarkers of response to risk reducing measures
4. To develop a lifestyle management programme that is effective in reducing risk of breast cancer.

Preventative Drugs

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

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

SNPs = single nucleotide polymorphism

Research Plans for 2022-2023

In March 2022, the Trustees felt that the charity was in a strong enough financial position (post-pandemic) to be able to re-open the funding round for new research.

In April 2022, the funding round opened with a sum of £200,000 designated for new projects. Applications should be for research into the early diagnosis, screening and prevention of breast cancer. Our particular areas of interest are methods of improving breast screening and prevention strategies such as preventative drugs, lifestyle prevention and surgical prevention. Another area of interest is breast cancer prevention and early diagnosis in under-served populations.

As we look into the next year, we are particularly interested in research that builds on these topics, and aim to fund one grant up to a total cost of £100,000 alongside three or four grants of up to £30,000.

We have received a legacy from Thelma Gowenlock to continue our research into how the BRCA genes work and why they cause such a dramatic increase in breast cancers. This work will be supervised by Emma Woodward and Professor Gareth Evans. Other projects are being added to the pipeline this year, under guidance from our scientific advisory board led by Professor Cliona Kirwan, Sacha Howell, James Harvey and others. Our broad intention is to fund a portfolio of research projects that span all four research pillars.

Current Research Projects

Gene Research

Identifying DNA fragments that increase risk

Our flagship gene research project began in 2011 and focuses on identifying SNPs – the fragments of DNA which affect breast cancer risk. In total, over 300 of these tiny but significant gene fragments have been discovered in research contributed to by our research team, who have developed a simple saliva test to detect them.

Following a pause on this research until July 2020, due to the pandemic, we have been able to recruit over 250 women to take part and create a sub-study that deals with patients by post in order to keep those involved as safe as possible.

As well as this we have widened the eligibility for the SNPs study to all sites, including East Cheshire and East Lancashire and have now brought in the ability to provide a SNP sample in our PROCAS study and have a more in-depth risk calculation to all recruiting sites.

Our pioneering PROCAS research will introduce a personalised breast cancer risk estimations to the NHS Breast Cancer Screening Programme. The successful conclusion of the SNPS 3 project will see a gene fragment test contributing to the risk calculation for each woman, helping identify those at a higher risk and meaning more cases of the disease can be prevented.

Improving the accuracy of genetic testing

Prevent Breast Cancer's scientific research team was responsible for discovering a previously undetected fault in the BRCA1 gene which increases the risk of breast cancer and ovarian cancer. They discovered a new mechanism affecting the gene, called 'epigenetic silencing', which is not detected by current gene tests. In fact, at present only around 20% of those affected by familial breast cancer find that there is a direct mutation causing it.

Our team have been researching whether epigenetic silencing is also affecting the genes BRCA2 and PALB2. They are using genome testing of over 400 gene samples from people who have symptoms of inherited breast cancer but for whom testing found no genetic cause.

This research could lead to more accurate genetic testing and mean that those affected will be given access to earlier and more frequent cancer screenings and more appropriate treatments if they do develop breast cancer. It could reduce the number of women who are currently slipping through the net because their family history is not detected.

Between 2020 and 2022, our researchers have made excellent progress. Manuscripts have been accepted and submitted for publication on the clinical benefit of gene panel testing in families with breast cancer with a seminal paper in the high impact Genetics in Medicine journal.

Additionally, good developments have been made towards the data analysis and publication of work on breast cancer prediction using polygenic risk scores. Lab work was limited due to the Covid pandemic, however, this has increased since the easing of restrictions and there have been few delays to the progress of the study overall.

Prevent Breast Cancer funded post-doctoral fellow Elke van Veen, who has been named as a contributor in 20 publications since 2020.

Early Detection and Screening

Thousands benefit from smarter screening

Prevent Breast Cancer's PROCAS study will revolutionise NHS breast screening, by predicting a woman's individual risk of breast screening at the time of her mammogram.

Our PROCAS 2 study recruited 2,500 women over the last two years. Although this figure is a reduction compared to the intended numbers of participants, it is still a considerable number to reach and means that we are able provide these women with an individual risk score for developing breast cancer. Alongside SNP analysis from 259 patients, we have also been able to look at the SNPs of many of the women who took part in PROCAS 1.

This has given us an even larger control group to work from going forwards. Being able to adapt our research during the pandemic and find scope outside of face to-face appointments has meant we have continued to build data that supports the need for tailored screening.

Each risk score was calculated by analysing factors such as breast density, gene fragments, family history and lifestyle. Once they know their score, the women participating in our pilot study have been able to make proactive choices about their health to reduce the chances of the disease developing. Those found to be at higher risk are provided with advice and support and, where appropriate, offered options including more frequent mammograms, preventative medication and surgery. Women assessed as high risk in PROCAS2 had a very high likelihood of taking risk reducing medication – especially anastrozole – with 78% of those who had a virtual appointment starting medication. We have five papers currently being submitted as part of the PROCAS 2 programme.

PROCAS launched in 2009 and is the largest recruiting research study in Britain. This more sophisticated approach to screening will transform the process when it is rolled out across the UK by 2024. It will move us significantly closer to our vision of preventing breast cancer for future generations.

This year, the PROCAS project has been referenced in 29 publications.





Establishing why higher breast density causes cancer

The density of breast tissue on a mammogram has become a key component of our ability to predict breast cancer risk in individual women. Our scientists have been working on lab-based projects to try and understand why breast density is such an important predictive risk factor.

It turns out that breast density is not related to the number or density of cells in any individuals breast tissue, but rather to the supportive tissue around the cells which holds everything together. This is known as extra-cellular matrix (ECM). An important component of ECM is collagen, the molecules of which line up alongside each other to give a 'stiffness' to the tissues. Breasts that have dense ECM show up as more white on a mammogram, compared to less dense fatty tissue which shows as dark areas.

Studies have shown that the breast tissue of women with high breast density on a mammogram (and therefore the highest breast cancer risk) have tissue that is much stiffer compared to others in their lab tests. They have a stiff ECM compared to those with low breast density.

Using a cell culture model, the team have shown that breast cells within a stiff ECM are subject to higher levels of DNA damage than those in a soft ECM. They have then gone on to identify a number of molecular 'signalling pathways' and 'switches' along those pathways that might lead to this DNA damage and thus cancer risk.

These pathways effect the way cells send signals to each other (cell-to-cell interactions) and also how ECM sends signals to the cell (cell-matrix interactions).

Work will continue, because once key pathways and switches have been identified this could lead to ways of stopping harmful signals getting through, and thus reduce cancer risk.

Risk Reduction

Finding the best methods to support lifestyle changes for high-risk women

Around 20 per cent of breast cancer cases are thought to be linked to potentially modifiable factors, such as weight and alcohol consumption, yet women at high risk do not currently receive effective support that enables them to adopt a healthier way of life. At present, only general written advice is provided, with only a minimal effect on behaviour. This means that important opportunities to prevent breast cancer are being missed.

Between 2018 and 2019, Prevent Breast Cancer supported the Family History Lifestyle study. This study worked with 210 high risk women from three different hospitals and was led by our award-winning dietitian, Dr Michelle Harvie. It aimed to identify the most effective way to support women at high risk of breast cancer to enable them to make changes to their diet and physical activity, and lose weight to reduce their risk of breast cancer.

The 210 high-risk women were allocated to either a normal care group who received written advice (37 women) or one of two remotely delivered dietitian supported programmes: either a breast cancer prevention programme framed to reduce risk of breast cancer 86 women); or a multiple disease prevention programme framed to reduce risk of breast cancer and heart disease and diabetes (87 women). After 12 months, women in the two dietitian supported groups had lost more weight than the written advice group (6% vs 3%). Weight loss was the same in the both dietitian supported groups.

The study demonstrated that women can be empowered to lose weight with a phone or web dietitian supported programme. We plan to run a larger study of the programme across a number of clinics in the NHS. This will provide the required level of evidence that the remotely delivered phone and web programme can be rolled out across a number of high-risk NHS clinics.

Preventative Drugs

Anti-clotting drugs to prevent breast cancer

Fibroblasts are the most common type of cells found in the tissue surrounding breast ducts and lobules. These cells produce collagen, which is associated with high breast density - a risk factor for the development of breast cancer. Breast cancer resembles a non-healing wound, with increased clotting in breast tumours.

Prevent Breast Cancer research, published in 2020, found that fibroblasts in ductal carcinoma in situ (DCIS) have higher levels of clotting than fibroblasts in normal breast tissue, with a further increase in clotting seen in fibroblasts in invasive

cancer. Our team is now examining whether the fibroblasts in high-density breast tissue create a wound-like environment, which increases clotting and causes normal breasts to develop cancer and causes benign cases of DCIS to become invasive.

This project has enormous potential for breast cancer prevention. Other researchers have recently found that early changes in breast ducts may be the deciding factor in whether breast cancer invasion occurs. If it is found that breast density is causing a procoagulant microenvironment that leads to the development of breast cancer, anti-clotting drugs could be recommended for women who present with high-density breast tissue at screening in order to reduce their risk of developing breast cancer.

Our research is ongoing and is mediated by Manchester Cancer Research Centre Biobank, which enables new tissue samples to be available for examination. Our researchers have presented their findings at conferences including the Manchester Pathology 2021 virtual meeting.

Our next phase has now begun and, given the large collection of samples we have now obtained, should proceed rapidly. Given the increasing prominence of the role of breast density and wound healing in the development of breast cancer, this research should lead to important findings that will inform prevention strategies.

Undertaking large scale testing of preventative drugs

In 2019, our researchers developed a complex replication of human breast tissue which would enable them to undertake large scale testing of drugs that could prevent breast cancer developing. Over the following 12 months, we began testing medication using this exciting technological advance.

Our project is a world-first. The model so closely resembles real breast tissue that it mimics mammographic density, one of the most important predictors of the disease. As the drugs being tested are repurposed, they are already known to be safe for human consumption. This means that our researchers will be able to identify promising potential drugs to take directly into clinical trials, speeding up the process and avoiding animal testing.

The currently prescribed preventative drugs Tamoxifen and Raloxifene can sometimes create side effects, and are not always suitable for all women. Our scientists have been working to identify well-tolerated drugs which could see increased take up among those at high risk of breast cancer, reducing the number of lives lost to the disease.

Targeting prolactin to prevent breast cancer

In 2013, the National Institute of Clinical Excellence adopted our recommendation that the drugs Tamoxifen and Raloxifene should be used preventatively to help high-risk women reduce the likelihood of developing the disease. These drugs do not always work for all women, and so our researchers are working to identify alternative medication that can prevent breast cancer which is more effective, better-tolerated and safe.

In 2019, they investigated the hormone prolactin with the aim of discovering whether targeting this could stop the disease before it starts. If this is the case, our research could lead to anti-prolactin drugs being used to reduce breast cancer risk. As this medication is currently used to treat the disease, it is known to be safe and without significant adverse side effects.

Results suggest that there are differences in hormone signalling in some women. Our research team is now testing whether these mean that cancer is more likely to develop. Our scientists will determine whether inhibiting the key hormone pathways could lead to effective and safe new drugs.

Work from the prolactin study, in combination with a grant studying an anti-progestin, has helped to clarify the role of these hormones in normal breast biology and transformation to cancer. The work has been presented at San Antonio Breast Cancer Symposium 2021 and is expected to be published later in 2022. A study testing anti-progestins in women at increased risk of breast cancer is planned for 2022/23.

Ethnicity and breast cancer

Since 2015, Prevent Breast Cancer has been proud to collaborate with The Association of Breast Surgeons to offer an annual research development grant, totalling £6,000. This year's recipient is Oxford-based Dr Toral Gathani, who applied for funding to support the creation of a National Ethnicity and Breast Cancer Working Group.

Breast cancer is a significant health problem for all women in the UK. We know that women from the largest ethnic minority groups (Indian, Pakistani, Black African and Black Caribbean) are less likely to get breast cancer compared to white women, but more likely to have more advanced and aggressive types of breast cancer. We want to understand the reasons for differences in breast cancer outcomes in different ethnic groups. We also know that people from ethnic minority groups are less likely to get involved in health research, an issue that must be tackled.

A national Ethnicity and Breast Cancer Working Group, made up of experts from around the country, would work together to answer important research questions about the associations of ethnicity and breast cancer. Membership of the group is nearing finalisation, with a two-day workshop planned for the end of 2022.

The Group is also bringing together an ethnically diverse group of members of the public, including women with and without breast cancer, to work with it to develop its research and help ensure that it is representing the views of the people that it is researching.

It is hoped that these initiatives will address key issues around ethnicity and breast cancer to improve outcomes from this treatable disease for all, irrespective of their background.



National Breast Imaging Academy (NBIA)

Protecting life-saving screening with a new National Breast Imaging Academy (NBIA). The future of UK breast services and the progress made in reducing breast cancer mortality rates are under severe threat as the already depleted breast imaging workforce struggles to meet increasing demands exacerbated by the Covid-19 pandemic.



- The incidence of breast cancer is rising in the UK: In the last 10 years, GP referrals to breast units have doubled and the national screening programme has expanded by 24%.
- Demand is likely to grow further with the drive to achieve earlier diagnosis for cancer patients coupled with the development of personalised screening in order to maximise the effect of screening – especially in those women at higher risk.
- Technological advances have increased the complexity of imaging, with the rise of MRI guided biopsy, tomosynthesis, contrast enhanced mammography and vacuum biopsy procedures. These provide more accurate diagnosis and pre-operative planning assessment ensuring the most appropriate treatments are delivered, but place even more demands on the breast imaging workforce and machine time.
- While the need for imaging is increasing, staffing levels have not kept up with increasing clinical demand and there are now severe shortages amongst clinicians, radiographers and radiologists. Almost 15% of breast radiologist and radiographic posts are vacant nationally. In the UK, by 2025, 38% of breast radiologists and 49% of breast clinicians are set to retire.
- A lack of imaging staff puts breasts units at risk of closing, placing greater pressure on remaining services and ultimately leading to a poorer experience for patients.
- Several breast centres have closed – including Salford and Stockport within Greater Manchester – due to a lack of radiologists, placing even greater pressures on the remaining units. Because of these service pressures, identifying time and space for trainees is becoming increasingly difficult.

This is creating a perfect storm: an overstretched workforce operating with inadequate facilities in which to undertake the vital training needed to sustain the service. Improving cancer survival rates and boosting early diagnosis is not possible without a sustainable, future-proofed workforce. In October 2020, Professor Sir Mike Richards published a review of diagnostic services, which described services as approaching a 'tipping point' and called for major expansion to the workforce. The lack of appropriate space is also hampering the ability of many centres to participate in research studies which could potentially lead to breakthroughs in the treatment and care of breast cancer patients.

During Covid-19, there was a significant drop in the number of people seeing their GP, meaning a reduction in the number of breast screening referrals which has contributed to a backlog of patients needing to be seen by breast services. A study conducted after the first lockdown indicated there were 43% fewer urgent referrals for patients whose symptoms indicated that they had cancer than in the same period in 2019.

Research undertaken by Breast Cancer Now estimated that **12,000 breast cancers went undiagnosed in the UK in 2020**, and in addition, there were **1.5 million fewer breast screening examinations**, which again will have a huge impact on the number of undiagnosed breast cancers. Many screening programmes are experiencing further slippage because of the workforce shortages, and it is unclear when these are likely to recover.

Unless we act now, the workforce shortages will continue to worsen at a critical time when services are working hard to clear the backlog created by the Covid-19 pandemic. This means more patients waiting longer for breast cancer screening and ultimately poorer outcomes for patients and increased mortality rates. Without investment in training, there is a very real threat to the huge improvements in cancer survival seen over the last 40 years.

Our solution

The NBIA is a national, collaborative and multidisciplinary initiative, set up and run by a team at the Nightingale Centre to address the severe workforce issues faced in the delivery of breast imaging services across the country.

The Nightingale Centre, based at Wythenshawe Hospital, Manchester University NHS Foundation Trust (MFT) is the largest breast unit in the country, a national breast screening training centre and the largest recruiter to breast cancer research studies in the UK.

To date, over £7.8 million in revenue funding from Health Education England (HEE) has been secured for its educational programmes.

The NBIA is designed to provide a national solution. It is a national collaboration with input and support from all the breast training centres in England. Over 200 clinicians from across the country support some aspect of the NBIA. It acts as a central hub where staff can administer and co-ordinate training programmes for the country – for example, organising the recruitment and placements for the radiology fellows and breast clinicians and developing new apprenticeship programmes and online training resources.

It will provide a training hub where courses can be delivered face to face, with the much-needed space for trainees to acquire the necessary skills for their training needs.

Over the past four years, the NBIA has provided and supported training posts at 51 breast units, of which 45 are screening centres, thus supporting nearly 60% of the screening units in England.

However, finding adequate space in which to undertake training is becoming increasingly challenging, owing to workforce pressures and compounded by staffing shortages. This is impacting the placement of the second cohort of breast clinicians, with the NBIA struggling to secure training places for a number of these trainees. Within Greater Manchester itself, we have been forced to turn trainees away because of a lack of training facilities.

To fully realise the benefits of the NBIA, and to ensure that growing demand can continue to be met, a purpose-built training facility is required. This will enable greater numbers of trainees to be trained, and a better quality of hands-on clinical training to be delivered. The new building will provide much needed space for innovative clinical and academic training for apprentices, radiographers, radiologists and breast clinicians, together with medical students, radiology trainees and administrative staff, in a fully resourced teaching environment. The NBIA build was originally designed to be a two-storey extension to the existing Nightingale Centre, with a 50% increase in imaging capacity for outpatient breast services, which would cost £7.1m (a pre-Covid cost). However, the pandemic has made fundraising far more challenging and the need even greater, so a decision was taken to implement a phased approach to the development, so that some vital benefits can be realised more quickly.

The phase 1 development

The phase 1 development costs £3.57 million (recently increased from £3.2m due to inflation) and will provide:-

- Dedicated space and facilities to deliver outstanding, innovative, multidisciplinary training in a clinical environment.
- A 30% increase in imaging capacity for outpatient breast services.
- Dedicated research space in which to further improve recruitment to breast clinical trials and expand the research space for our existing research projects.
- Seminar rooms and workstations enabling training to be delivered in line with other radiology academies across the country.

Whilst this does not provide the full facilities required to deliver the maximum amount of training and full range of research activities, it will help to alleviate pressure and improve the situation while fundraising continues for the next phase of the build.

Innovation at the fore

The NBIA is the first truly multidisciplinary imaging academy in the UK. The Academy will enable pioneering training to meet the increased national workforce need. This will save lives by significantly alleviating the crisis facing the breast imaging workforce and preventing delays in breast cancer diagnosis and treatment.

Wider impact

The NBIA will have a positive impact locally, regionally and nationally, in both the immediate and longer term. The NBIA will result in cost savings and capacity relieving benefits to the NHS and will help patients across the UK. The new training pathways will transform training within breast imaging to provide a more cost effective and sustainable UK-wide workforce.

National benefits

Nationally from 2015/6 to 2019/20, breast referrals rose 12.5% from 541,939 to 609,836, a rate of 2.4% per annum. The NBIA will significantly increase our ability to train breast imaging professionals to meet this increased need and help prevent breast cancer.

Although the building will be in Manchester, it will be used by trainees from across England, as dedicated training courses will be offered to trainees on the NBIA's various programmes at specific points in their training. The NBIA already has over 100 previous or current trainees placed at 47 different breast units across the country. At present, it is not possible to offer them any face-to-face training but a NBIA build would enable every NBIA trainee access to high-quality, hands on training. This will benefit trainees and staff at breast units nationally, which ultimately benefits patients across the country.

Our researchers are improving methods of diagnosis so that women can be diagnosed and treated at an earlier stage in the disease's progression. As with all our research, this has the potential to have international impact, saving lives globally.

Benefits to the region

Over the last 10 years, there has been a steady increase in the numbers of patients referred to the Nightingale Centre. This has in part been driven by the closure of two breast centres in Salford and Stockport due to a lack of breast radiologists. The NBIA will meet the need for increased training capacity across the region.

Impact on the local economy and community

The NBIA will have the greatest impact across the North West of England, an area with severe social deprivation which has been disproportionately impacted by COVID. It will widen access to health care careers locally by developing innovative sustainable apprenticeship training. It will also help build the radiology and radiographic workforce within the region, which has the highest vacancy rates within England.

Long term benefits

By increasing the workforce, the NBIA will safeguard breast services and research activity, which will help to ensure:

- More breast cancers are prevented
- More breast cancers will be detected earlier
- Survival rates will increase
- Quality of life for those living with breast cancer will increase.

Build to Beat Breast Cancer

"We believe investment and further research to support the screening programme is needed, as screening has the potential to save many more lives. Two of our goals are to introduce better targeted and enhanced screening for women identified as being at particular risk and eventually to lower the age of breast screening to try and prevent breast cancer in younger women, but these are now being threatened by the ever-worsening shortages within the breast imaging workforce." **Lester Barr, Chairman, Prevent Breast Cancer**

In October 2021, Prevent Breast Cancer and Manchester Foundation Trust Charity teamed up to launch the "Build to Beat Breast Cancer" appeal to raise the funds required to make the National Breast Imaging Academy a reality.

Given our extensive and combined expertise in fundraising, strong supporter base and contacts, we believe we can deliver this essential facility. Our fundraising strategy is multi-faceted and our goal is to generate the majority of the funds required by December 2023.

Funding secured:

To date (as of 30th November 2022) over £2.11 million has been generated for the NBIA towards the goal of £3.57 million. This includes pledged income that we have raised, which will be accounted for once the fundraising target has been achieved; income raised by Manchester Foundation Trust Charity; and funding secured directly by the National Breast Imaging Academy Team from NHS England, which amounts to £739,000.

Prevent Breast Cancer has secured donations and pledges from the following organisations: -

- £350,000 pledged from Sir Jules Thorn Charitable Trust
- £150,000 pledged from The Chellaram Foundation
- £100,000 pledged from Garfield Weston Foundation
- £100,000 donated by The Beaverbrooks Charitable Trust

Supporting patients and professionals at the Nightingale Centre



Over **7,341** hot drinks sold to NHS staff and patients waiting for appointments;

a 110% increase to the prior year thanks to a steady return to face-to-face appointments – an encouraging step closer to pre-pandemic activity.

- We worked hard to put the necessary safety provisions in place to ensure the volunteers could return and felt safe volunteering.
- We've seen a steady increase in activity and footfall.
- We have moved to a more cashless system, utilising, the zettles as payment method. This required some training of volunteers, but overall has been a very successful move.
- Coffee shop income was £41,634, a 66% increase from the previous year, whilst the Welcome Desk and Shop could also finally reopen and we saw a six-fold increase in income from the previous year.

Now that our volunteers are all vaccinated, many have returned to their role at the Centre and we are delighted to have welcomed some new volunteers to our rota. Our Welcome Desk and Shop has been able to re-open and we are delighted to have this focal point in the Nightingale Centre back in full swing!

Awareness of breast cancer

It is estimated that thousands of women are living with undiagnosed breast cancers across the UK. This is due, in large part, to the pandemic and the issues this has presented, as outlined earlier in this report. Although many centres are working additional hours to reduce the backlog caused by the temporary closure of the screening service in 2020, it is predicted that it will take up to 24 months to catch up.

Health inequalities have always been a key concern for Prevent Breast Cancer. Inequalities which existed prior to the pandemic have now been exacerbated. We need to take action and have started to implement some of our work, which is outlined below and in the highlights section. There is, however, far more to be done and addressing inequalities will be one of our priorities for the foreseeable future.

Our health awareness campaigns

Update Hours

For the first 6 months of the year, face-to-face activity was still limited due to Covid restrictions. We continued our series of popular Update Hours, free online events, which were promoted across social media and directly to our database. Each event was streamed live on our YouTube channel and Facebook page and the series covered a range of different topics.

In May, we addressed the important topics of hormones, the menopause and breast cancer when our Ambassador Michelle Eagleton interviewed renowned endocrinologist Dr Annice Mukherjee and actress and Patron of Prevent Breast Cancer, Sally Dynevor.

In October, esteemed journalist and Patron Gordon Burns interviewed Chair and Co-Founder of Prevent Breast Cancer, Lester Barr about the future of the charity, our research and to find out more about his recent MBE for his commitment to preventing breast cancer.

Hundreds of our supporters watched each event, with excellent feedback. Furthermore, we continue to promote the content online, at talks and in email communication with our supporters.

Library of video content – guidance from our experts

- We successfully applied to East Lancashire Masonic Charity for £2,200 to produce a library of video content.
- Funds were put towards a range of video content, focusing on topics identified by the Prevent Breast Cancer team and requested by our supporters.
- We filmed many of our experts, including clinicians and scientists, talking about their key subjects.
- This is a useful tool on our website and YouTube channel, allowing us to signpost people who contact the charity asking for information. It's a resource that will help many people now and in the future. To date, the videos, which have only been recently released, have been viewed over 2,884 times.
- Topics include:
  - Breast reconstruction
  - What is breast screening and why does it start at 50
  - What is breast density
  - What we mean by a family history
  - What are SNPs
  - Stress and breast cancer
  - Men and breast cancer
  - What are SNPs – gene fragments
  - What is DCIS
  - Transgender people and breast cancer risk

Health information talks

Prior to the pandemic, the fundraising team was delivering health information talks to companies, community groups and in schools. Whilst this activity initially stopped in 2020, we used the time to re-brand, update the content and take it virtual. This activity continued to go from strength to strength in 2021. Some of the areas covered in the talks include:

- How to reduce your risk of developing the disease
- Signs and symptoms to look out for
- Causes of breast cancer
- How to check yourself
- Why we're focused on prevention
- Our latest research findings

In March 2022, we launched a new Health Hour focused on food and fitness and featuring our research dietitian, Dr Michelle Harvie – one of the first scientists to demonstrate that weight loss can reduce breast cancer risk.

During the year we delivered over 85 talks in companies and schools to over 2,000 people.

Breast Cancer Awareness Month

To mark Breast Cancer Awareness month, we teamed up with leading women's health technology company Hologic to launch the "It's Time" campaign in Greater Manchester with a pop-up event in Asda Eastlands Supercentre. The event aimed to raise awareness of the disease to time-poor women and highlight the importance of attending their breast screening appointment when invited.

Every year, 420 women in Greater Manchester die from breast cancer and research has found that there is a strong link between deprivation and an increased incidence of cancer. In Manchester, 60% of breast cancer patients are from the most deprived groups.

'It's Time' aimed to encourage women to put themselves first when it comes to their health and make the time for breast screening.

All women in the UK between the ages of 50 and 71 are eligible to attend a breast cancer screening appointment. Research shows that 78% of women put off scheduling routine health appointments because they are too busy taking care of other family members' health.

To help educate women on the importance of attending their routine screening appointment, volunteers handed out 420 single stem pink roses with a postcard attached, to let women know they are appreciated and encourage them to take the time to go for a breast cancer screening if eligible.

The postcards provided details on where to find out more information and urged women to attend screening if eligible. Volunteers also encouraged people to pass on a flower to a loved one to help raise awareness. The event also featured a large display of flowers in the shape of breasts to create a 'stop and stare' moment.

Volunteers from Prevent Breast Cancer with experience of breast cancer, and workers from Greater Manchester screening engagement programme Answer Cancer were on hand to answer any questions from women about what to expect from their appointment, and to alleviate any concerns.

Yasmin Haque, Prevent Breast Cancer Ambassador, said: *"After my experience of breast cancer, I urge the women of Greater Manchester to regularly check their breasts and know what's normal for you. If you have any concerns, then speak to your GP. When you receive your NHS invitation to attend breast screening. Don't ignore the letter; ring and book your appointment. Early detection is key. It could save your life."*

Nikki Barraclough, Executive Director at Prevent Breast Cancer, commented: *"The screening process is crucial to identifying breast cancer in its earliest stages. Prediction, prevention and early detection are at the heart of the work we do here at Prevent Breast Cancer. We make it our mission to better educate everyone on the benefits of screening and try to dispel any fears or misconceptions. We're excited to be out in the local Manchester community to raise awareness of the importance screening plays in saving women's lives."*

The local campaign also included Facebook posts targeting women in Manchester, posters and bus stop displays, all highlighting the importance of taking time to attend routine breast screening appointments.

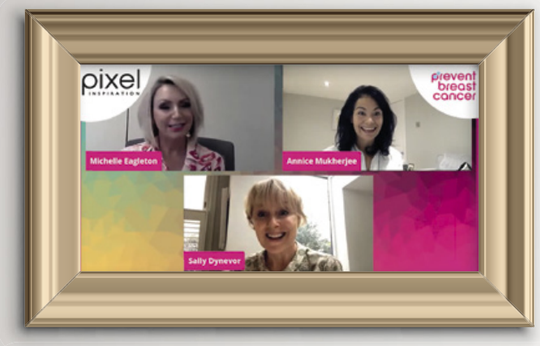
Hologic donated £10,000 to the charity, which will help fund future campaigns aiming to address health inequalities.

Our Year in Review: 2021/22

April to June

Corporate supporter Eversheds Sutherland teamed up with Overbury to take part in a 9,622km virtual bike ride from Eversheds Sutherland's new HQ in Manchester, to Eversheds Sutherland's Hong Kong office, raising £8,720.





Hundreds of supporters tuned in to our Update Hour focused on hormones, menopause and breast cancer.



With many restrictions still in place, the fundraising team took the opportunity to plan ahead and to connect with existing supporters, including our dedicated Ambassadors who raise awareness and fundraise in their local communities.

July to September



September saw the welcome return of the Great Manchester 10k Run and half marathon. This was the first significant third-party event our supporters participated in. Over 70 of our runners raised over £25,000 for the charity during these two runs.



Our inaugural Bike/Hike event in September was an opportunity to bring many of our supporters back together, a chance to catch up with each other and to share with people our plans for the year ahead. The purpose of the event was to reconnect, rather than raise funds and registrants chose between a 26-mile bike ride, or a four or eight-mile hike. This event raised over £2,000 for the charity.



Brighton-based supporter Graham Farthing finally got to do his skydive, which had been cancelled numerous times due to the pandemic and then the weather. He raised over £13,900.

Manchester bar NYNY showed its support by asking customers for donations over one weekend in July, raising over £5,000.

Our Year in Review: 2021/22

October to December



Our Hollywood Gala Dinner raised over £11,900 in November.



Actress and charity Patron Victoria Ekanoye shared details of her breast cancer diagnosis and subsequent treatment with the national media. Flying the flag for Prevent Breast Cancer she decided to turn her 40th birthday celebrations into a “Bye Bye Boobies Party” prior to her double mastectomy, raising awareness of breast cancer in younger women, women of different ethnicities and the importance of knowing how to check yourself. She also raised awareness of sickle cell anaemia, a condition she has which complicated her surgery. Her event raised over £7,900.



The London and Manchester Marathons returned and runners raised over £22,000.



Ambassador Heidi Chapman organised the Cheshire Film Premiere of The Colour Room, a film about the life and work of English potter Clarice Cliff. This was a unique event for the charity and it raised over £7,000.



Sales of our Christmas cards raised over £14,000.

We received the wonderful news that Sir Jules Charitable Trust had pledged £350,000 towards the building of the National Breast Imaging Academy.

With most restrictions finally lifted, Breast Cancer Awareness Month returned with a bang and activity continued right the way through to Christmas. All the planning from April to June was worth it!



We officially launched our joint venture with Manchester University Foundation Trust Charity –a joint fundraising campaign – Build to Beat Breast Cancer to raise the funds required for a National Breast Imaging Academy.



Despite concerns of growing Covid rates, we decided to continue with our Christmas Concert at Manchester Cathedral with appropriate measures to ensure that our 400 guests felt safe. This festive night of entertainment, a firm favourite in our annual calendar, raised over £6,000.

Our Year in Review: 2021/22

January to March

Long-term donor The Beaverbrooks Charitable Trust donated £50,000 to the National Breast Imaging Academy, taking their total donations for this project to £100,000.



Manchester Airport Group's charity golf day resulted in a donation of £10,500 to the charity. Captains at four golf clubs raised over £20,000 between January to March.



Fundraising campaign Paint Altrincham Pink raised over £12,400.



A party organised in support of our wonderful Patron Sally Dynevor, who was appearing in Dancing on Ice, raised over £3,400 and resulted in the charity being mentioned on the programme.

Strategic aims and objectives

Strategic Aims and Objectives – 2021-2022

Governance and structure

Recruit two new trustees	Completed
Grow the fundraising team and invest in the structure. Recruit: • senior corporate fundraiser • sports fundraiser • supporter engagement administrator	Ongoing and updated organisation structure in place
Invest in training – IT Security & Compliance, and Diversity, Inclusion & Equality	Ongoing
Review internal processes and induction process for new employees	Ongoing
Write an Equality, Diversity & Inclusion statement	Ongoing

Research

Reopen grant funding applications and award new research grants	Achieved in April 2022

Services to patients and to The Nightingale Centre

Service and update information screens located in the reception area, creating a more interactive environment for patients waiting for their appointments	In progress
Invest in the layout of our Welcome Desk and shop so it is more inviting to patients and to staff	In progress

Health awareness and education

Continue our work to promote the signs and symptoms of breast cancer across our digital platforms, in the press and through grass roots events	Achieved and ongoing
Collaborate with a commercial organisation on a health awareness campaign during Breast Cancer Awareness Month (October)	Ongoing
Explore a campaign focussed on raising awareness of family history and breast cancer	To do
Film and edit a library of video content on different breast cancer topics for our website	Achieved
Revisit a film focused on the importance of the breast screening invitation letter, finishing the edit and completing translation into Urdu and Bengali	To do
Continue to develop and to promote our Health Hour Talks, approaching schools and companies	Achieved & ongoing

Income generation

Launch a joint capital fundraising campaign with Manchester Foundation Trust Charity, "Build to Beat Breast Cancer", to build the National Breast Imaging Academy	Achieved & ongoing
Launch and develop our Power of Prevent (POP) campaign encouraging our supporters to either "kick a bad habit" or set themselves an exercise challenge whilst raising funds	Due to other priorities and the lifting of Covid restriction, this campaign is inactive
Grow income from companies and secure new corporate partnerships and/or Charity of the Year opportunities	Ongoing
Implement a long-term monthly donor strategy and increase the number of regular donors	To do
Organise two face-to-face supporter stewardship events to discuss fundraising plans for 2022	In progress

Strategic Aims and Objectives – 2022-2023

Governance and structure

Undertake a Board Effectiveness Review
Review investment strategy to ensure that we are maximising the potential from the funds we hold, whilst ensuring our portfolio remains low to moderate risk: • Re-invest the £80,000 taken from investments in 2020 • Invest a percentage of the legacy we have received to fund gene PHDs and associated work • Set up Charity Aid Foundation Deposit Account
Write and implement our Equality, Diversity & Inclusion Statement
Continue with recruitment of charity team in line with revised organisation chart, to future proof and grow the charity
Invest in database and look at integration with different platforms and websites

Research

Fund new research projects in December 2022
Meet with researchers to review research strategy and establish what have we achieved so far and where are we going
Implement plan for expenditure of gene PHD fund, in line with legator's wishes
Review grant funding process

Services to patients and to The Nightingale Centre

Refurbish the shop and welcome area
Once the above is complete, review branding and visibility of the charity in the reception area of The Nightingale Centre
Continue to lead on the capital campaign to build the National Breast Imaging Academy (NBIA)

Health awareness and education

Work with Patron, Margo Cornish on her 2022 campaign to raise awareness of breast cancer across Greater Manchester
Revisit health inequalities work including Asian Women's Health Awareness advert and aim to establish a sub-group specifically focused on health inequalities
Continue to develop and to promote our Health Hour Talks, approaching schools and companies
Implement new website using more modern version of WordPress

Income generation

Working with MFT Charity, achieve a fundraising target of £3.5 million to build the NBIA
Balance the above with raising funds for new research projects, health promotion activity and for the general, core need of the charity
Grow income from companies and secure new corporate partnerships and/or Charity of the Year opportunities
Implement a long-term monthly donor strategy and increase the number of regular donors – unable to do in 2021-2022
Develop Major Donor Strategy
Organise two face-to-face supporter stewardship events: • Thank You Evening • Research Update Evening

Financial review

Despite lockdown restrictions still being in place for the majority of the first six months, the financial year was considerably more successful than forecast.

- Total income is £1,130,017, compared with £672,068 in the previous year.
- We received two significant restricted donations: -
  - A legacy of £487,500 which will fund research into gene PHDs and will have a long-lasting impact to our research.
  - A formal pledge towards the National Breast Imaging Academy of £350,000 from Sir Jules Thorn Charitable Trust – which will be recognised in the accounts once the full target for the project is achieved.

We have fully funded almost all of our active research projects and our priorities have been to raise funds for the National Breast Imaging Academy (NBIA) and our health promotion work.

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

50% of our income (excluding formal pledges) in 2022-2023 was through legacies. As well as the legacy of £487,500, which is restricted to gene PHDs, we received several others including one to the sum of £50,000, the majority of which is restricted to one of our research projects. In comparison we received £0 in legacies in 2021-2022.

Despite the pandemic and the continued challenges we face, the figures to 31 March 2022 show how well the fundraising team adapted. We have ended the year in a strong position and have been able to:

- Re-open our funding round, with a pot of £200,000
- Plan with the relevant scientists the most suitable projects to utilise the funds for gene PHDs
- Designate £40,000 to invest in the infrastructure of the charity – database and refurbishment

Whilst the Board of Trustees is still cautious about the external environment, we believe it is the right time to invest in the charity team now, in order to sustain our growth.

- £470,850 was raised from trusts and foundations through donations and formal pledges (which will be accounted for once the £3.57 million required to build the NBIA has been reached), a 338% increase to 2021.
- A return to physical, face-to-face sport events resulted in a 34% increase in income from sport challenges compared with the previous year.
- Our community and corporate fundraising combined increased by 95% compared with 2021.
- Pro bono expertise totalled £19,000, of which £16,200 was provided by our new digital agency, This is Digital who donated their expertise from January 2022 onwards.

We offer our heartfelt thanks to our supporters across the UK who, despite everything, continued to fundraise and support the charity.

Our Expenditure for 2021/22:

Consistent with other years, our charitable activities constitute the vast majority of expenditure, with other costs kept at a minimum. Additional costs were incurred to generate the donations and pledges achieved for the National Breast Imaging Academy. During the year under review, Prevent Breast Cancer spent over £369,069 on charitable activities.

There is £712,820 held as restricted income and carried forward to 2022-2023 for future charitable expenditure.

The key components of our charitable activities are research, communicating health messages about breast cancer, patient care and services to The Nightingale Centre.

The below charts outline the breakdown of our Charitable Activity for the year 2021/22 and future charitable expenditure held as restricted reserves.

How we spend our funds

Charitable Activities	£369,039
Cost of Raising Funds	£134,535
Merchandise Costs	£8,751
Investment Management Fee	£5,358
Total Expenditure	£517,683

Future Charitable Expenditure – Restricted Reserves

National Breast Imaging Academy Capital Build	£198,496
Gene research PHDs	£487,500
Asian Women's Health Awareness	£26,824
Total Restricted Reserves	£712,820

Reserves Policy

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

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

As of 31 March 2022 the charity holds reserves of £1,459,093, of which £712,820 are restricted funds. 28% of the restricted reserves are for the National Breast Imaging Academy and 68% of restricted reserves are from a major legacy, which will fund genetic research.

Designated funds amount to £393,050, which have been allocated to the National Breast Imaging Academy (£150,000), to fund new research in 2022-2023 (£200,000) and to invest in the database and refurbishment of the charity offices and shop (£40,000).

The Trustees aim to keep in reserve six to nine months of core costs to guard against a worst-case scenario where the charity receives no income from any of its sources. These costs cover our office staff, support costs, critical fundraising activity and governance. They total £298,576 for six months.

Free reserves are £351,950 (in 2021 these were £420,781) at the year-end so, based on this policy, the charity holds in reserve over seven months of core costs.

Fundraising Costs Policy

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

In summary, we raised a total of £1,130,017 from donations and legacies, fundraising events, trading activities, funding from trusts, foundations and investments. We spent £369,039 on our core charitable activities and research grants, with a further £712,820 held in restricted reserves for future charitable expenditure.

Fundraising Approach

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

Investment Policy

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

The Trustees have appointed Brewin Dolphin, an experienced firm of investment advisers to manage our investments on a discretionary basis. The investment portfolios are managed in accordance with our Investment Policy.

Structure, governance and management

Governing Documents

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

Appointment of Trustees and Induction

New Trustees are nominated by Trustee Board members, interviewed by a panel of Trustees for that purpose and appointed where they have the necessary skills to contribute to the charity's management and development.

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

Organisation

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

Related Party Transactions

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine (Trustee) is a director. The estimated value of such services is £2,800 (2021: £2,664) and therefore an equivalent amount has been included within gifts in kind.

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

Pay Policy for Senior Staff

The Board of Trustees and the senior management team comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity. All Trustees donate their time and do not receive remuneration. Details of related party transactions are disclosed in note 20 of the accounts.

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

Risk Management

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

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

Risk policy objectives:

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

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

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

In 2021-2022, the Trustees assessed the major risks to which the charity is exposed, in particular those related to the operations and finances of the charity and were satisfied that systems are in place to manage exposure to the major risks.

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

Reference and administrative details

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

L Barr - Chairman
P S Glass
D Harris
T Hopla (appointed 1 October 2022)
J Humphris (appointed 20 November 2022)
K James (appointed 14 February 2022)
C Lee-Jones
C J Levine - Treasurer
J Lovell (resigned 6 November 2022)
E O'Neal (appointed 14 February 2022)
S Saleh
Dr M Wilson

Key management personnel

N Barraclough	Executive Director
L Parker Cairns	Charity Manager (resigned 25 March 2022)
E Mellor	Head of Communication and Campaigns
J Ruth	Head of Income Generation (appointed on 16th May 2022)
J Coleman-Reed	Head of Operations and Database (appointed on 18th July 2022)
J M Glass	Secretary
Company registered number	04831397
Charity registered number	1109839
Registered office	Prevent Breast Cancer Research Unit The Nightingale Centre Wythenshawe Hospital Southmoor Road Manchester M23 9LT
Auditors	Alliotts LLP Chartered Accountants and Advisors Friary Court 13-21 High Street Guildford Surrey GU1 3DL
Bankers	Royal Bank of Scotland Plc. 38 Mosley Street Manchester M2 3AZ
Solicitors	Gunnercooke LLP 53 King Street Manchester M2 4LQ

Statement of trustees' responsibilities

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

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

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

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

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

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

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L Barr - Chairman

Date: 16/12/2022

Independent Auditor's report

Opinion

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

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 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.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

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

We have nothing to report in this regard.

Matters on which we are required to report by exception

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

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

Responsibilities of trustees

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

Auditor's responsibilities for the audit of the financial statements

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

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

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

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, was as follows:

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

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

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

Audit response to risks identified

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

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

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

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

There are inherent limitations in our audit procedures described above. The more removed that laws and regulations are from financial transactions, the less likely it is that we would become aware of non-compliance.

Auditing standards also limit the audit procedures required to identify non-compliance with laws and regulations to enquiry of the Trustees and other management and the inspection of regulatory and legal correspondence, if any.

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities for the audit of the financial statements is located on the Financial

Reporting Council's website at: http://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

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

DocuSigned by:
Stephen Meredith
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Date: 12/16/2022

Statutory Auditor
Alliotts LLP
Chartered Accountants
Friary Court
13-21 High Street
Guildford
Surrey
GU1 3DL

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

Statement of financial activities including income and expenditure account for year ended 31 March 2022

	Notes	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £
Income from:							
Donations and legacies	3	451,958	555,921	1,007,879	479,293	109,988	589,281
Charitable activities	5	41,634	-	41,634	25,019	-	25,019
Other trading activities	6	72,938	-	72,938	50,959	-	50,959
Income from investments	4	7,566	-	7,566	6,809	-	6,809
Total income		574,096	555,921	1,130,017	562,080	109,988	672,068
Expenditure on:							
Expenditure on raising funds	7	148,644	-	148,644	90,151	-	90,151
Charitable activities	8	324,897	44,142	369,039	317,205	31,620	348,825
Total expenditure		473,541	44,142	517,683	407,356	31,620	438,976
Net gains/(losses) on investments	13	5,306	-	5,306	108,555	-	108,555
Net incoming resources before transfers		105,861	511,779	617,640	263,279	78,368	341,647
Gross transfers between funds		57,433	(57,433)	-	11,885	(11,885)	-
Net movement in funds		163,294	454,346	617,640	275,164	66,483	341,647
Fund balances at 1 April 2021		582,979	258,474	841,453	307,815	191,991	499,806
Fund balances at 31 March 2022		746,273	712,820	1,459,093	582,979	258,474	841,453

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

All income and expenditure derive from continuing activities.

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

Balance sheet as at 31 March 2022

	Notes	£	2022 £	£	2021 £
Fixed assets					
Tangible assets	**14**		1,272		252
Investments	**16**		1		1
			1,273		253
Current assets					
Stocks	**15**	14,848		11,146	
Debtors	**17**	30,735		143,805	
Investments	**18**	543,384		535,913	
Cash at bank and in hand		987,541		413,176	
		1,576,508		1,104,040	
Creditors: amounts falling due within one year	**19**	(118,688)		(251,590)	
Net current assets			1,457,820		852,450
Total assets less current liabilities			1,459,093		852,703
Creditors: amounts falling due after more than one year	**20**		–		(11,250)
Net assets			1,459,093		841,453
Income funds					
Restricted funds	**22**		712,820		258,474
Unrestricted funds					
Designated funds	**23**	393,050		162,198	
General unrestricted funds		353,223		420,781	
			746,273		582,979
			1,459,093		841,453

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 March 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:

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Date: 16/12/2022

L Barr - Chair
Trustee

Company Registration No. 04831397

Statement of cash flows for the year ended 31 March 2022

	Notes	£	2022 £	£	2021 £
Cash flows from operating activities					
Cash generated from operations	**27**		575,412		70,314
Investing activities					
Purchase of tangible fixed assets		(1,104)		–	
Proceeds on disposal of investments		(2,151)		80,000	
Investment income received		2,208		118	
Net cash (used in)/generated from investing activities			(1,047)		80,118
Net cash used in financing activities			–		–
Net increase in cash and cash equivalents			574,365		150,432
Cash and cash equivalents at beginning of year			413,176		262,744
Cash and cash equivalents at end of year			987,541		413,176

Notes to the financial statements

1 Accounting policies

Charity information

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

1.1 Accounting convention

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

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

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

1.2 Going concern

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

1.3 Charitable funds

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

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

1.4 Income

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

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

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

1.5 Expenditure

All expenditure is accounted for on an accruals basis and has been included under expense categories that aggregate all costs for allocation to activities. Where costs cannot be directly attributed to particular activities they have been allocated on a basis consistent with the use of the resources.

Fundraising costs are those incurred in generating funds and do not include the costs of disseminating information in support of the charitable activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include project management carried out in house.

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

Grants

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

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

1.6 Tangible fixed assets

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

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

Computers 20% straight line

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

1.7 Fixed asset investments

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

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

1.8 Impairment of fixed assets

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

1.9 Stocks

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

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

1.10 Cash and cash equivalents

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

1.11 Retirement benefits

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

2 Critical accounting estimates and judgements

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

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

Critical judgements

Current asset investments

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

Premises costs

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

3 Donations and legacies

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £
Donations and gifts	392,064	26,261	418,325	414,006	109,988	523,994
Legacies receivable	31,114	529,660	560,774	-	-	-
Government grants	9,780	-	9,780	48,223	-	48,223
Other	19,000	-	19,000	17,064	-	17,064
	451,958	555,921	1,007,879	479,293	109,988	589,281

Funds of £450,000 formally pledged towards the building cost of the National Breast Imaging Academy have not been recognised as income and therefore are not included in restricted funds to 31st March 2022 as they are conditional on the target of £3.57 million being reached to finance the project. To date, £2.11 million has been pledged or donated towards the project and the charity is confident that the remaining funds required will be raised within the next 12 months. Costs incurred applying for the pledged donations have been accounted for in this financial year.

4 Income from investments

	Unrestricted funds 2022 £	Unrestricted funds 2021 £
Interest from investments	7,523	6,691
Interest receivable	43	118
	7,566	6,809

5 Charitable activities

Patient Care and Services to the Centre	2022 £	2021 £
Coffee Bar Income	40,270	24,644
Donations to the Coffee Bar	1,364	375
	41,634	25,019

6 Other trading activities

	Unrestricted funds £	Restricted funds £	Total 2022 £	Total 2021 £
Merchandise sales	42,394	-	42,394	39,227
Fundraising events	30,544	-	30,544	11,732
Other trading activities	72,938	-	72,938	
For the year ended 31 March 2021	50,959	-		50,959

7 Expenditure on raising funds

	2022 £	2021 £
Fundraising and publicity		
Events, income generation and promotion costs	27,936	9,299
Fundraising agents	49,950	-
Staff costs	45,585	63,338
Support costs	11,064	7,526
	134,535	80,163
Trading costs		
Merchandise costs	8,751	5,141
Investment management	5,358	4,847
	148,644	90,151

8 Charitable activities

	Patient care /Nightingale Centre £	Health promotion £	Publicising research and results £	Workshops and education £	Research grants £	Total 2022 £	Total 2021 £
Staff costs	92,756	84,318	11,225	-	-	188,299	201,103
Charitable expenditure	40,294	81,149	2,841	-	-	124,284	109,683
	133,050	165,467	14,066	-	-	312,583	310,786
Grant funding of activities (see note 9)	-	-	-	-	12,198	12,198	7,936
Share of support costs (see note 11)	14,590	18,144	1,542	-	1,338	35,614	21,695
Share of governance costs (see note 11)	3,541	4,404	374	-	325	8,644	8,408
	151,181	188,015	15,982	-	13,861	369,039	348,825
Analysis by fund							
Unrestricted funds	139,600	155,454	15,982	-	13,861	324,897	
Restricted funds	11,581	32,561	-	-	-	44,142	
	151,181	188,015	15,982	-	13,861	369,039	
For the year ended 31 March 2021							
Unrestricted funds	120,795	158,719	26,478	2,477	8,736		317,205
Restricted funds	31,620	-	-	-	-		31,620
	152,415	158,719	26,478	2,477	8,736		348,825

9 Grants payable

	2022 £	2021 £
Grants to institutions:		
Early diagnosis and screening	-	3,000
Preventative drugs	-	4,936
Research salary	12,198	-
	12,198	7,936

10 Trustees

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

11 Support costs

	Support costs £	Governance costs £	2022 £	2021 £
Staff expenses	2,369	-	2,369	857
Staff training	3,422	-	3,422	819
Printing and stationery	3,215	-	3,215	3,103
IT/website costs	7,769	-	7,769	6,889
Insurance	3,012	-	3,012	1,767
Bank and Streamline charges	10,399	-	10,399	5,452
Legal and professional charges	10,580	146	10,726	4,748
Other office costs	866	-	866	681
Payroll	2,800	-	2,800	2,664
Depreciation	84	-	84	315
Audit fees	-	8,826	8,826	8,500
Accountancy	-	1,834	1,834	1,834
	44,516	10,806	55,322	37,629
Analysed between				
Fundraising	8,902	2,162	11,064	7,526
Charitable activities	35,614	8,644	44,258	30,103
	44,516	10,806	55,322	37,629

12 Employees

Number of employees

The average monthly number of employees during the year was:	2022 Number	2021 Number
Administration	2	2
Operations	4	3
Charitable Activity	3	5
Generating Funds	3	2
	12	12

The full time equivalent for employees during the year was:	2022 Number	2021 Number
Administration	1	2
Operations	2	2
Charitable Activity	4	4
Generating Funds	2	3
	9	11

Employment costs	2022 £	2021 £
Wages and salaries	215,812	243,282
Social security costs	13,635	16,150
Other pension costs	4,437	5,009
	233,884	264,441

There were no employees whose annual remuneration was £60,000 or more.

13 Net gains/(losses) on investments	Unrestricted funds 2022 £	Unrestricted funds 2021 £
Revaluation of investments	(14)	92,257
Gain/(loss) on sale of investments	5,320	16,298
	5,306	108,555

14 Tangible fixed assets	Computers £
Cost	
At 1 April 2021	1,575
Additions	1,104
At 31 March 2022	2,679
Depreciation and impairment	
At 1 April 2021	1,323
Depreciation charged in the year	84
At 31 March 2022	1,407
Carrying amount	
At 31 March 2022	1,272
At 31 March 2021	252

15 Stocks	2022 £	2021 £
Finished goods and goods for resale	14,848	11,146

16 Fixed asset investments	Other investments £
Cost or valuation	
At 1 April 2021	1
At 31 March 2022	1
Carrying amount	
At 31 March 2022	1
At 31 March 2021	1

Other investments comprise:	Notes	2022 £	2021 £
Investments in subsidiaries	26	1	1

Fixed asset investments revalued

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

17 Debtors	2022 £	2021 £
Amounts falling due within one year:		
Trade debtors	7,748	47
Other debtors	20,000	143,758
Prepayments and accrued income	2,987	-
	30,735	143,805

18 Current asset investments

	2022 £	2021 £
Listed investments	543,384	535,913

Included in current asset investments is £17,646 (2021: £17,217) of cash held within the portfolio.

19 Creditors: amounts falling due within one year

	2022 £	2021 £
Other taxation and social security	4,333	2,410
Trade creditors	54,149	93,746
Grants payable	22,119	118,413
Other creditors	2,841	2,109
Accruals and deferred income	35,246	34,912
	118,688	251,590

20 Creditors: amounts falling due after more than one year

	2022 £	2021 £
Grants payable	-	11,250

21 Analysis of net assets between funds

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total 2022 £	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £
Fund balances at 31 March 2022 are represented by:						
Tangible assets	1,272	-	1,272	252	-	252
Investments	1	-	1	1	-	1
Current assets/(liabilities)	745,000	712,820	1,457,820	593,976	258,474	852,450
Long term liabilities	-	-	-	(11,250)	-	(11,250)
	746,273	712,820	1,459,093	582,979	258,474	841,453

22 Restricted funds

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

	Movement in funds				Movement in funds			
	Balance at 1 April 2020 £	Incoming resources £	Resources expended £	Balance at 1 April 2021 £	Incoming resources £	Resources expended £	Transfers £	Balance at 31 March 2022 £
AWHA Projects	16,786	-	-	16,786	-	-	-	16,786
Breast cancer videos	-	-	-	-	2,200	2,162	-	38
Research salary	-	-	-	-	1,200	-	(1,200)	-
Clotting and Breast Density	-	-	-	-	44,160	-	(44,160)	-
BRCA2 and PALB2	-	-	-	-	11,853	-	(11,853)	-
Forget-me-not2	-	-	-	-	220	-	(220)	-
Gene PHDs	-	-	-	-	487,500	-	-	487,500
Health Inequalities	-	-	-	-	10,000	-	-	10,000
Health Promotion	-	-	-	-	30,399	30,399	-	-
Building the NBIA	175,205	61,562	-	236,767	(38,271)	-	-	198,496
NBIA Fundraising Campaign	-	36,541	(31,620)	4,921	6,660	11,581	-	-
	191,991	103,878	(31,620)	258,474	555,921	44,142	(57,433)	712,820

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

22 Restricted funds

AWHA projects - The Asian Women's Health Awareness Campaign will research how to better promote the importance of breast screening to ethnic minority communities from South Asia. This work was paused due to the pandemic but will be continued in 2022-2023.

Breast cancer awareness videos - to develop a library of video content covering a range of breast cancer related topics.

Research Salary - funding towards one weekly session of Professor Tony Howell's clinical and research time.

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

BRCA2 and PALB2 - Gene research studying a new biological mechanism called "epigenetic silencing" whereby gene abnormalities that greatly increase a woman's risk of getting breast cancer may be left undetectable by standard gene testing.

Forget-me-not 2 - An early detection and screening research project, which will study the progression of breast cancer in patients with DCIS (ductal carcinoma in-situ), in order to better understand over-diagnosis.

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

Health Inequalities - Funds to enable the charity to continue its outreach work in communities around Greater Manchester where uptake of breast screening is low.

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

Building a National Breast Imaging Academy (NBIA) - A capital project to raise funds to build a National Breast Imaging Academy (NBIA), which will be attached to The Nightingale Centre and Prevent Breast Cancer Research Unit in Manchester. Formal pledges achieved totalling £450,000 are not included in restricted funds because the pledges will not be included in income until the NBIA building cost has been fully funded. More information about this project and funding can be found within the Trustees Report.

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

23 Designated funds

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

	Balance at 1 April 2020 £	Expenditure £	Transfers £	Balance at 1 April 2021 £	Expenditure £	Transfers £	Balance at 31 March 2022 £
Research salary	16,000	(16,000)	12,198	12,198	(9,148)	-	3,050
NBIA	-	-	150,000	150,000	-	-	150,000
Database & refurbishments	-	-	-	-	-	40,000	40,000
Grants	-	-	-	-	-	200,000	200,000
	16,000	(16,000)	162,198	162,198	(9,148)	240,000	393,050

The designations are £150,000 to the funding of the NBIA project, a designation of £3,050 towards the funding of a research salary, £200,000 for research grant awards in the next twelve months and £40,000 towards improvements to the centre and database processes.

24 Operating lease commitments

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

	2022 £	2021 £
Within one year	2,393	2,393
Between two and five years	1,196	3,589
	3,589	5,982

25 Related party transactions

Remuneration of key management personnel The remuneration of key management personnel is as follows.	2022 £	2021 £
Aggregate compensation	103,979	121,520

During the year fees of £716 (2021: £146) were paid to JMG Legal Ltd. This firm is considered a related party as Joe Glass (a Director of JMG Legal) is married to Pam Glass and is also the Company Secretary. No creditor remained outstanding at the year end (2021: Nil).

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine is a director. The estimated value of such services is £2,800 (2021: £2,664) and therefore an equivalent amount has been included within gifts in kind.

26 Subsidiaries

Details of the charity's subsidiaries at 31 March 2022 are as follows:

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

27 Cash generated from operations

	2022 £	2021 £
Surplus for the year	617,626	341,647
Adjustments for:		
Investment income recognised in statement of financial activities	(7,566)	(6,809)
Gain on disposal of investments	(5,320)	(16,298)
Fair value gains and losses on investments	14	(92,257)
Investment charges	5,358	4,847
Depreciation and impairment of tangible fixed assets	84	315
Movements in working capital:		
(Increase)/decrease in stocks	(3,702)	(1,939)
Decrease/(increase) in debtors	113,070	65,273
(Decrease)/increase in creditors	(144,152)	(224,465)
Cash generated from operations	575,412	70,314

28 Analysis of changes in net funds

The charity had no debt during the year.

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Prevent Breast Cancer Limited Registered in England No. 4831397 Registered Charity No. 1109839

Registered with FUNDRAISING REGULATOR

Prevent Breast Cancer

England & Wales - Charity number 1109839

Accounts

prevent breast cancer

A year like no other

Annual Report and Financial Statements

For the year ended 31st March 2021





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A message from our Chair

Well, what a strange year this has been for us all! Words that we have hardly ever used in the past – lockdown, furlough, pandemic, track and trace, and of course, unprecedented – have become part of our everyday vocabulary. For Prevent Breast Cancer, unprecedented is certainly an appropriate word to describe the last year!



In March 2020, as we collectively entered the first lockdown and headed into a new and unknown world, the charity was forced to cancel all of the events planned for the year. This had a catastrophic effect on our income, which plummeted almost overnight. Because so much of our fundraising depends on activities in which you, our supporters, take part in and champion, our opportunities to generate income were severely diminished.

As a result, the most immediate and pressing impact the lockdown had on Prevent Breast Cancer was to create the need to cut costs wherever possible, in order to protect the little income we had remaining.

Inevitably, we had to put some of our team into the furlough scheme and put plans for new recruitment on hold. However, it was important for us to keep a core team functioning behind the scenes and to keep the office open in the Centre. Therefore, the model of furlough that we chose was a flexible and rolling scheme.

This allowed our team periods of time off, followed by periods of time back at work, so that essential services could continue, relationships with our supporters could be maintained and the charity's public profile was not lost. The other big cost saving measure that we had to adopt, in common with other cancer charities such as Cancer Research UK and Breast Cancer Now, was to immediately stop the pipeline of funding for new research grant applications.

But behind the scenes, there was good news.

The Prevent Breast Cancer team became amazingly creative with new ideas and fundraising campaigns so that, to our surprise, our level of income each month was much higher than the pessimistic predictions we initially forecasted. As a consequence, we were able to continue funding research grants which were already active, protecting scientific developments already in progress.

In addition, we switched our emphasis to developing health awareness campaigns, responding to clinical problems such as the backlog in breast screening, and the reluctance of women around the country to come forward if they found a lump or other symptom due to the impact of the pandemic on the NHS. One particularly successful initiative was the development of our Update Hour series, in which experts in various fields were interviewed on relevant topics – broadcasting directly on our YouTube channel and our Facebook page.

The lockdown also came at a bad time for a major new initiative which we are supporting, namely the creation of a national training academy for breast cancer imaging specialists (see page 14 for more on this project). The National Breast Imaging Academy (NBIA) is designed to be a physical building located alongside the existing Nightingale Centre and Prevent Breast Cancer Research Unit.

The focus of the NBIA is the training of mammography radiographers and breast imaging specialist radiologists, to combat a growing national shortage of practitioners in this specialty. Prior to the pandemic, the NBIA had been identified as a top priority for the charity and we are delighted to have designated £150,000 of our free reserves towards this capital project. This, too, has been a major achievement for us, as we were initially fearful that we would need to use the entirety of these reserves to keep the charity running through lockdown. However, with prudent housekeeping and cost-cutting, coupled with the new fundraising initiatives from the team, we have managed to keep most of our reserves intact, allowing us to make this commitment.

As we look ahead to the next year, much uncertainty remains and it appears unlikely that we will return to our previous income level in the next year.

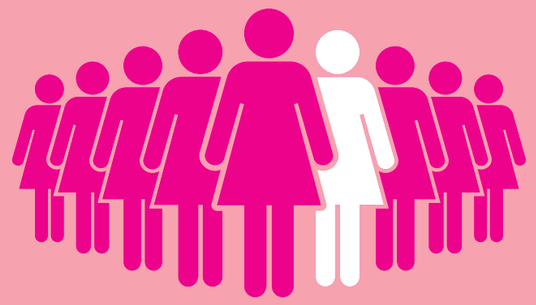
We therefore see the year ahead as a time of consolidation and of investment in the infrastructure of our team so that we can rebuild and come back strong in 2022. It also looks like we will be able to open up the pipeline of new research projects within the next few months, inviting applications for the next round of exciting research into the early diagnosis and prevention of breast cancer: the very reason we exist. That research is already bearing fruit and propelling us towards the day when breast cancer becomes a preventable disease. May that day come soon.



Lester Barr MBE
Chair of Prevent Breast Cancer

1 IN 9

women and **1 in 1,000** men in the UK will develop breast cancer in their lifetime



Breast cancer is the biggest cause of death in women aged between **35 and 49**

3%

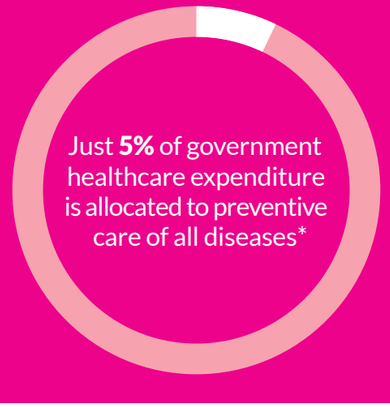
In the last 10 years, female incidence rates have increased by **3%**

24%

In the UK, breast cancer rates in women have increased by **24%** in the last 30 years

1 IN 10

breast cancers are diagnosed **late**



About us

Our mission: Predict, Prevent, Protect

Prevent Breast Cancer's mission is to make breast cancer a preventable disease for future generations by funding ground-breaking research into the prediction and prevention of the disease. Breast cancer is the most common cancer in women, with approximately 1 in 9 women diagnosed with it in their lifetime. This means that every year in the UK, over 55,900 individuals are diagnosed – that equals 150 people a day. Each year we lose 11,547 people to this disease. **If we could prevent breast cancer tomorrow, by 2031 over 550,000 women would never receive a devastating breast cancer diagnosis.**

WE PREDICT
WE PREVENT
WE PROTECT

Prevent Breast Cancer is located in The Nightingale Centre and Prevent Breast Cancer Research Unit, the construction of which the charity raised £2million for and which opened in 2007. The Centre houses the services of the Greater Manchester NHS Breast Screening Programme and family history clinic. It also acts as a base for several of our researchers, whose innovative clinical studies aim to more accurately predict those at risk of breast cancer, so that preventative interventions can be offered to women. Locating our home within the Centre ensures that there is a diverse cohort of breast cancer patients available to participate in our research.

Public benefit

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

Grant making policy

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

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

We have a rigorous system in place to review grant applications. Each application is sent to three experts operating independently to the research, who complete a review form and give a final summary score before any application is considered by the Board of Trustees. A project must demonstrate clear, achievable aims and the reviewer must explain the reasoning for any recommendations for funding. For requests of over £30,000, two of the three reviewers must be external to the organisation. Applications must clearly address our core areas of prediction, prevention or early detection in order to be considered.

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

Funding requests for consumables or equipment under £10,000 which contribute to an existing research study and have already been peer reviewed by the main funder are not sent for further expert review. A decision about whether to fund these requests is made solely by the Board of Trustees. Prevent Breast Cancer does not fund experiments on animals.

http://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/breast-cancer

https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthcaresystem/bulletins/ukhealthaccounts/2018

Charitable activity

Over the past year, we have continued to raise funds to support our active research studies and generate income for the building of the National Breast Imaging Academy (NBIA).

Alongside this, we have continued to operate our coffee bar at the Nightingale Centre, as well as developing our ongoing health promotion activity. This activity seeks to raise awareness of breast cancer signs, symptoms and risk factors and the importance of breast screening among women, aiming to reach as wide a cross section of society as possible.

For every £1 spent this year, **79p** went on charitable activity

In total we have raised over **£236,000** for the NBIA, of which **£61,562** was raised in 2020/21

Over **80** Health Hour Talks delivered to companies, schools and community groups since January 2021

Health Hour



£25,019 raised by our coffee bar in 2020/21

We have secured **515** pieces of media coverage for and about the charity, including in the Daily Telegraph, Daily Mail and the BBC



build to beat breast cancer

We have designated **£150,000** from our free reserves to the NBIA





There has been a **21%** increase in new users to our website

Our most visited webpages are Signs & Symptoms and About Breast Cancer

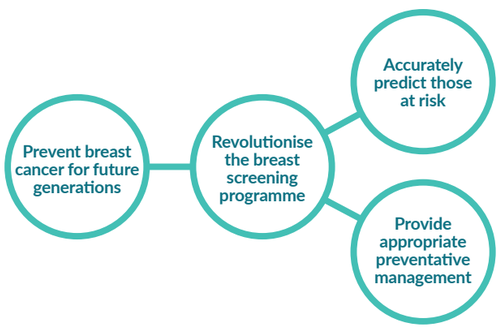
Our research

Since 2010 we have spent **£3.75** million on ground-breaking research. We have awarded over **£600,000** to our risk prediction studies.

Prevent Breast Cancer's world-leading research is targeted and specialist, focused on four key areas: Gene research; preventative drugs; diet and lifestyle; and early detection and screening.

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

A key strategic objective for Prevent Breast Cancer is to introduce a more sophisticated breast screening process to the UK by 2025. Our research strategy is summarised here:



Gene research

Identifying DNA fragments that increase risk

Our flagship gene research project began in 2011 and focuses on identifying SNPs, the fragments of DNA which affect breast cancer risk. In total over 300 of these tiny but significant gene fragments have been discovered by our research team, who have developed a simple saliva test to detect them.

Following a pause on this research until July 2020, due to the pandemic, we have been able to recruit over 70 women to take part and create a sub-study that deals with patients by post in order to keep those involved as safe as possible.

As well as this we have widened the eligibility for the SNPs study to all sites, including East Cheshire and East Lancashire and have now brought in the ability to provide a SNP sample in our PROCAS study and have a more in-depth risk calculation to all recruiting sites.

Our pioneering PROCAS research will introduce a personalised breast cancer risk estimations to the NHS Breast Cancer Screening Programme. The successful conclusion of the SNPS 3 project will see a gene fragment test contributing to the risk calculation for each woman, helping identify those at a higher risk and meaning more cases of the disease can be prevented.

Improving the accuracy of genetic testing

Prevent Breast Cancer's scientific research team was responsible for discovering a previously undetected fault in the BRCA1 gene which increases the risk of breast cancer. They discovered a new mechanism affecting the gene called 'epigenetic silencing', which is not detected by current gene tests. In fact, at present only around 20% of those affected by familial breast cancer find that there is a direct mutation causing it.

Our team have been researching whether epigenetic silencing is also affecting the genes BRCA2 and PALB2. They are using genome testing of over 400 gene samples from people who have symptoms of inherited breast cancer but for whom testing found no genetic cause.

This research could lead to more accurate genetic testing and mean that those affected will be given access to earlier and more frequent cancer screenings and more appropriate treatments if they do develop breast cancer. It could reduce the number of women who are currently slipping through the net because their family history is not detected.

In 2020/21 our researchers have made excellent progress, including the fact that manuscripts have been accepted and submitted for publication on the clinical benefit of gene panel testing in families with breast cancer.

Additionally, good developments have been made towards the data analysis and publication of work on breast cancer prediction using polygenic risk scores. Due to the COVID pandemic, lab work was limited. However, this has increased since the easing of restrictions, and there have been few delays to the progress of the study overall.

Early detection and screening

Thousands benefit from smarter screening

Prevent Breast Cancer's PROCAS study will revolutionise NHS breast screening, by predicting a woman's individual risk of breast screening at the time of her mammogram.

Our PROCAS 2 study recruited 2,500 women over the last two years which, although a reduction compared to intended numbers, is still a great number to reach and provide these women with an individual risk score for developing breast cancer. Alongside SNP analysis from 259 patients, we have also been able to look at the SNPs of many of the women who took part in PROCAS 1.

This has given us an even larger control group to work from going forward. Being able to adapt our research during the pandemic and find scope outside of face to-face appointments has meant we have continued to build data that supports the need for tailored screening.

Each risk core was calculated by analysing factors such as breast density, gene fragments, family history and lifestyle. Once they know their score, the women participating in our pilot study have been able to make pro-active choices about their health to reduce the chances of the disease developing. Those found to be at higher risk are provided with advice and support and where appropriate, offered options including more frequent mammograms, preventative drugs and surgery.

PROCAS launched in 2009 and is the largest recruiting research study in Britain. This more sophisticated approach to screening will transform the process when it is rolled out across the UK by 2024. It will move us significantly closer to our vision of preventing breast cancer for future generations.

Establishing why higher breast density causes cancer

After age, high breast density is the most significant risk factor for breast cancer: it can mean that a woman is six times more likely to develop the disease. Dense breasts have relatively more glandular and fibrous tissue than fatty breasts and show up as white on mammograms.

Our scientists have been comparing high and low mammographic density breast tissue to identify differences and provide new insights into the cause of high breast density. We hope to identify genetic factors that cause it and the corresponding increased risk of cancer.

The team have been identifying which cell signalling pathways lead to changes in breast tissue. The data can be used to better help women understand their risk, more effectively target screening and identify future therapies which could stop or reverse the structural changes which increase the likelihood of cancer developing.

Reducing unnecessary surgery

It is not currently known why some early-stage cancers develop into larger, more aggressive cancer and others remain non-invasive. It is thought that this lack of understanding means that in some cases, patients are offered surgery when their cancer would never have progressed or caused them harm.

Our researchers have been studying ductal carcinoma-in-situ (DCIS), a form of non-invasive breast cancer commonly detected at screening, to better understand what conditions lead DCIS to develop into higher grade cancers.

The team's findings will help doctors determine which women need surgical removal of the disease to prevent invasive cancer and which are at a low risk of this and whose health could be managed without further intervention.

Preventative drugs

Anti-clotting drugs to prevent breast cancer

Fibroblasts are types of cells that are critical in wound healing and are the most common cells in connective tissue. These cells also create the tissue which supports milk ducts in breasts. They are the cause of the whiteness on mammograms of women with high breast density, and also cause blood clotting.

Breast cancer resembles a non-healing wound, with increased clotting in the tissue surrounding cancer cells. Following on from our research that found there is a relationship between DCIS and blood clotting caused by fibroblasts, our team are examining whether the fibroblasts in high-density breast cells create a wound-like environment, which increases clotting and causes normal breasts to develop cancer and benign cases of DCIS to become invasive.

This cutting-edge project could have a phenomenal impact on breast cancer prevention methods. If fibroblasts are causing a wound-like, clotting environment, anti-clotting drugs may be recommended for women who present with high-density breast tissue at screening in order to reduce their lifetime risk of developing breast cancer. This could be life-changing for the 10% of women around the world who fall very high on the breast density scale, who are also around six times more likely to develop breast cancer.

In 2020/21 cells continue to be grown from patient samples obtained via the Manchester Cancer Research Centre Biobank by our team. Cell characterisation is on-going prior to experiments testing their role in initiating breast cancer.

The project's principal analyst returned to full-time work from furlough in April 2021 and has trained a new MB-PhD student in the experimental techniques required. The Prevent Breast Cancer-funded consumables budget has been converted into pay for the principal analyst, in part to help recover the research time lost due to Covid-19 induced laboratory shutdown.

Phases 1 and 2 of primary fibroblast characterisation have proceeded rapidly, with experimental output increasing along with the skills development of the MB-PhD student.

The principal analyst was invited to speak about this project at the Manchester Pathology 2021 virtual meeting of histopathologists, molecular pathologists, scientists and clinicians in July 2021. It was highlighted again in the discussion how mammography screening for breast cancer needs improving, especially for women with high density breasts. It is expected that this research will lead to better understanding of breast density and potential prevention options.

Targeting prolactin to prevent breast cancer

In 2013 the National Institute of Clinical Excellence adopted our recommendation that the drugs tamoxifen and raloxifen be used to help high risk women reduce the likelihood of developing the disease. Unfortunately, these drugs have difficult side effects, so our researchers are currently working to identify medication to prevent breast cancer that is more effective, well-tolerated and safe.

In 2019 they investigated the hormone prolactin with the aim of discovering whether targeting this could stop the disease before it starts. If this is the case, our research could lead to anti-prolactin drugs being used to reduce breast cancer risk. As this medication is currently used to treat the disease, it is known to be safe and without significant adverse side effects.

Results suggest that there are differences in hormone signalling in some women and our research team are now testing whether these mean that cancer is more likely to develop. Our scientists will determine whether inhibiting the key hormone pathways could lead to effective and safe new drugs.

Undertaking large scale testing of preventative drugs

In 2019 our researchers developed a complex replication of human breast tissue which would enable them to undertake large scale testing of drugs that could prevent breast cancer developing. During the twelve months that followed, testing of medication began, using this exciting technological advance.

Our project is a world-first and the model so closely resembles real breast tissue that it mimics mammographic density, one of the most important predictors of the disease. As the drugs being tested are repurposed, they are already known to be safe for human consumption. This means that our researchers will be able to identify promising potential drugs to take directly into clinical trials, speeding up the process and avoiding animal testing.

This means that important opportunities to prevent breast cancer are being missed. Our 'Family History Healthy Lifestyles' project will continue to investigate whether ongoing, tailored support to make positive lifestyle changes achieves a greater impact. If successful, this new approach could be rolled out to family history clinics across the UK, in many cases helping to stop breast cancer before it starts among high-risk women.

Around **30%** of breast cancer cases are thought to be caused by lifestyle factors such as weight and alcohol consumption...

As outlined, current preventative drugs, tamoxifen and raloxifene come with difficult side effects and are not suitable for all women. Our scientists have been working to identify well-tolerated drugs which will see increased take up among those at high risk of breast cancer, reducing the number of lives lost to the disease.

Risk factors

Finding the best methods to support lifestyle changes

In 2019, Prevent Breast Cancer recruited over 200 women to participate in our 'Family History Healthy Lifestyles' project. This research was led by our award-winning dietitian, Dr. Michelle Harvie and identified the most effective methods to support women at high risk of breast cancer in making changes to their lifestyle.

Around 30% of breast cancer cases are thought to be caused by lifestyle factors such as weight and alcohol consumption, which means that they are preventable. However, evidence suggests that women at high risk do not receive effective support to adopt a healthier way of life. Currently only general written advice is provided, which has been shown to have a minimal effect on behaviour.

Protecting life-saving screening with a new National Breast Imaging Academy (NBIA)

The incidence of breast cancer is rising in the UK. In the last 10 years, GP referrals to breast units have doubled and the number of women using the national screening programme has continued to increase. It won't stop there: as we seek to achieve earlier diagnoses of cancers, demand for screening is likely to grow further.

The pressures on the system

There are a number of factors combining to heap pressure on the NHS breast screening service.

1. **Impact of technology –** Technological advances have increased the complexity of imaging. MRI guided biopsy, tomosynthesis, contrast enhanced mammography and vacuum biopsy procedures all provide more accurate diagnosis as well as pre-operative planning assessment, thus ensuring the most appropriate treatments are delivered. However, these advances also place even more demand on the breast imaging workforce and machine time.

2. **Staff shortages –** The need for imaging is increasing but, at the same time, there are severe staff shortages amongst clinicians, radiographers and radiologists. Almost 15% of breast radiologist and radiographic posts are vacant nationally. 17% are vacant in the north west. In the UK, 38% of breast radiologists and 49% of breast clinicians are set to retire by 2025. Several breast centres across the country have closed because of a lack of radiologists, placing even greater pressures on the remaining units.



3. **Lack of appropriate training space –** Identifying appropriate training space for mammography and ultrasound rooms is becoming increasingly difficult. This is creating a perfect storm: an overstretched workforce with inadequate facilities in which to undertake the vital training needed for the service. The lack of appropriate space is also hampering the ability of many centres to participate in research studies.

4. **Coronavirus impact –** The Covid-19 pandemic has exacerbated these issues, with 1.5million fewer breast screening appointments than expected carried out since March 2020 and further reduced clinic capacity due to social distancing. A report by Breast Cancer Now estimates that there are approximately 12,000 people believed to be living with undiagnosed breast cancer in the UK.

Why we need change

If the demand for breast cancer services continues to grow as expected – and there is no additional investment to increase imaging and training facilities – it will not be possible to sustain services at existing levels, let alone expand them. Patients will be directly and negatively impacted, leading to delays in breast cancer diagnoses, in turn impacting treatment options and, ultimately, survival rates.

How the NBIA development can help

The NBIA capital development, for which we are raising funds, will provide much needed space for innovative clinical and academic training for apprentices, radiographers, radiologists and breast clinicians. Together with medical students and administrative staff, they can operate in a fully resourced teaching environment. The building will contain ultrasound, mammography, and research rooms.

Prior to the pandemic, plans had been drawn up for a two-storey building attached to the Nightingale Centre, fulfilling all the identified pre-pandemic needs for clinical training, education and research. £6 million in revenue funding for this has already been secured from Health Education England.

The NBIA is a collaborative, national, multidisciplinary initiative which encompasses a range of solutions to address the severe workforce issues faced in the delivery of breast imaging services across the country. It is hosted by Manchester University NHS Foundation Trust, working in collaboration with Public Health England, the Royal College of Radiologists, the Society and College of Radiographers, the Association of Breast Clinicians, the British Society of Breast Radiology, the Manchester Foundation Trust Charity, and Prevent Breast Cancer.

The NBIA will protect the future of breast screening across the UK, detecting cancers at an earlier stage and saving lives. It will ensure a strong and capable workforce is in place to carry out our goal of delivering smarter screening from 2025.

A phased approach

The evolving impact of the pandemic on NHS breast services forced the project team to review the plans for the NBIA capital development. The team aimed to put in place a more immediate solution that would address the most pressing needs, while allowing longer-term developments to address future demands.

Plans for a modular development will allow the team to progress the project immediately, while also allowing for further development in the future. Once the new building is operational, demands on the service can be continually reviewed to determine whether further capital development is necessary.

The initial phase, costing £3.2 million, will enable the NBIA team to deliver the training for which they have revenue funding, and provide two thirds of the planned additional imaging capacity.

The new building will be more creatively linked to the Nightingale Centre to allow the refurbishment of existing space for seminar and training rooms. It will be built ready for extension both out and up, so that we can more easily provide additional space as determined by future needs.

To date, Prevent Breast Cancer has generated over £236,000 in restricted donations towards the capital build and designated £150,000 from our free reserves.

Build to Beat Breast Cancer

In October 2021 Prevent Breast Cancer and Manchester Foundation Trust Charity teamed up to launch the "Build to Beat Breast Cancer" appeal to raise the funds required to make the National Breast Imaging Academy a reality.

Supporting patients and professionals at the Nightingale Centre

Our coffee bar and welcome desk are usually manned by our wonderful and valued team of volunteers. Again, the coronavirus pandemic forced us to change our approach! Because the majority of our volunteers are over 60, we asked them to remain at home in order to protect their safety.

Over 3,500 hot drinks sold to NHS staff and patients waiting for appointments (in the 12 months to 31st March 2021)

We know how valued the coffee bar is – as well as how important a fundraising source it is – and we therefore made the decision to keep our coffee bar open throughout the pandemic. This allowed us to offer patients and professionals at the Nightingale Centre the comfort of a hot drink and something to eat.

Our fundraising team stepped in to cover the coffee bar shifts from April until June 2020. Over the summer, several of our supporters who were furloughed from their jobs began to offer their support and cover shifts, allowing us to keep this important resource operational.

During this period, any excess produce with a short sell by date was donated to a local homeless shelter at the end of each week, as part of our own drive to support our local community.

Now that our volunteers are all vaccinated, many have returned to their role at the Centre and our Welcome Desk and shop have been able to re-open. We are delighted to have this focal point in the Nightingale Centre back in full swing!



Awareness of breast cancer signs, symptoms and risk factors and the importance of breast screening

In 2020, Breast Cancer Now published a report which estimated that there were 107,000 fewer GP referrals for breast services from March to July 2020*, when compared to the same period in 2019. Whilst we recognise that the majority of such referrals will not lead to a cancer diagnosis, it remains a very worrying statistic and represents a significant number of women who will have their diagnosis delayed.

A further report estimated that there are around 12,000 undiagnosed breast cancers across the UK, due to delays caused by the pandemic. Although many centres are working additional hours to reduce the backlog caused by the temporary closure of the screening service, it is predicted that it will take between 18 and 24 months to catch up.

Health inequalities have always been a key concern for Prevent Breast Cancer. Inequalities which existed prior to the pandemic have now been exacerbated. We need to take action and have started to implement some of our work, which is outlined below and in the highlights section. There is, however, far more to be done and addressing inequalities will be one of our priorities for the foreseeable future.

Our health awareness campaigns

Update Hours

We launched our Update Hours, a series of free events, which were promoted across social media and directly to our database. Each event was streamed live on our YouTube channel and Facebook page, and covered a range of different topics. To date content has included:

- The impact of the pandemic on breast cancer
- How we are working to prevent breast cancer now, and in the future
- Diet and lifestyle
- The menopause.

Hundreds of our supporters watched each event, with excellent feedback, and we intend to continue with this series.

Health Hour Talks

Prior to the pandemic, the fundraising team was delivering health information talks to companies and in schools. Whilst this activity initially stopped in 2020, we used the time to re-brand, update the content and take it virtual.

Some of the areas covered in this year's talks include:

- How to reduce your risk of developing the disease
- Signs and symptoms to look out for
- Causes of breast cancer
- How to check yourself
- Why we're focused on prevention
- Our latest research findings.

Our Health Hour talks were re-launched in September 2020 and continue to go from strength to strength. In February 2021, we partnered with Prostate Cancer UK to offer joint talks, which proved to be very popular. Since January 2021 we have delivered over 80 Health Hour Talks to companies, schools and community groups.

Breast Cancer Awareness Month

To mark Breast Cancer Awareness Month (October), our health awareness campaign saw us travelling across the city of Manchester for a two-week period to locations where screening uptake is lower than the national average.

Our BooBee Bus – a specially decorated double decker bus – helped to attract attention, and our Prevent Breast Cancer charity ambassadors provided women with information on checking their breasts, symptoms, the current screening process in light of the pandemic, and also encouraged women not to ignore their screening invitations.

This campaign was run in partnership with Answer Cancer, Stagecoach and Alexander Dennis.

https://breastcancernow.org/about-us/news-personal-stories/how-we-can-press-play-breast-cancer-services

Highlights from 2020/21

While the world came to a standstill, our supporters continued to amaze us with their dedication to our cause. From taking on various virtual challenges to setting up birthday fundraisers on Facebook, their efforts raised thousands of vitally important pounds. We also launched our Urgent Appeal and your generosity resulted in donations of over £30,000.

May

Seizing the opportunity to sell Prevent Breast Cancer merchandise online, we promoted a range of nightwear which had been donated by online retail brand, Figleaves. To date, these sales have generated just under £11,000.

July

Always keen to explore every opportunity, we partnered with our Patron, Margo Cornish, to hold a furniture sale. All items were donated from a boutique hotel and proceeds from the event of £37,500 were split between Prevent Breast Cancer and two other charities.

Margo also worked closely with a designer to introduce "BooBee" facemasks to our shop. The masks proved to be incredibly popular and raised over £10,000.



August

As the country stayed home, we organised a very special fundraising event: "Sunday Night In with Prevent Breast Cancer" in collaboration with Saving Grace Events. The event was streamed online and featured performances from Victoria Ekanoye, Kym Marsh, Paul Pashley and Clint Boon. It raised over £6,700.

September

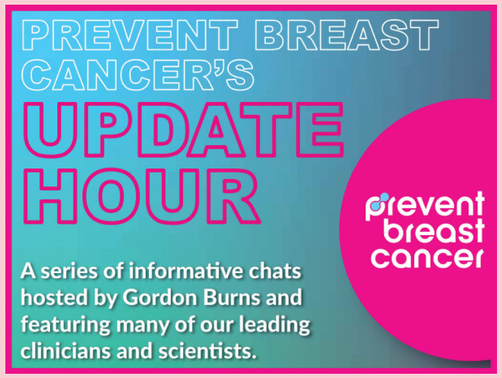
We were delighted to see our fabulous Ambassadors Roma Das, Jenny Ferguson and Heather Glover send their wonderful cookbook to print, ready to go on sale in October. "More than a Manchester Tart" features recipes from their friends and family as well as several Patrons of the charity. To date, the book has raised £7,000 for Prevent Breast Cancer.



October

October is Breast Cancer Awareness Month, so it is always an important month for our health awareness campaigns. This year, our BooBee Bus saw our team engage with over 1,000 women from a diverse range of backgrounds, enabling our ambassadors to highlight the importance of breast screening and share other important breast cancer awareness information.

Also this month, the #MagTeam100 challenge raised over £24,800. Partnering with cancer technology company, Endomag, we asked our supporters to walk, run or cycle 100 miles during the month. Endomag donated £100 for everyone that tracked their activity and successfully completed the challenge.



October also saw the launch of our first Update Hour, a virtual event which was hosted by our Patron, journalist Gordon Burns. The topic was 'The impact of the pandemic on breast cancer services' and our guest speakers were Lester Barr, Professor Cliona Kirwan and Dr Sacha Howell. 300 people have watched the video and it was the first of several similar events we ran in the year.



November

We launched our Lockdown Line-Up, a series of virtual, interactive events in an effort to add a little positivity into our supporters' lives. The line-up included various exercise classes, such as pilates, HIIT and yoga.

December

Our annual Christmas Celebration moved online this year, and we hosted an hour of festive entertainment featuring several of our Patrons and some exceptional solo singers and choirs. The event raised just under £2,000.

January and February

As we progressed into the third national lockdown, we aimed to bring a little cheer by introducing Lockdown Line-Up 2.0. This time, we focused on more creative activities and asked our contacts to provide classes including creative writing, photography, cooking and drawing. We had great feedback and many of those attending donated to the charity, generating approx. £2,000.



March

Inspired by our own experiences and the challenges we have all faced over the past year, the fundraising team began work on an exciting new campaign: "Power of Prevent" (POP). Ready to launch in May 2021, the campaign asked our supporters to think about their own wellbeing and to make a POP Promise to raise £240, either by breaking a bad habit or taking on an exercise challenge.

Strategic aims and objectives

Strategic aims and objectives in 2020-2021

Governance and structure

As a result of Covid and the economy, withdraw £20,000 of invested reserves per month to minimise the risk to our investments and to maintain cashflow, until the Board felt it no longer necessary	Completed and ended in August 2020
Utilise the furlough scheme where possible, while ensuring that essential activity continues, and relationships with supporters and the charity's profile are maintained	Achieved
Implement new processes to support home-based working	Achieved

Research

Agree new terms of payment with the host institutions of our research studies	Completed
Maintain funding to support our existing and active research studies	Achieved

Services to patients and to The Nightingale Centre

Keep the coffee bar at The Nightingale Centre Breast Unit open to provide an essential service to patients and NHS staff	Achieved

Health awareness and education

Promote the signs and symptoms of breast cancer, different risk factors and the importance of breast screening across our digital platforms, in the press and through grass roots events	Ongoing
Relaunch our Health Promotion talks (rebranded The Health Hour) and adapt for virtual delivery	Achieved

Income generation

Generate funds for the NBIA	Ongoing
Apply to Trusts and Foundations for unrestricted income	Ongoing
Increase our regional impact	Ongoing

Strategic aims and objectives for 2021-2022

Governance and structure

Recruit two new trustees
Grow the fundraising team and invest in the structure. Recruit: • Senior corporate fundraiser • Sports fundraiser • Supporter engagement administrator
Invest in training - IT security & Compliance and Diversity, Inclusion & Equality
Review internal processes and induction process for new employees
Write an Equality, Diversity and Inclusion Statement

Research

Reopen grant funding applications and award new research grants

Services to patients and to The Nightingale Centre

Service and update information screens located in the reception area, creating a more interactive environment for patients waiting for their appointments
Invest in the layout of our Welcome Desk and shop so it is more inviting to patients and to staff

Health awareness and education

Continue our work to promote the signs and symptoms of breast cancer across our digital platforms, in the press and through grass roots events
Collaborate with a commercial organisation on a health awareness campaign during Breast Cancer Awareness Month (October)
Explore a campaign focussed on raising awareness of family history and breast cancer
Film and edit a library of video content on different breast cancer topics for our website
Revisit a film focused on the importance of the breast screening invitation letter, finishing the edit and completing translation into Urdu and Bengali
Continue to develop and to promote our Health Hour Talks, approaching schools and companies

Income generation

Launch a joint capital fundraising campaign with Manchester Foundation Trust Charity, "Build to Beat Breast Cancer", to generate £3.2 million to build the National Breast Imaging Academy
Launch and develop our Power of Prevent (POP) campaign encouraging our supporters to either "kick a bad habit" or set themselves an exercise challenge whilst raising funds
Grow income from companies and secure new corporate partnerships and/or Charity of the Year opportunities
Implement a long-term monthly donor strategy and increase the number of regular donors
Organise two face-to-face supporter stewardship events to discuss fundraising plans for 2022
Integrate monthly giving into fundraising strategy and grow

Five year research strategy 2020 to 2025

In collaboration with the Manchester Breast Centre, Prevent Breast Cancer scientists are working towards achieving the following by 2025:

Gene research

Investigating how changes and mutations in genes can affect someone's risk of developing breast cancer.

1. To identify all the remaining undiscovered high risk and intermediate risk genes
2. To identify all the genes and gene fragments (SNPs and polygenic risk scores) linked to breast cancer in every ethnic group and community across the country and internationally.
3. To identify new tests (bio-markers) for risk prediction and early detection.
4. To identify more individualised ways to provide breast screening through the inclusion of risk

Early detection and screening

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

1. To improve the accuracy of screening through new technology
2. To improve early diagnosis in women with high breast density and lobular breast cancer
3. To improve our understanding of why breast density promotes breast cancer
4. To implement risk-adapted 'smart screening' in the NHSBSP*: with a strategy that is cost neutral
5. To improve uptake of screening, collaborating with the NHS and grassroots organisations
6. To develop new approaches for predicting risk, screening, and prevention in young women before the age of eligibility for the NHSBSP.

Preventative drugs

Investigating drugs that can be used as a preventative measure to reduce an individual's risk of developing breast cancer.

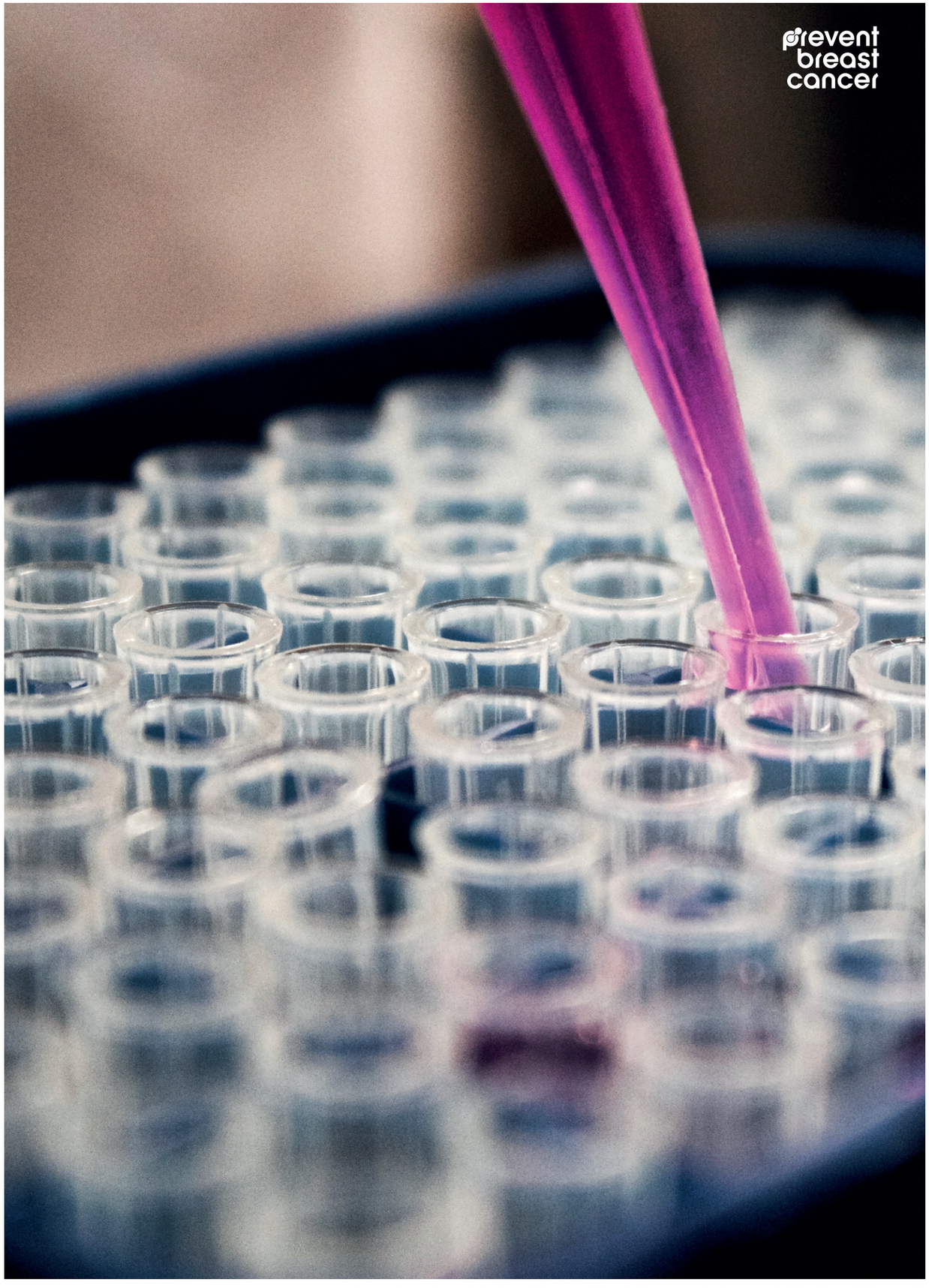
1. To continue to develop models for testing new and re-purposed drugs for the purpose of prevention
2. To identify tests (biomarkers) of responsiveness to preventative drugs (such as breast density measurement or blood markers)
3. To support clinical trials of new or re-purposed drugs
4. To widely promote the awareness and availability of drugs approved for prevention.

Risk factors (previously Diet and lifestyle)

Research into lifestyle factors that contribute to risk and how diet and exercise can reduce an individual's risk.

1. To discover the mechanisms through which known risk factors work to impact breast cancer
2. To identify mechanisms for modifying or reducing known risk factors
3. To identify biomarkers of responsiveness to changes in diet, exercise and lifestyle interventions
4. To develop a lifestyle management programme that can be offered to women as part of the NHSBSP
5. To develop a lifestyle management programme for young women at increased risk of breast cancer

* NHSBSP = NHS Breast Screening Programme



Financial review

The impact of the pandemic on Prevent Breast Cancer's ability to generate funds during 2020/21 is clear to see, with the fundraising team generating a total sum of £672,068 (including the furlough grant), compared with £1,385,123 in the previous year.

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

Despite the pandemic and the challenges we faced, the figures to 31 March 2021 show how well the fundraising team adapted. Although we were sadly unable to fund any new research, we have finished the year with a surplus, which has enabled us to designate £150,000 for the NBIA capital appeal and to invest in the structure of the charity. Whilst the Board of Trustees is still cautious about the external environment, we believe it is the right time to lay the foundations and consolidate, ready to grow in 2022 and beyond.

Activities to raise funds

General Donations & Legacies	£190,394	28%
Trusts & Foundations	£107,400	16%
Sport Challenges	£96,013	14%
Furlough Claim	£48,223	7%
Community Donations	£40,967	6%
Merchandise	£39,227	6%
Gift Aid	£36,459	5%
Corporate Donations	£31,830	5%
Charitable Activity - Coffee Bar	£25,019	4%
Various Events & Fundraising Activities	£21,834	3%
Gift-in-Kind	£17,064	3%
Virtual Event Income	£10,947	2%
Investment Income	£6,691	1%
Total Income	£672,068	

- Donations to the charity reached £190,394 – an 87% increase on the previous year, largely as a result of our Urgent Covid Appeal for donations
- Income from trusts and foundations reached more than £107,400. We focused on generating unrestricted funds, as opposed to funds restricted for specific research projects
- Despite all of our sport events being cancelled or postponed, many of our supporters took part in our virtual campaigns or organised their own challenges. Together they generated over £96,000
- Merchandise sales raised over £39,000, following a shift in our strategy towards online sales – the vast majority of sales were via the Prevent Breast Cancer website. In comparison, less than £4,000 of our merchandise sales for the year 2019/20 were online
- Pro bono expertise totalled £17,064, of which £14,400 was provided by Mediacom, which supported our pay per click and SEO activity

We offer our heartfelt thanks to our supporters across the UK who, despite everything, continued to fundraise and support the charity.

Our expenditure for 2020/21:

Consistent with other years, our charitable activities constitute the vast majority of expenditure for the forthcoming 12 months, with other costs kept at a minimum. During the year under review, Prevent Breast Cancer spent over £348,000 on charitable activities. There is £258,474 held as restricted income and carried forward to 2021-2022 for future charitable expenditure, £236,767 of which is restricted for the building of the National Breast Imaging Academy.

How we spend our funds

Charitable Activities	£348,825	79.5%
Cost of Raising Funds	£80,163	18.3%
Merchandise Costs	£5,141	1.2%
Investment Management Fee	£4,847	1.1%
Total Expenditure	£438,976	

Future charitable expenditure

National Breast Imaging Academy Capital Build	£236,767	79.5%
Captial Appeal Fundraising Campaign	£4,921	18.3%
Asian Women's Health Awareness	£16,787	1.2%
Total Restricted Reserves	£258,475	

The key components of our charitable activities are research, communicating health messages about breast cancer, patient care and services to The Nightingale Centre.

The below chart outlines the breakdown of our Charitable Activity for the year 2020/21, incorporating our restricted reserves.

Breakdown of charitable activity including restricted reserves

Research Grants	£8,736	1%
Health Promotion	£175,505	29%
Patient Care and Service to the Centre	£394,103	65%
Publicising Research and Results	£26,478	4%
Workshops & Education	£2,477	0.4%
Total	£607,299	

Reserves policy

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

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

As of 31 March 2021 the charity holds reserves of £841,453 , of which £258,474 are restricted funds.

Designated funds amount to £162,198, which have been allocated to the National Breast Imaging Academy and towards the salary of one of our scientists.

The Trustees aim to keep in reserve six to nine months of core costs to guard against a worst-case scenario where the charity receives no income from any of its sources. These costs cover our office staff, support costs, critical fundraising activity and governance. They total £182,108 for six months and £273,162 for nine months.

Free reserves are £420,781 (2020 - £291,815) at the year end so, based on this policy, the excess of free reserves stand at between £238,673 and £147,619.

The surplus of free reserves will be used to fund new research projects when the charity reopens its funding round in 2021/22.

Fundraising costs policy

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

In summary, we raised a total of £672,068 from donations and legacies, fundraising events, trading activities, funding from trusts, foundations and investments. We spent £348,825 on our core charitable activities and research grants, with a further £258,474 income held in restricted reserves for future charitable expenditure.

Investment policy

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

The Trustees have appointed Brewin Dolphin, an experienced firm of investment advisers to manage our investments on a discretionary basis. The investment portfolios are managed in accordance with our Investment Policy.

Structure, governance and management

Governing documents

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

Appointment of trustees and induction

New Trustees are nominated by Trustee Board members, interviewed by a panel of Trustees for that purpose and appointed where they have the necessary skills to contribute to the charity's management and development.

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

Organisation

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

Related party transactions

During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine (Trustee) is a director. The estimated value of such services is £2,664 (2020: £1,540) and therefore an equivalent amount has been included within gifts in kind.

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

Pay policy for senior staff

The Board of Trustees and the senior management team comprise the key management personnel of the charity in charge of directing and controlling, running and operating the charity. All Trustees donate their time and do not receive remuneration. Details of related party transactions are disclosed in note 20 of the accounts.

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

Risk management

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

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

Risk policy objectives:

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

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

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

In 2020-2021 the Trustees assessed the major risks to which the charity is exposed, in particular those related to the operations and finances of the charity and were satisfied that systems are in place to manage exposure to the major risks.

The charity receives no statutory funding and is dependent entirely on the donations and fundraising activities of its staff, volunteers and supporters. Therefore, the ratio of income to expenditure is constantly highlighted as a key risk as we need to ensure we can continue to fund our ongoing charitable activities and research projects. The Trustees ensure that this risk is minimised by following the Reserves Policy, outlined on page 25.

Reference and administrative details

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

L Barr - Chairman
J Dick (Resigned 17 September 2020)
P S Glass
D Harris
S Harrison (Resigned 2 December 2020)
C Lee-Jones
C J Levine - Treasurer
J Lovell
S Saleh (Appointed 28 July 2020)
Dr M Wilson

Key management personnel

N Barraclough	Executive Director
L Parker Cairns	Charity Manager
E Mellor	Charity Manager (maternity cover)
K Harding	Finance Manager – appointed 19 November 2019 until 31 July 2020
J M Glass	Secretary

Company registered number	04831397
Charity registered number	1109839
Registered office	Prevent Breast Cancer Research Unit The Nightingale Centre Wythenshawe Hospital Southmoor Road Manchester M23 9LT
Auditors	Alliotts LLP Friary Court 13-21 High Street Guildford Surrey GU1 3DL
Bankers	Royal Bank of Scotland Plc. 38 Mosley Street Manchester M2 3AZ
Solicitors	Gunnercooke LLP 53 King Street Manchester M2 4LQ

Statement of trustees' responsibilities

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

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

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

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

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

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

L Barr - Chairman

Date: 15/12/21



Independent Auditor's report

Opinion

We have audited the financial statements of Prevent Breast Cancer Limited (the 'charity') for the year ended 31 March 2021 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and the notes to the financial statements, including a summary of significant accounting policies.
The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2021 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. The trustees are responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon. Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Matters on which we are required to report by exception

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

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

Responsibilities of trustees

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

Auditor's responsibilities for the audit of the financial statements

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

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

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

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, was as follows:

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

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

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

Audit response to risks identified

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

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

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

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

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

Material misstatements that arise due to fraud can be harder to detect than those that arise from error as they may involve deliberate concealment or collusion.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: http://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charity's trustees, as a body, in accordance with part 4 of the Charities (Accounts and Reports) Regulations 2008. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditors' 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.

Date: 16/12/21

Statutory Auditor
Alliotts LLP
Chartered Accountants
Friary Court
13-21 High Street
Guildford
Surrey
GU1 3DL

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

Statement of financial activities including income and expenditure account for year ending 31st March 2021

	Notes	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £	Unrestricted funds 2020 £	Restricted funds 2020 £	Total 2020 £
Income from:							
Donations and legacies	3	479,293	109,988	589,281	756,979	481,647	1,238,626
Charitable activities	4	25,019	-	25,019	66,841	-	66,841
Other trading activities	5	50,959	-	50,959	67,313	-	67,313
Income from investments	6	6,809	-	6,809	12,343	-	12,343
Total income		562,080	109,988	672,068	903,476	481,647	1,385,123
Expenditure on:							
Expenditure on raising funds	7	90,151	-	90,151	239,300	7,934	247,234
Charitable activities	8	317,205	31,620	348,825	749,185	195,348	944,533
Total resources expended		407,356	31,620	438,976	988,485	203,282	1,191,767
Net gains/(losses) on investments	13	108,555	-	108,555	(28,588)	-	(28,588)
Net incoming resources before transfers		263,279	78,368	341,647	(113,597)	278,365	164,768
Gross transfers between funds		11,885	(11,885)	-	143,051	(143,051)	-
Net movement in funds		275,164	66,483	341,647	29,454	135,314	164,768
Fund balances at 1 April 2020		307,815	191,991	499,806	278,361	56,677	335,038
Fund balances at 31 March 2021		582,979	258,474	841,453	307,815	191,991	499,806

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

All income and expenditure derive from continuing activities.

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

Balance sheet as at 31 March 2021

	Notes	£	2021 £	£	2020 £
Fixed assets					
Tangible assets	**14**		252		567
Investments	**15**		1		366,252
			253		366,819
Current assets					
Stocks	**16**	11,146		9,207	
Debtors	**17**	143,805		209,078	
Investments	**18**	535,913		139,263	
Cash at bank and in hand		413,176		262,744	
		1,104,040		620,292	
Creditors: amounts falling due within one year	**19**	(251,590)		(424,906)	
Net current assets			852,450		195,386
Total assets less current liabilities			852,703		562,205
Creditors: amounts falling due after more than one year	**20**		(11,250)		(62,399)
Net assets			841,453		499,806
Income funds					
Restricted funds	**21**		258,474		191,991
Unrestricted funds					
Designated funds	**22**	162,198		16,000	
General unrestricted funds		420,781		291,815	
			582,979		307,815
			841,453		499,806

The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 March 2021, 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.

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

The accounts were approved by the Trustees on:

Date: 15/12/21.....

L Barr - Chair
Trustee

Company Registration No. 04831397

Statement of cash flows

	Notes	£	2021 £	£	2020 £
Cash flows from operating activities					
Cash generated from operations	**27**		70,314		146,699
Investing activities					
Purchase of tangible fixed assets		-		(230)	
Proceeds on disposal of investments		80,000		50,000	
Interest received		118		301	
Net cash generated from investing activities			80,118		50,071
Net cash used in financing activities			-		-
Net increase in cash and cash equivalents			150,432		196,770
Cash and cash equivalents at beginning of year			262,744		65,974
Cash and cash equivalents at end of year			413,176		262,744

Notes to the financial statements

1 Accounting policies

Charity information

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

1.1 Accounting convention

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

The financial statements are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest £. The financial statements have been prepared under the historical cost convention. The principal accounting policies adopted are set out below.

1.2 Going concern

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

1.3 Charitable funds

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

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

1.4 Incoming resources

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

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

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

1.5 Resources expended

All expenditure is accounted for on an accruals basis and has been included under expense categories that aggregate all costs for allocation to activities. Where costs cannot be directly attributed to particular activities they have been allocated on a basis consistent with the use of the resources.

Fundraising costs are those incurred in generating funds and do not include the costs of disseminating information in support of the charitable activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include project management carried out in house.

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

Grants

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

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

1.6 Tangible fixed assets

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

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

Computers 20% straight line

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 net income/(expenditure) for the year.

1.7 Fixed asset investments

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

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

1.8 Impairment of fixed assets

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

1.9 Stocks

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

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

1.10 Cash and cash equivalents

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

1.11 Retirement benefits

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

2 Critical accounting estimates and judgements

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

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

Critical judgements

Current asset investments

All investment assets at year end are categorised as current asset investments. This is a change from the prior year when cash, corporate bonds and UK gilts were held as current assets with the remainder of the investment portfolio held as fixed assets and being invested for the longer term. The trustees have given consideration as to how the investment portfolio is used in the future and believe that the the portfolio is more likely to be utilised/liquidated within a period of one year.

Premises costs

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

3 Donations and legacies

	Unrestricted funds £	Restricted funds £	Total 2021 £	Total 2020 £
Donations and gifts	414,006	109,988	523,994	1,159,236
Legacies receivable	-	-	-	12,832
Government grants	48,223	-	48,223	-
Gifts in kind	17,064	-	17,064	66,558
Donations and legacies	479,293	109,988	589,281	
For the year ended 31 March 2020	756,979	481,647		1,238,626

4 Charitable activities

Patient Care and Services to the Centre

	2021 £	2020 £
Coffee Bar Income	24,644	59,661
Donations to the Coffee Bar	375	7,180
	25,019	66,841

5 Other trading activities

	Unrestricted funds £	Restricted funds £	Total 2021 £	Total 2020 £
Merchandise sales	39,227	-	39,227	54,620
Fundraising events	11,732	-	11,732	12,693
Other trading activities	50,959	-	50,959	
For the year ended 31 March 2020	67,313	-		67,313

6 Income from investments

	Unrestricted funds 2021	Unrestricted funds 2020
	£	£
Interest from investments	6,691	12,042
Interest receivable	118	301
	6,809	12,343

7 Expenditure on raising funds

	Unrestricted funds	Restricted funds	Total 2021	Total 2020
	£	£	£	£
Fundraising and publicity				
Events, income generation and promotion costs	9,299	-	9,299	121,930
Staff costs	63,338	-	63,338	77,460
Support costs	7,526	-	7,526	13,147
Fundraising and publicity	80,163	-	80,163	212,537
Trading costs				
Merchandise costs	5,141	-	5,141	28,510
Investment management	4,847	-	4,847	6,187
	90,151	-	90,151	247,234

8 Charitable activities

	Patient care /Nightingale Centre	Health promotion	Publicising research and results	Workshops and education	Research grants	Total 2021	Total 2020
	£	£	£	£	£	£	£
Staff costs	88,863	88,412	21,574	2,254	-	201,103	209,482
Charitable expenditure	51,294	55,882	2,507	-	-	109,683	288,734
	140,157	144,294	24,081	2,254	-	310,786	498,216
Grant funding of activities (see note 9)	-	-	-	-	7,936	7,936	396,089
Share of support costs (see note 10)	9,540	9,825	1,633	152	545	21,695	40,479
Share of governance costs (see note 10)	2,718	4,600	764	71	255	8,408	9,749
	152,415	158,719	26,478	2,477	8,736	348,825	944,533
Analysis by fund							
Unrestricted funds	120,795	158,719	26,478	2,477	8,736	317,205	
Restricted funds	31,620	-	-	-	-	31,620	
	152,415	158,719	26,478	2,477	8,736	348,825	
For the year ended 31 March 2020							
Unrestricted funds	155,668	271,998	41,088	9,462	270,969		749,185
Restricted funds	65	47,895	17	4	147,367		195,348
	155,733	319,893	41,105	9,466	418,336		944,533

9 Grants payable

	2021 £	2020 £
Grants to institutions:		
Gene research	-	122,349
Early diagnosis and screening	3,000	123,739
Preventative drugs	4,936	57,801
Risk Factors (previously Diet and Lifestyle)	-	92,200
	7,936	396,089

10 Support costs

	Support costs £	Governance costs £	2021 £	2020 £
Staff expenses	857	-	857	11,834
Staff training	819	-	819	1,868
Printing and stationery	3,103	-	3,103	4,129
IT/website costs	6,889	-	6,889	7,596
Insurance	1,767	-	1,767	1,738
Bank and Streamline charges	5,452	-	5,452	5,352
Legal and professional charges	4,572	176	4,748	20,211
Other office costs	681	-	681	905
Payroll	2,664	-	2,664	1,540
Depreciation	315	-	315	202
Audit fees	-	8,500	8,500	6,700
Accountancy	-	1,834	1,834	1,300
	27,119	10,510	37,629	63,375
Analysed between				
Fundraising	5,424	2,102	7,526	13,147
Charitable activities	21,695	8,408	30,103	50,228
	27,119	10,510	37,629	63,375

11 Trustees

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

12 Employees

Number of employees

The average monthly number of employees during the year was:	2021 Number	2020 Number
Administration	2	3
Operations	3	3
Charitable Activity	5	5
Generating Funds	2	4
	12	15

The full time equivalent for employees during the year was:	2021 Number	2020 Number
Administration	1	2
Operations	2	2
Charitable Activity	4	4
Generating Funds	2	3
	9	11

Employment costs	2021 £	2020 £
Wages and salaries	243,282	263,688
Social security costs	16,150	18,054
Other pension costs	5,009	5,200
	264,441	286,942

There were no employees whose annual remuneration was £60,000 or more.

13 Net gains/(losses) on investments

	Unrestricted funds 2021 £	Unrestricted funds 2020 £
Revaluation of investments	92,257	(38,894)
Gain/(loss) on sale of investments	16,298	10,306
	108,555	(28,588)

14 Tangible fixed assets

	Computers £
Cost	
At 1 April 2020	1,575
At 31 March 2021	1,575
Depreciation and impairment	
At 1 April 2020	1,008
Depreciation charged in the year	315
At 31 March 2021	1,323
Carrying amount	
At 31 March 2021	252
At 31 March 2020	567

15 Fixed asset investments

	Listed investments £	Other investments £	Total £
Cost or valuation			
At 1 April 2020	359,393	1	359,394
Transfer	(359,393)	-	(359,393)
At 31 March 2021	-	1	1
Carrying amount			
At 31 March 2021	-	1	1
At 31 March 2020	359,393	1	359,394

The fixed asset investments were transferred to current assets at the beginning of the year at fair value.

Other investments comprise:	Notes	2021 £	2020 £
Investments in subsidiaries	26	1	1

Fixed asset investments revalued

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

16 Stocks

	2021 £	2020 £
Finished goods and goods for resale	11,146	9,207

17 Debtors

	2021 £	2020 £
Amounts falling due within one year:		
Trade debtors	47	52,791
Other debtors	143,758	139,570
Prepayments and accrued income	-	16,717
	143,805	209,078

18 Current asset investments	2021 £	2020 £
Listed investments	535,913	139,263

Included in current asset investments is £17,217 (2020: £Nil) of cash held within the portfolio.

19 Creditors: amounts falling due within one year	2021 £	2020 £
Other taxation and social security	2,410	6,074
Trade creditors	93,746	90,562
Grants payable	118,413	287,241
Other creditors	2,109	1,369
Accruals and deferred income	34,912	39,660
	251,590	424,906

20 Creditors: amounts falling due after more than one year	2021 £	2020 £
Grants payable	11,250	62,399

21 Restricted funds

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

	Movement in funds					Movement in funds			
	Balance at 1 April 2019 £	Incoming resources £	Resources expended £	Transfers £	Balance at 1 April 2020 £	Incoming resources £	Resources expended £	Transfers £	Balance at 31 March 2021 £
AWHA Projects	54,547	10,000	(47,761)	-	16,786	-	-	-	16,786
Hydrogel Study	-	10,568	(10,568)	-	-	-	-	-	-
Other smaller restricted projects	2,130	6,261	(8,330)	(61)	-	-	-	-	-
BRCA2 and PALB2	-	77,808	(77,808)	-	-	5,775	-	(5,775)	-
Molecular Basis of Density	-	46,889	-	(46,889)	-	-	-	-	-
NBIA fundraising campaign	-	-		-	-	36,541	(31,620)	-	4,921
SNPs3	-	29,480	-	(29,480)	-	-	-	-	-
DNA and Density	-	66,620		(66,620)	-	-	-	-	-
Clotting and Breast Density	-	56,119	(56,119)	-	-	-	-	-	-
Forget-me-not 2	-	2,696	(2,696)	-	-	-	-	-	-
NBIA	-	175,205	-	-	175,205	61,562	-	-	236,767
	56,677	481,646	(203,282)	(143,050)	191,991	103,878	(31,620)	(5,775)	258,474

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

There is a correction to the amounts allocated in the comparative funds - BRCA 2 showing the amount £77,808 in income and expenditure, in the comparative year these amounts were shown under DNA and Density.

DNA and Density now shows £66,620 income and transfer, which was classified under Molecular Basis of Density in the comparative year.

The projects included under Other smaller restricted products are; Laptop, Prolactin Research Study and the Race Across America fund.

21 Restricted funds

AWHA projects – The Asian Women's Health Awareness Campaign will research how to better promote the importance of breast screening to ethnic minority communities from South Asia. An overview of our planned activity can be found on the Trustees Report.

Hydrogel study – Research into a new technology to develop a complex replication of human breast tissue. This model will even mimic levels of breast density which is one of the most important predictors of breast cancer risk in individuals. This will allow our researchers to test large numbers of new and re-purposed preventative drugs for breast cancer. This study is the first of its kind to use hydrogel to develop novel cancer prevention approaches.

Prolactin research study (other) – This study aims to discover whether targeting the hormone, prolactin may improve breast cancer prevention in some women. This could provide a more tailored approach and develop novel, well tolerated approaches to breast cancer prevention.

Laptop (other) – Funding for a new laptop to be used by the fundraising team and ambassadors.

Race across America costs (other) - Funds raised to support an extreme sport challenge being undertaken by two supporters. Costs include contribution to flights, fuel for support vehicles, training kit and for the organisation of a cycling sportive, which will generate further funds.

BRCA2 and PALB2 - Gene research studying a new biological mechanism called "epigenetic silencing" whereby gene abnormalities that greatly increase a woman's risk of getting breast cancer may be left undetectable by standard gene testing.

Molecular basis of density - This study aims to provide new insights into the cause of high mammographic density and may identify genetic factors that predispose some women to develop high-density breasts.

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

SNPs3 - Using the knowledge learnt from our previous SNPs research, this study will assess the feasibility of offering a saliva test alongside a personalised breast cancer assessment in a clinical setting and whether these results could be provided in a timely fashion.

DNA and breast density - After age, the second highest risk factor for developing breast cancer is mammographic breast density, however, little is known about why high breast density promotes cancer development. This study aims to research the link between high density and DNA mutations and to identify new ways to reduce the risk associated with high breast density.

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

Forget-me-not 2 – An early detection and screening research project, which will study the progression of breast cancer in patients with DCIS (Ductal Carcinoma in Situ), in order to better understand over-diagnosis.

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

22 Designated funds

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

	Balance at 1 April 2019 £	Income £	Balance at 1 April 2020 £	Expenditure £	Transfers £	Balance at 31 March 2021 £
Research salaries	16,000	-	16,000	(16,000)	12,198	12,198
NBIA	-	-	-	-	150,000	150,000
	16,000	-	16,000	(16,000)	162,198	162,198

The designations are £150,000 to the funding of the NBIA project and a designation of £12,198 towards the funding of a research staff member salary.

23 Analysis of net assets between funds

	Unrestricted funds 2021 £	Restricted funds 2021 £	Total 2021 £	Unrestricted funds 2020 £	Restricted funds 2020 £	Total 2020 £
Fund balances at 31 March 2021 are represented by:						
Tangible assets	252	-	252	567	-	567
Investments	1	-	1	191,047	175,205	366,252
Current assets/(liabilities)	593,976	258,474	852,450	178,600	16,786	195,386
Long term liabilities	(11,250)	-	(11,250)	(62,399)	-	(62,399)
	582,979	258,474	841,453	307,815	191,991	499,806

24 Operating lease commitments

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

	2021 £	2020 £
Within one year	2,393	2,393
Between two and five years	3,589	5,982
	5,982	8,375

25 Related party transactions

Remuneration of key management personnel The remuneration of key management personnel is as follows.	2021 £	2020 £
Aggregate compensation	121,520	104,358

During the year invoices to the value of £Nil (2020: £2,918) were paid to Gunnercooke Solicitors. During the year fee's of £146 were paid to JMG Legal Ltd. This firm is considered a related party as Joe Glass (a Partner at Gunnercooke Solicitors and director of JMG Legal) is married to Pam Glass and is also the Company Secretary. No creditor remained outstanding at the year end (2020: Nil). During the year payroll services were provided free of charge by Sheppards Chartered Accountants, a company in which Charles Levine is a director. The estimated value of such services is £2,664 (2020: £1,800) and therefore an equivalent amount has been included within gifts in kind.

26 Subsidiaries

Details of the charity's subsidiaries at 31 March 2021 are as follows:

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

27 Cash generated from operations

	2021 £	2020 £
Surplus for the year	341,647	164,768
Adjustments for:		
Investment income recognised in statement of financial activities	(6,809)	(12,343)
Gain on disposal of investments	(16,298)	(10,306)
Fair value gains and losses on investments	(92,257)	38,894
Investment charges	4,847	6,187
Depreciation and impairment of tangible fixed assets	315	202
Movements in working capital:		
(Increase)/decrease in stocks	(1,939)	1,512
Decrease/(increase) in debtors	65,273	(88,563)
(Decrease)/increase in creditors	(224,465)	46,348
Cash generated from operations	70,314	146,699

28 Analysis of changes in net funds

The charity had no debt during the year.

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Registered with FUNDRAISING REGULATOR