

A woman with long brown hair, wearing round glasses, a light blue surgical face mask, and a white lab coat, stands in a laboratory. She is wearing a purple lanyard with 'Pancreatic Cancer UK' printed on it. The background shows laboratory shelves with various items, including boxes of 'KIMTECH' gloves, a 'DNA Gel Extraction Kit', and a 'greiner bio one' box. A microscope is visible on the right side of the frame.

**Pancreatic  
Cancer  
UK**

# A year like no other

**Annual Report and Financial Statements**  
for the year ended 31st March 2021



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# Who we are



## **Our vision**

Everyone with pancreatic cancer survives to live long and well



## **Our mission**

We lead the fight against pancreatic cancer



## **Our values**

- Compassion
- Integrity
- Determined
- Pioneering

## **Pancreatic cancer is a tough one.**

It's tough to treat, tough to diagnose, tough to research and tough to survive.

We're here for people today, and we're demanding a better future.

Together, we can transform the future for everyone affected by pancreatic cancer.

# A year like no other

We're here to support people affected by pancreatic cancer, both now and in the future. Already a tough disease to diagnose, treat and survive, the Covid pandemic made accessing treatment and care even tougher throughout the UK. Despite these setbacks, we remained focused on supporting and strengthening the pancreatic cancer community - families living with the disease, healthcare professionals, researchers and our supporters - to take on this tough cancer.



↓ Diana Jupp



↓ Lynne Walker

2020/21 really demonstrated that Pancreatic Cancer UK is a resilient charity, supported by thousands of incredible people. We were challenged on all fronts and we rose to meet those challenges, working with the whole pancreatic cancer community to take on this tough cancer.

Our transformed ways of working and our restructured organisation prioritised digital services and events. This was in direct response to our supporters' resilience and passion when faced with this new situation; bringing them together so they could still raise funds and campaign for change.



Our income  
grew to  
**£8.6m**  
as a result  
of incredible  
support



This year,  
**60,667**  
of you joined  
us to take on  
pancreatic  
cancer

Through this approach, we raised our game and our profile in 2020/21. We brought the pancreatic cancer community together in greater numbers than ever through our online Annual Summit and our No Time to Wait campaign, among many other activities and events. More importantly, we managed to reach and support more people affected by pancreatic cancer.

We've been overwhelmed by the response of our new and longstanding supporters alike, and their inspiring commitment to help us take on pancreatic cancer. Although we feared the worst at the start of the year, 2020/21 turned out to be unprecedented in terms of both our impact and our income.

We're so proud of these achievements but there's lots of work ahead. People with pancreatic cancer still face unacceptable delays in diagnosis and unacceptably tough survival rates. We won't stop until we improve these. As an organisation, we want to be more diverse and inclusive, and to reach everyone who needs our help, whoever they are. We invested significantly in diversity and inclusion in 2020/21, revising our recruitment strategies, our internal training and establishing a new Equality, Diversity and Inclusion committee to oversee our strategy.

We know that with a disease this hard to diagnose, we need to do everything we can to remove barriers to diagnosis. Tackling inequalities is therefore a key focus. We are working hard to understand the demographics of people with pancreatic cancer and whether, based on this, there are inequalities in outcomes, and we will address these within our strategy.

We're entering 2021/22 stronger than ever, just as we embark on a two-year plan to 'build back better' after the pandemic. We're delighted that this year of difficulty has reaped such positive results, which will enable us to support more people living with pancreatic cancer today, and invest in more research to transform outcomes for people who face the disease in the future.

We're incredibly proud of all our people who helped us overcome these unprecedented obstacles. This includes some people whose roles sadly ended during the year because of changing circumstances, and some who spent time on furlough. Other employees worked doubly hard to keep fulfilling our essential role despite resource constraints and new ways of working. Our volunteers and trustees also took on increasingly important roles as our organisation underwent significant change.

Thank you to everyone who is playing a part in taking on pancreatic cancer and is part of this story.

**Lynne Walker,**

Chair of our Board of Trustees  
and

**Diana Jupp,**

Chief Executive





# Trustees' Report

## Unprecedented challenges, impact and income



↓ Martin, Jog 28 miles in February participant



### Our biggest challenge yet

The Covid-19 pandemic made 2020/21 even tougher for anyone affected by pancreatic cancer, and the health professionals who work so hard to support them. The whole pancreatic cancer community needed us more than ever, as healthcare systems faced enormous pressures, diagnosis and treatment were seriously delayed, and research labs closed.

The pandemic was our biggest challenge yet, requiring us to adapt quickly to evolving circumstances and the changing needs of the people we serve.



### Achieving more than ever

Through our flexibility and determination, we and the pancreatic cancer community achieved impressive results in 2020/21. By expanding our online information and events, we managed to support more patients, families and health workers than ever, right across the UK. More families affected by pancreatic cancer received the information and support they needed to navigate treatment, and cope in the most difficult circumstances. And healthcare workers were better able to respond to the challenges of the pandemic.

Thanks to the amazing support of many individuals and organisations, our fundraising broke records. This will enable us to invest in more ground-breaking research to transform the future for everyone with pancreatic cancer. At a time when some other funders have reduced their research budgets, our funding is more vital than ever.

Our Pancreatic Cancer during Covid-19 Network helped nearly 300 healthcare professionals to coordinate and collaborate, to continue treating people with pancreatic cancer despite the pandemic.

We strengthened our influence on government and NHS policy and practice,

notably by contributing to the Scottish Cancer Recovery plan and through our hugely successful campaign, No Time to Wait.

We restructured our volunteer programme to increase our presence throughout the UK. This will increase people's engagement with our work, and our effectiveness in meeting diverse needs.

Although we managed to deliver our planned activities, we often had to do this in different ways. Sadly, this meant we had to lose five staff roles, and restructure or furlough others.



### A new dawn

2020/21 also marked the end of our five year strategy period. Over the last five years, you have helped us to grow in reach, impact, influence and income. Together, we've taken big strides in taking on this tough disease. Within the past five years, NICE published national standards for pancreatic cancer in England, and investment in pancreatic cancer research has more than doubled. Most importantly, survival rates in England have increased slightly.

These achievements are tangible progress towards our long-term goals of doubling pancreatic cancer survival rates and ensuring that everyone affected by this devastating disease will have a better quality of life. We're proud of this progress, but as we embark on our 2021-2023 plan, many challenges and uncertainties lie ahead. People with pancreatic cancer still wait too long for diagnosis and treatment, with devastating consequences. Health services, research programmes, and fundraising and awareness activities have all experienced pandemic setbacks. We'll continue to do everything we can to help overcome these.

The successes outlined in the following pages belong to the whole pancreatic cancer community. They are the result of many hardworking employees, volunteers, supporters, partners, healthcare professionals and researchers. **Thank you all.** Together, we're making life a little easier for people affected by pancreatic cancer today, and building hope for the future.

### Positive progress for pancreatic cancer, 2015-2020

- The one year survival rate in England increased from **23.6%** to **25.9%** (2018)
- The five year survival rate in England increased from **6.3%** to **7.3%** (2018)
- Annual pancreatic cancer research spend more than doubled from **£10.5m** to a high of **£21.7m** in 2018/19
- We helped launch the Less Survivable Cancers Taskforce, influencing national policy groups and Scotland's Cancer recovery plan
- Our annual income grew from **£4.4m** to **£8.6m**

The number of people accessing our support has nearly doubled from

**1,037 in 2015/16**  
to **2,032 in 2020/21**



# Increasing our reach

## Objective

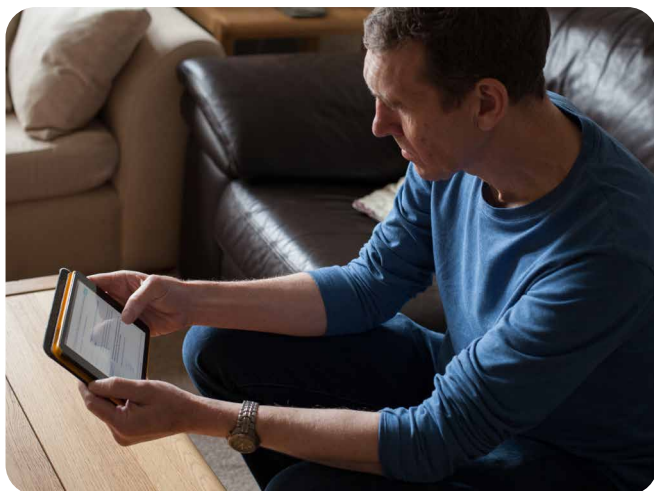
# 01

**Significantly grow our specialist support and information services for patients, families and friends**

People affected by pancreatic cancer needed us more than ever in 2020/21.

This was a year of change for our free, specialist support and information services. We quickly adapted to meet people's changing needs during the pandemic. We made our services more accessible, including via our brand new website. And we tailored services to specific groups, so that people could access the kind of information and support they wanted. Overall, our information and support services reached more people across a wider geographical area and had a greater impact than ever.

- **921,861** people accessed our information online in 2020/21 – **10% more than last year**
- **92–94%** of people said our online support sessions increased their understanding of managing their dietary symptoms or how to take pancreatic enzymes
- We distributed **26,120** information publications



**Our specialist pancreatic cancer nurses responded to**

# 6,122

calls and emails







We're delighted that

**100%**

of attendees said they'd recommend our Living with Pancreatic Cancer online support sessions to others.



## Responding to the pandemic

Covid-19 restrictions meant we couldn't deliver any in-person events during the year, and people affected by pancreatic cancer faced new uncertainties. To help people access the information and support they urgently needed, we adapted our services. We switched face-to-face support to online support sessions, and swiftly developed new information channels to make essential information and advice easy to access.

The new **coronavirus information hub** on our website provided people affected by pancreatic cancer with **up-to-date information tailored to their needs**. In addition to our usual resources, this included information for people who were shielding, details of the pandemic's impact on treatment, and information about Covid-19 vaccines. During the year, **18,725** people accessed this information.

Our new, valued **email service** enabled people to receive regular email updates about Covid-19 and pancreatic cancer, covering topics including how to manage symptoms, emotional coping strategies and changing government guidance. Our nurses' series of **videos and blogs**, accessed by around **1,550** people, explained key issues relating to the pandemic and pancreatic cancer.



## Practical and emotional support for more people

During the year, **our seven nurses supported over 2,000 people** through our free national Support Line and our Living with Pancreatic Cancer online support sessions. These provide invaluable practical and emotional support for people diagnosed with pancreatic cancer and their loved ones.

Following a successful trial, we invested in **extending our Support Line hours**. It is now open on Wednesday evenings and from 9am four days a week, so more people can access support at a time that suits them.

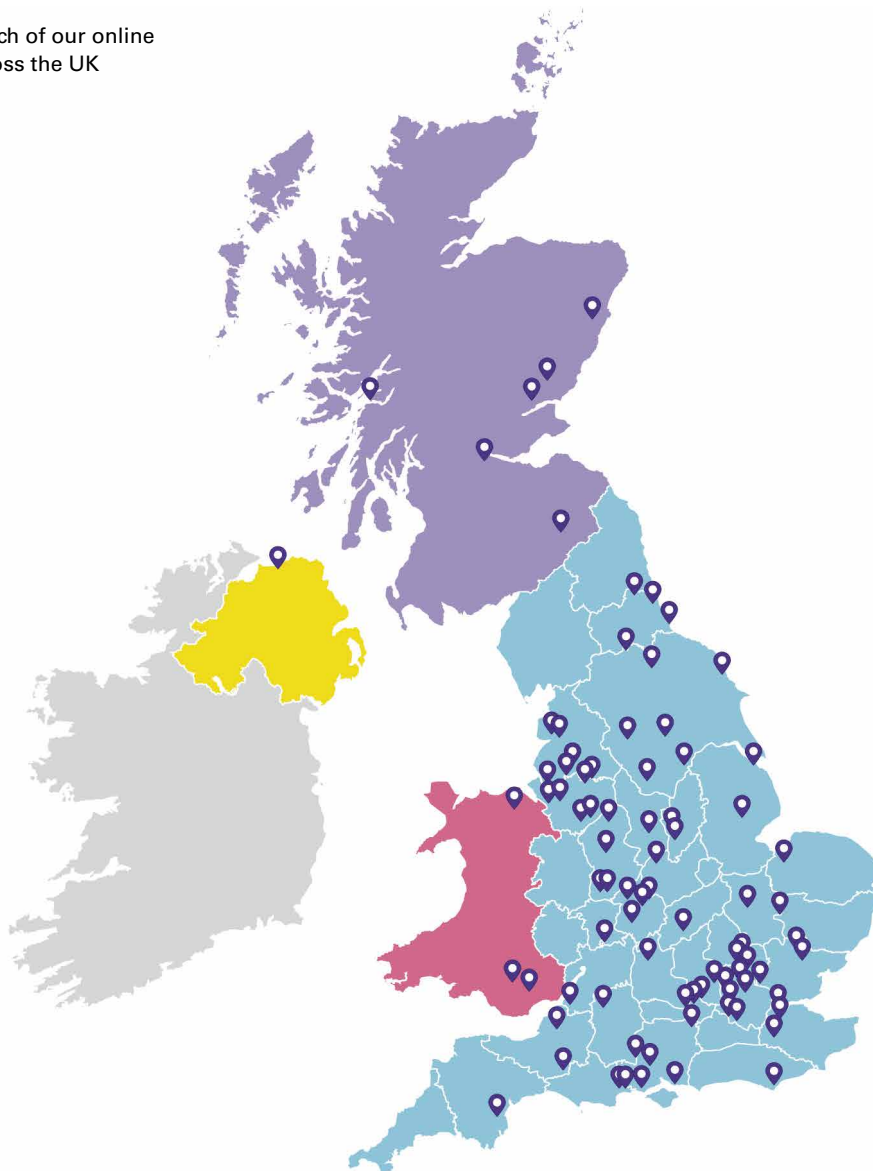
We redeveloped our in-person support days into **shorter, more focused Living with Pancreatic Cancer online support sessions**. Each session covered a specific theme, such as managing nutrition or coping with a new diagnosis. For the first time, we held specific sessions for family members and carers. Moving online allowed us to reach people from every part of the UK – and even from hospital, which couldn't happen at a physical event.

These sessions combine information and support from our specialist nurses, and a chance for people affected by pancreatic cancer to meet others in similar situations. Our **187 attendees** praised these sessions highly. We're delighted that **100% said they'd recommend the service** to others.

// I really appreciated the informal and unstructured nature of the session. It allowed for genuine sharing of experiences and knowledge."

Terry from Essex, who took part in a session for people newly diagnosed with pancreatic cancer

↓ Map showing the reach of our online support sessions across the UK



Our **Side by Side** telephone service provides people living with operable pancreatic cancer with one-on-one support from a trained volunteer who has been in their shoes. In 2020/21, this unique service supported **32 people**.

We produced new resources to give recently diagnosed people information tailored to their specific diagnosis, to help to make our information more accessible.

“ You listened and allowed me to ask so many questions. I cannot thank you enough for supporting me through this very difficult time.

It is so nice to speak to someone who has been in the same position and knows our fears and concerns.”

Karen, a Side by Side user whose husband has pancreatic cancer

### More accessible and tailored information

“ My father has just passed away from pancreatic cancer, eight months after diagnosis. I found the website an invaluable source of information.”

Anonymous website user

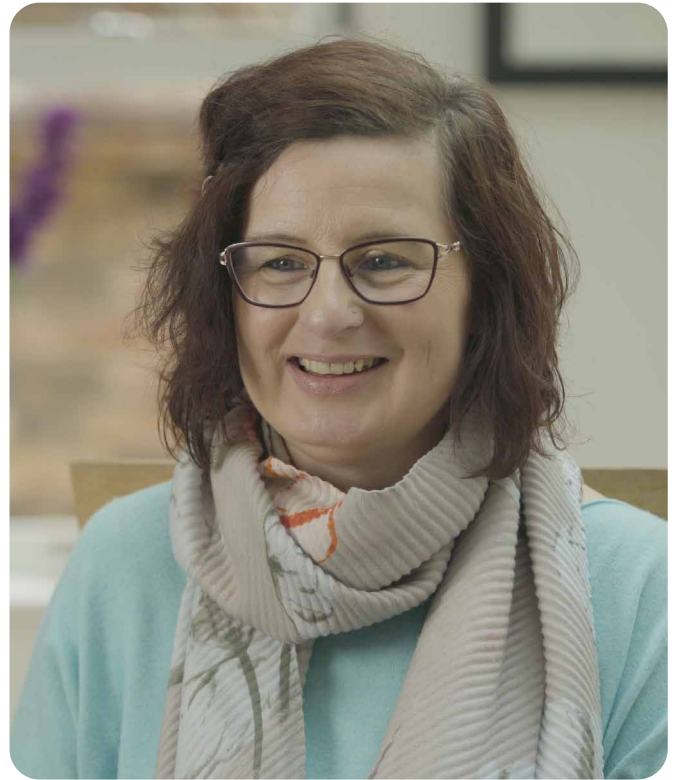
In 2020/21, our information for people affected by pancreatic cancer reached more people, was more tailored to specific needs, and had a greater impact than ever.

Our **new, mobile-optimised website** has transformed the way we provide information. We worked with people affected by pancreatic cancer to ensure it was welcoming and easy to use for everyone facing this tough disease.

For example, our online information for people recently diagnosed with pancreatic cancer includes more personal quotes and photos, and key questions to ask healthcare professionals. We also **revised our online ordering process to make it easier** for people affected by pancreatic cancer and healthcare professionals to order our printed information.

We published two new booklets based on feedback from people affected by pancreatic cancer: **Pancreatic cancer if you can't have surgery** and **Pancreatic cancer that can be removed by surgery**.

We also launched a series of six **information videos** that clearly explain what pancreatic cancer is, how chemotherapy and surgery treat it, and how the disease can affect digestion. In their first few months, these received around **3,700 views**.



↓ Jeni, one our Support Line nurses





//

Jeni was a support to Dad and the whole family.....We will always be grateful."

## CASE STUDY

### Jamie from North London

When Jamie's beloved dad Pavlos was diagnosed with pancreatic cancer, our specialist Support Line nurse Jeni supported their family throughout their pancreatic cancer journey. Sadly, Pavlos died in April 2021.

"Covid-19 made Dad's journey so much worse. Dad was diagnosed over the telephone – a very blunt diagnosis, giving him months to live.

The diagnosis was a shock. Due to Covid-19, treatment was delayed for three months. After this, Dad had an 18-week course of chemotherapy, which was gruelling.

We were all devastated and felt powerless to help Dad. We did what we could to rally his spirits. Mum was by Dad's side for the duration.

After discovering Pancreatic Cancer UK, I immediately rang. Jeni was a support to Dad and the whole family. She would call Dad every week and offer advice on any matter relating to his condition – his Creon tablets and painkillers – as well as being a pillar of strength for us all. We will always be grateful."



# Improving treatment and care

## Objective

### 02

## Drive up NHS standards and improve care

People working in the NHS faced overwhelming pressure in 2020/21 because of the pandemic.

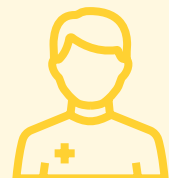
We did our utmost to relieve some of this pressure by sharing vital information with, and facilitating collaboration between, healthcare professionals.

Hosting information-sharing and training events online meant we could hold more events and support greater numbers of healthcare professionals. By strengthening professional relationships, this will improve patient care for people with pancreatic cancer.

- **1,089** healthcare professional attendees participated in our events – **76%** more than in 2019/20
- **100%** of healthcare professionals would recommend our events to their peers
- **95%** of healthcare professionals said that attending one of our events had increased their knowledge and understanding



# 99%



of healthcare professional attendees rated our events as good or excellent



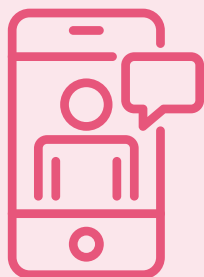
The sheer number of participants and breadth of uptake from the UK is incredible. It's heartening to see the community galvanised to face this challenge.

– Dr Ganesh Radhakrishna, an oncologist at The Christie NHS Foundation Trust, on our PCC Network



We held

20



virtual events for healthcare professionals, including our Annual Summit



## Responding to the pandemic

Our most impactful support for healthcare professionals during the year was via the **Pancreatic Cancer during Covid-19 (PCC) Network**. At the time, clinicians had to adapt rapidly to maintain care standards while being under-staffed, under-resourced and having little access to information about the new virus. Recognising this challenge, we quickly established the PCC Network in April 2020. This unique, collaborative online resource enabled **nearly 300 pancreatic cancer specialists** from across the UK to share best practice.

We ran **eight webinars** to help health professionals agree approaches to clinical challenges arising from the pandemic. These covered treatment adaptations, alternatives to surgery and learning from Italy, which experienced Covid-19 before the UK. We **recorded and widely shared all webinars and lessons learned** so knowledge could reach as many clinicians as possible. We also sent network members regular updates and useful resources.

We're delighted that the PCC Network **helped clinicians to improve and accelerate pancreatic cancer treatment and care**. For instance, oncologist members quickly agreed to use more radiotherapy during the pandemic, as it involves fewer hospital visits than other treatments.

Pancreatic cancer healthcare professionals also valued the network as a unique space to discuss advances in clinical trials. The network **helped the pancreatic cancer community collaborate like never before**, building a legacy that will continue beyond the pandemic and help us to improve outcomes for people with the disease.



The PCC network  
was invaluable  
in bringing  
the clinical  
community  
together



#### CASE STUDY

### Paula from Liverpool



Paula Ghaneh is Professor of Surgery at the University of Liverpool. Along with many other clinicians, Paula found our Pancreatic Cancer during Covid-19 (PCC) Network helped her overcome challenges and continue to care for her patients during the pandemic.

“The PCC Network was invaluable in bringing the clinical community together at a time when we all felt unsure and isolated about how best to maintain the most effective care and treatment for our patients.

Pancreatic Cancer UK and the network gave us the support to connect with colleagues around the UK and Europe to share experiences, discuss issues and collectively develop strategies to overcome them. Community collaboration has never been better. Now, we can use it to overcome key clinical needs to progress towards more effective clinical trials and treatments.”



## Building health professionals' knowledge and skills

Training healthcare professionals is a key part of improving care for people with pancreatic cancer. In 2020/21, we **increased both the range and reach of this training**.

Responding to needs, we held more training events for a wider range of health professionals, covering more diverse topics than in previous years.

As we couldn't support health professionals in our usual way, we quickly embraced new ways of working and established online events. This helped us reach unprecedented numbers of health professionals from across the UK – our online events attracted **1,089** attendees.

We found that short, virtual events can be more useful than physical events in bringing health professionals together. They fit better into busy schedules and don't require travel. Being able to record online events and share them afterwards also makes them accessible to greater numbers.

In October, we held five **National Study Sessions**, primarily for nurses and dietitians. These covered the latest treatment developments and dietetic management, improving professionals' knowledge by **31%** and **35%**, respectively. We also covered providing emotional support to people affected by pancreatic cancer.



The online format worked really well – more accessible and easier to get study leave from work to attend.

– An attendee at one of our events for health professionals



## After our Introduction to Pancreatic Cancer event



# 100%

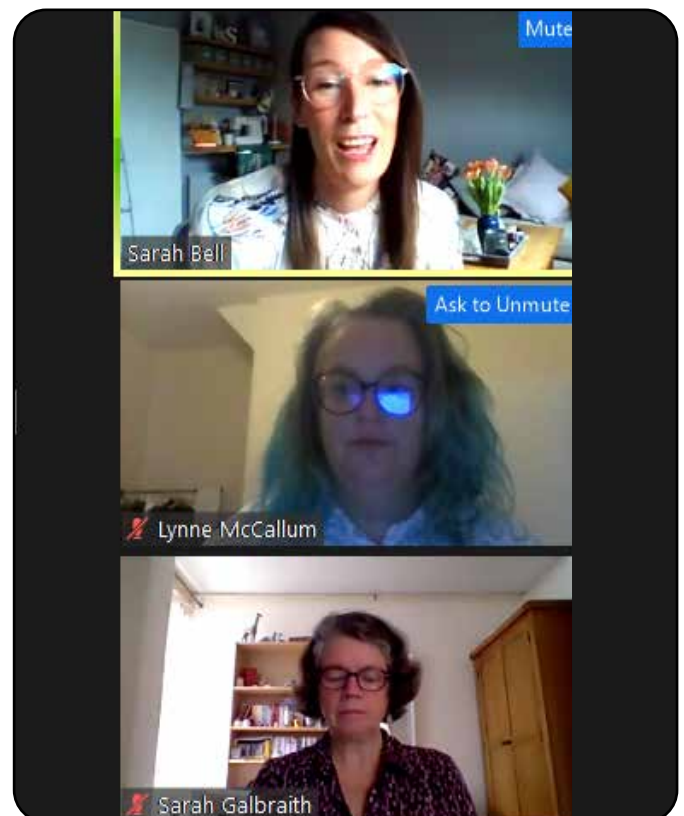
of participants told us  
the event increased  
their knowledge and  
understanding

Sadly, many people have inoperable pancreatic cancer. This means they receive secondary care where professionals may not have specialist knowledge of pancreatic cancer and its complexities.

During Pancreatic Cancer Awareness Month, we organised **an Introduction to pancreatic cancer** event to raise awareness and knowledge of this tough disease among health professionals. This included talks from **NHS Chief Nursing Officer Ruth May** and one of our specialist pancreatic cancer nurses. All participants (100%) told us this increased their knowledge and understanding of pancreatic cancer.

We held two in-depth sessions on **Supporting patients with pancreatic cancer** for other professionals, including support workers and information managers.

The sessions explored a pancreatic cancer patient's pathway to help them improve the quality of their patient support. This particularly increased attendees' knowledge of prehabilitation and rehabilitation, and managing fatigue and nutrition.







**“ The session has given me a greater understanding of how patients and their family members are affected by cancer and the various treatment options available. This will help me tremendously when communicating with patients/relatives.**

**A cancer navigator who attended our session on Supporting Patients with Pancreatic Cancer**



# Transforming lives through research



Objective

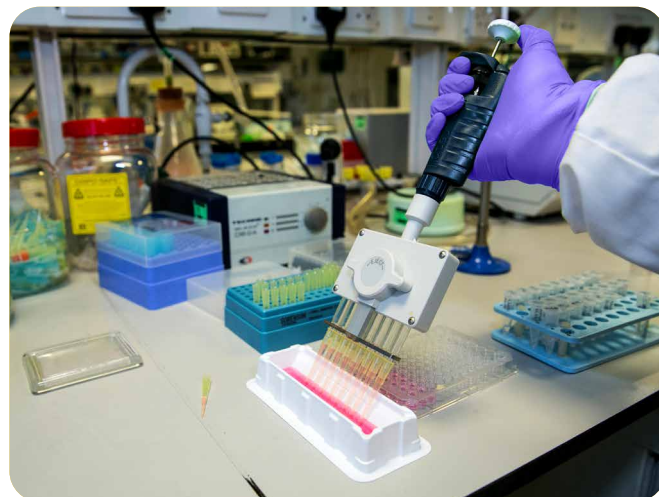
03

**Achieve a UK research investment position where game changing breakthroughs will lead to transformation**

Our research programme is complex but has a simple overall aim – to transform the future for people with pancreatic cancer. Funding research that will contribute to earlier diagnosis and better, faster treatment is the key to achieving this.

We cannot allow progress to falter. Some funders have reduced their research investments following the pandemic but we're doing the opposite, thanks to amazing support from the whole pancreatic cancer community.

In 2020/21 our research grant commitments totalled £933,701. **We supported 16 research projects across the UK.** We continued to facilitate research collaborations, making research as coordinated and effective as possible, and ensuring that UK-based pancreatic cancer research **reflects the real priorities** of people facing the disease and their health professionals. When Covid-19 halted lab-based research and clinical trials, we **helped researchers to continue their vital work**, for example by using computer-based techniques from home, and by collating online training resources to continue personal and professional development.



- Every **£1** that we invest in research generates another **£7** of support from other funders
- So far, our research investments have contributed to **140** research collaborations in **18** countries
- In 2020/21 we used our knowledge to assist over **20** research teams' funding applications to other large medical research funders



Our total research spend to date is

**£8.3 million**

In 2020/21 our research grant commitments totalled nearly **£934k**

This year we launched a Research Innovation Fund round with opportunities worth

**£1 million**

as well as kick-starting the Future Leaders Academy at the University of Cambridge



### Early detection innovation

There's still no simple way to spot pancreatic cancer early enough to make it treatable for most people. That's why **early diagnosis** is a research priority for us. After delayed diagnoses during the pandemic, this is more urgent than ever.

Led by Professor Steve Pereira from University College Hospital, our pioneering Early Diagnosis Research Alliance brings together scientists from across the UK to progress early diagnosis by increasing the accuracy of tests, mapping a diagnostic pathway and educating GPs.

Despite some Covid-related challenges, the Alliance continued **to bring us closer to the biggest ever breakthrough in pancreatic cancer** – the first effective test to diagnose the disease. In 2020/21, the team continued to collect samples from patients with vague symptoms, which will be used to prove the test is accurate, and took steps to ensure that, once developed, the test can quickly be made available throughout the NHS.

We also funded the continuation of an existing grant of £50,000 towards EUROPAC - a screening study to learn more about the genetic causes of pancreatic cancer in people with familial pancreatic cancer and hereditary pancreatitis. As part of this study, information is gathered and samples taken from members of these families.

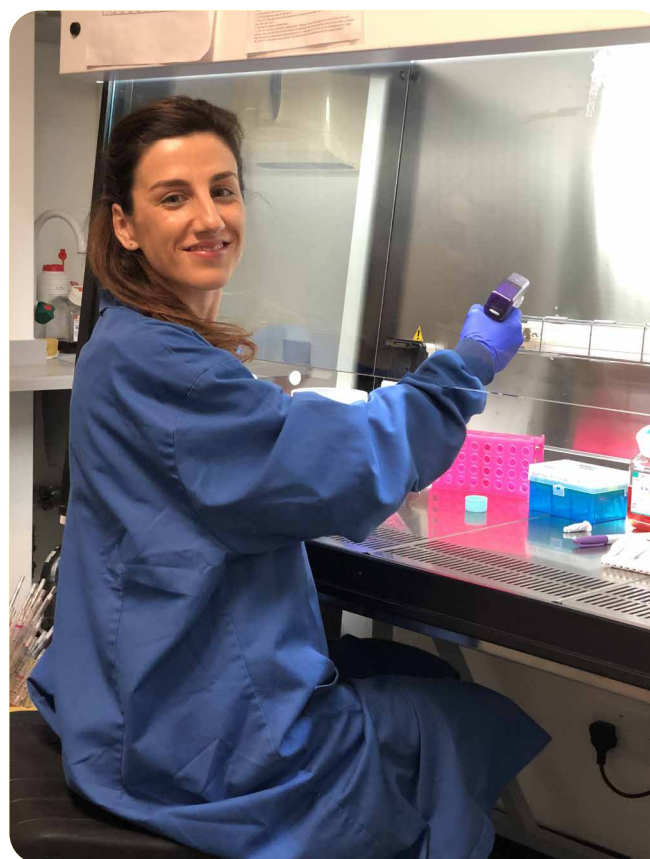


During the year, we also started co-funding **five innovative research projects** to enable world-class scientists to develop other ways to detect early stage pancreatic cancer. With **Cancer Research UK** and the **Engineering and Physical Sciences Research Council**, we're collectively investing nearly **£600,000** in these projects.

We selected these projects following virtual workshops that, for the first time, brought together pancreatic cancer scientists with other cancer specialists, and leading figures from other fields like engineering and mathematics.

By combining such diverse expertise, these unique teams are developing **potentially game-changing ways to identify pancreatic cancer at its earliest stages**, to transform people's lives. These include:

- Using artificial intelligence (AI) to determine people's risk of pancreatic cancer by combining multiple datasets
- A new way of assessing pancreatic cyst fluid to detect pre-cancerous cells
- Combining patient data and infrared spectroscopy to identify people who could benefit from rapid diagnostic tests
- Detecting the presence of volatile organic compounds to create an accurate pancreatic cancer test using blood, urine or breath



↑ Dr Pilar Acedo - Infrared Spectroscopy Project



Clinicians and researchers from all over the country came together to develop research ideas to address early detection in pancreatic cancer.



#### CASE STUDY



## Manil from London

Dr Manil Chouhan is a Clinical and Academic Radiologist at University College London who specialises in pancreatic imaging.

With colleagues from other disciplines, he is investigating using a nanoparticle dye, and enhancing MRI scan resolution, to identify cancers at the earliest stage. This is one of five projects that we're funding through our partnership with Cancer Research UK and the Engineering and Physical Sciences Research Council.

"Our project came about through an intense, four-day early detection workshop. Clinicians and researchers from all over the country came together to develop research ideas to address early detection in pancreatic cancer. It gave us the opportunity to collaborate with researchers with different areas of expertise that perhaps we wouldn't normally work with.

I found the workshop really exciting and a fresh approach. We are so grateful to Pancreatic Cancer UK and their funding partners for this unique opportunity."





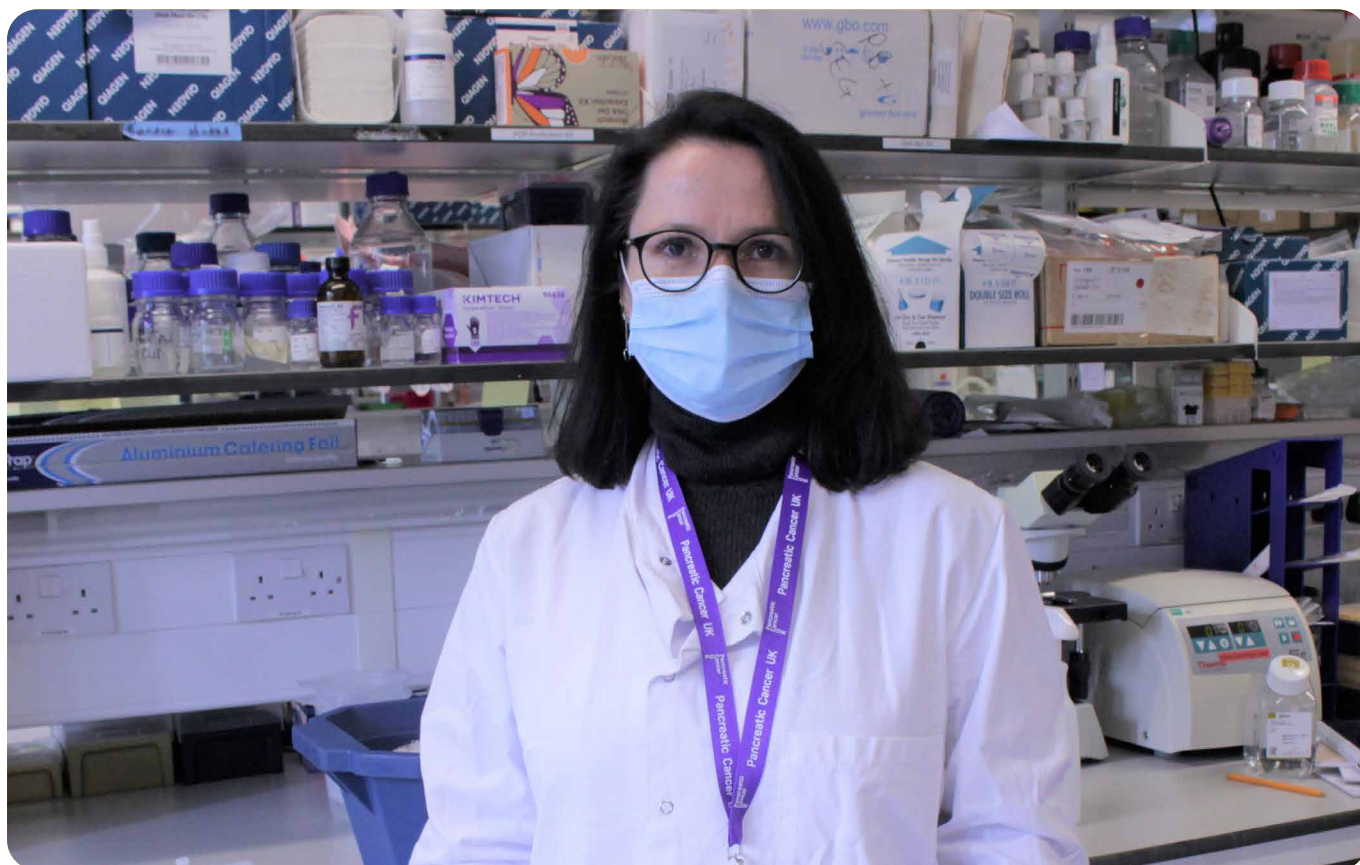
## Improving pancreatic cancer and care

Sadly, pancreatic cancer hasn't seen the same kind of treatment improvements as other forms of cancer. We're doing all we can to change this.

Our biggest research investment, the Pancreatic Cancer UK **Grand Challenge Award**, funds a team at **Barts Cancer Institute** to investigate immunotherapy-based treatment for pancreatic cancer. Professor Nick Lemoine's team made a major breakthrough in 2020/21 by **identifying a specific protein that can be targeted to destroy pancreatic cancer cells** without damaging healthy tissue. We hope that targeting this protein in future clinical trials will help to develop immunotherapy treatments to save people's lives.

Our **Research Innovation Fund** supports promising pilot projects, allowing researchers to apply for larger grants to take their work to the next level. In 2020/21, we **extended some projects to help teams make up for lost lab time during the pandemic**. Despite these challenges, project teams made good progress during the year. For example, Professor Gail ter Haar's research **combining viruses and ultrasound to target pancreatic cancer tumours** identified optimal precision and safety parameters for this method.

When labs were closed, our new virtual ways of working enabled Mr Soing Seng Liao and his team to use software to analyse data from pancreatic cancer patients, in collaboration with the **Genome Institute in Singapore**, to confirm their previous findings.



↑ Stela - one of our new Future Leaders at the University of Cambridge

Surgery is the most effective treatment for pancreatic cancer. In 2020/21 we started working with **The Association of Surgeons of Great Britain and Ireland** to advance the pancreatic cancer expertise of two trainee surgeons. John Moir and John Isherwood will visit centres of excellence in the US and Europe, to learn state-of-the-art surgical techniques and patient management approaches, to **improve the effectiveness and availability of best practice pancreatic cancer surgery** in the UK. This year we contributed nearly £3,000 to two individuals under this scheme.

We also awarded a small grant of £140 to HPB Specialist Dietitian Mary Phillips to support her PhD studentship at the University of Surrey. The PhD is a long-term observational study to understand the complications that occur in patients who have had the Whipple's procedure, the most common type of surgery for pancreatic cancer, and how these impact on quality of life.

## Investing in the future

A major obstacle to progress for people with pancreatic cancer is that there simply aren't enough people researching this tough form of cancer. We need to train the professors of the future now, to develop better diagnosis and treatment for the future. Our **Future Leaders Academy** is doing just that, by attracting the highest calibre early career scientists into pancreatic cancer research, and providing them with mentoring, training and state-of-the-art facilities to help them **transform the future of this field**.

Building on the success of our Future Leaders Academy at **Glasgow's Beatson Institute for Cancer Research** and a funding decision last year, research started at our second academy at **the University of Cambridge**.

We're funding and supporting **five PhD students** who are focusing on areas including immunotherapy and finding potential ways to reverse the development of pancreatic cancer.

This academy has been made possible because of the wonderful **generosity of the Ellis Family**, in memory of Lesley Ellis. Lesley passed away on 20 June 2019, peacefully at home, surrounded by family, after a short but brave fight with pancreatic cancer. She was just 59. Like us, the Ellis family wish to support our Future Leaders to build their career in pancreatic cancer research and help make the breakthroughs that are so desperately needed.

## Led by people with pancreatic cancer

The whole purpose of our research programme is to improve outcomes for people living with pancreatic cancer. To ensure that people with pancreatic cancer are always at the heart of our work, the **228 members** of our growing **Research Involvement Network** share their personal experiences of pancreatic cancer to inform and guide our research.

Our research programme was **audited by the Association of Medical Research Charities (AMRC)** in 2020/21, confirming that our processes support the highest standards and quality in research funding. The review committee **commended our commitment to involving people affected by pancreatic cancer, and our transparency** in research decision making.



# Driving change in policy and practice

Objective

04

**Deliver an enhanced programme of targeted campaigning to drive significant change in health policy and NHS practice**

Treatment for pancreatic cancer can't wait. Even short delays can have devastating consequences. People with pancreatic cancer shouldn't be left behind but sadly, all too often, they are.

In 2020/21, our campaigning priority was to ensure that people with pancreatic cancer received the medical support they needed despite the challenges of the pandemic.

As with all other areas of our work, we had to adapt our approaches in line with Covid-19 restrictions and the evolving needs of the pancreatic cancer community.

The vast majority of our policy and influencing activity during the year focused on our evidence-based **No Time to Wait** campaign, which exceeded all expectations.



**Over 62,100**

people signed our **No Time to Wait** petition



# NO TIME TO WAIT

In July 2020, we found that 60% of people affected by pancreatic cancer had had their treatment or care affected by the pandemic.

All 29 pancreatic cancer centres in the UK had reduced capacity for surgery in the first six weeks of the pandemic, with some centres seeing **delays of up to two months**.

To address this, we quickly launched No Time to Wait that same month. We asked people to sign our **petition to get people with pancreatic cancer off waiting lists**, and share how the pandemic was affecting them.

We used local and national data, and heart-breaking personal stories, to **urge decision makers in all four UK nations to prioritise pancreatic cancer** after the pandemic.

We asked all **36 NHS bodies in the UK** for their plans to restore pancreatic cancer services, and shared local supporter numbers and their personal stories to highlight why action was so important and urgent.

This tailored approach was extremely effective – **89%** of NHS bodies shared their plans with us.

- 796 supporters of our No Time to Wait campaign wrote to their government representative, demanding urgent change for people with pancreatic cancer
- 32 of the UK's 36 NHS bodies shared their post-pandemic pancreatic cancer plans with us, as a result of our campaign
- Our supporters took over 300 e-actions during Pancreatic Cancer Awareness Month, to increase understanding of the disease

This gained us a place on the **NHS England National Cancer Recovery Taskforce** to represent people with pancreatic cancer in its national recovery plan. We had productive discussions with **all three cancer networks in Scotland**, including the Scottish Hepato Pancreato Biliary (HPB) Network, which we collaborated with to develop a patient information leaflet for a pilot project in Fife.

We also secured a meeting with **Cancer Minister Jo Churchill**, to improve treatment for people with pancreatic cancer. We will **continue to use our voice to urge positive change** in Wales and Northern Ireland.



# 32

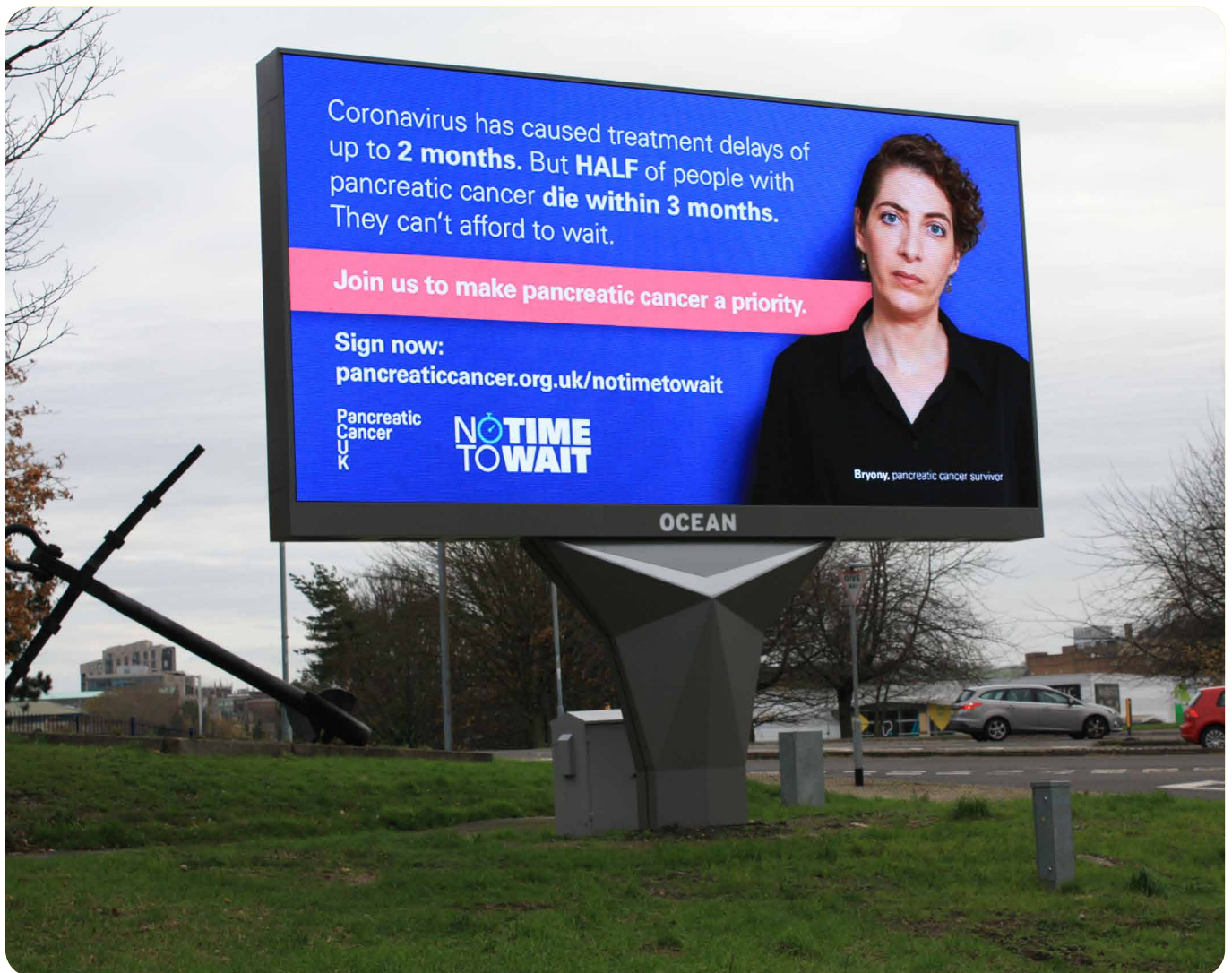
of the **UK's 36 NHS bodies** shared their post-pandemic pancreatic cancer plans with us, as a result of our campaign



## Supporters of our No Time to Wait campaign

# 796

wrote to their **government representative**, demanding urgent change for people with pancreatic cancer



↑ Our Outdoor advertising campaign in Southampton



## Responding to the pandemic

We launched our No Time to Wait campaign because of the experiences of people affected by pancreatic cancer across the UK during the pandemic.



My brother-in-law is dying from pancreatic cancer, and through Covid has been denied chemotherapy.

– Anonymous



My friend's cancer treatment was delayed by two months at the start of lockdown. I'm attending his funeral on Friday. Could starting his treatment earlier have allowed him to see his daughter's first birthday?"

– Anonymous



My dad was diagnosed with pancreatic cancer in February. His treatment was due to start in March but didn't happen due to Covid-19. He died in May having had only palliative care in his last weeks.

– Lisa Evans from Gwent



My sister died in May 2020, within a month of being admitted to hospital. Her appointment was delayed because of Covid-19. Had she had an appointment earlier, she would have been diagnosed with pancreatic cancer earlier and lived for longer. It has been devastating to lose her so quickly."

Joanne from Belfast



//

Pancreatic patients, at the moment, are being made to wait. For some people that's months of waiting...

CASE STUDY



## Bryony from Bristol

Bryony was diagnosed with pancreatic cancer in late 2019. She and her husband have a nine-year-old daughter.

Bryony quickly had a life-saving operation but knows that many others aren't so fortunate. That's why she supported our No Time to Wait campaign, calling on all UK health bodies to prioritise people with pancreatic cancer.

"Pancreatic patients, at the moment, are being made to wait. For some people that's months of waiting, and those might be the only months they have left.

My operation ended up being a 12-hour operation. My tumour had started to wrap round my artery. If there had been any delay, I would not have been operable [and] I don't think I'd be here today.

We've seen the government do amazing things to save people's lives during Covid. All we're asking is that they do the same for people with pancreatic cancer. Time, with pancreatic cancer, is the biggest killer."

## Influencing policy and practice around the UK

Much of our influencing work in 2020/21 focused on following up on No Time to Wait to ensure that UK-wide government and NHS policymakers meet the needs of people with pancreatic cancer after the pandemic. We also **strengthened relationships** with high-level representatives, and organisations and coalitions concerned with cancer care, **in all four nations of the UK.**

We influenced the **One Cancer Voice coalition's 12-Point Plan** for recovering and restoring cancer services in England, and the equivalent **10 Point Plan** in Scotland.

To ensure that the voices of people affected by pancreatic cancer are heard, we continued to sit on the **NHS England Cancer Charity Forum** and increased our involvement in the **All-Party Parliamentary Group on Cancer.**

In May 2020, we responded to the Health and Social Care Select Committee inquiry

on cancer raising awareness of the issues faced by pancreatic cancer patients during the first wave of the pandemic.

In **Scotland**, we contributed to the **Cross Party Group on Cancer report on the impact of Covid-19** on cancer services and patients. This will inform future cross-party activity, including the agenda and workplan for the **Scottish Cancer Conference.**

As part of the **Scottish Cancer Coalition** we helped develop information and services, including a Covid hub. We collaborated with **NHS Inform** and the **Scottish Services Directory** to ensure that people with pancreatic cancer can access timely information and support.

We also held meetings with government colleagues on plans to introduce **Rapid Diagnostic Clinics** as part of the **NHS Scotland Recovery Plan.** We **met with MSPs** Willie Coffey, Brian Whittle, John Scott and Gordon Lindhurst to help drive positive action for people affected by pancreatic cancer.



↑ Scottish Parliament

Clare Adamson MSP led the **Pancreatic Cancer Awareness Month members' debate** in Holyrood, highlighting the limited progress in pancreatic cancer outcomes in recent decades, and the importance of symptom awareness, early diagnosis and more investment in research to change this. Speakers in the debate also commended the work of Pancreatic Cancer UK and our dedicated supporters.

Our work in **Northern Ireland** demonstrates the long-term impact of our policy and influencing work. As a member of the **All Party Group on Cancer** and three of the **working groups writing the national 10 year cancer strategy**, we're helping to put pancreatic cancer on the map and drive the future of Northern Ireland's cancer services.



We will continue to use our voice to urge positive change in Wales and Northern Ireland.

### Our supporters took over

300

e-actions during **Pancreatic Cancer Awareness Month**, to increase understanding of the disease



We collaborated with NHS Inform and the Scottish Services Directory to ensure that people with pancreatic cancer can access timely information and support.







# Reaching new heights

Objective

05

**Aim to raise £10 million sustainable income year on year by 2022**

Despite pandemic challenges, we raised an amazing **£8.1m** in 2020/21 as a result of incredible support right across the pancreatic cancer community. **Thank you all for helping us to raise more than ever to help take on pancreatic cancer.**

We had to be agile and innovative so we could continue to provide our essential services and research funding. We quickly produced fundraising appeals and funding applications, developed digital alternatives to in-person events and trialled new ways of generating funds. We also launched the **Pancreatic Cancer UK Weekly Lottery**, giving people the opportunity to support our work whilst being in with a chance to win prizes up to £25,000.

- We were 1 of just 6 charities to raise £1m from a single Facebook fundraising challenge
- 510 people took part in The Big Step Forward, our new walking event for 2020 and 926 people got involved in Challenge 24 at Home
- We raised £200,000 from our DoubleDonations.DoubleSurvival appeal which was doubled by generous donors.
- Our virtual events raised an incredible £2.2m.

For every **£1** donated



**78p** is spent on supporting people affected by pancreatic cancer now and transforming the future

**22p** is spent on making the next **£1**

## Community and events fundraising

When fundraising events had to be cancelled, we rapidly transitioned to organising virtual events. Our virtual events included **Facebook fundraising challenges**, as well as **The Big Step Forward** and **Challenge 24 at Home**, and our **Take It On campaign** during our most successful **Pancreatic Cancer Awareness Month** ever.

We had a fantastic month last November with our **Take It On** campaign for Pancreatic Cancer Awareness Month. It was an incredible few weeks when 2,000 amazing **Take It On** heroes signed up to **Challenge 24**, our gaming initiative **Game On**, the freestyle **Do Your Own Thing** or **Stand Out**, adapting their appearance to take a stand against pancreatic cancer.

## Individual, in memory and legacy giving

Our **DoubleDonations.DoubleSurvival** campaign was a triumph. Incredibly generous anonymous philanthropists matched **4,917** people's online and direct mail donations to help us take on pancreatic cancer. Supporters also donated towards our work as part of our **No Time to Wait** raising over £100,000. (see page 27).

We launched **Together in Memory**, our online tribute platform to help families and friends share photos and memories about their loved ones. By April 2021 our supporters' **tribute funds** raised an incredible **£140,000**.

This year, more people than ever supported us by leaving a gift in their Will, helping us to fund vital research. Our **Remember a Charity** week campaign led to many generous pledges. We're grateful for each and every one.



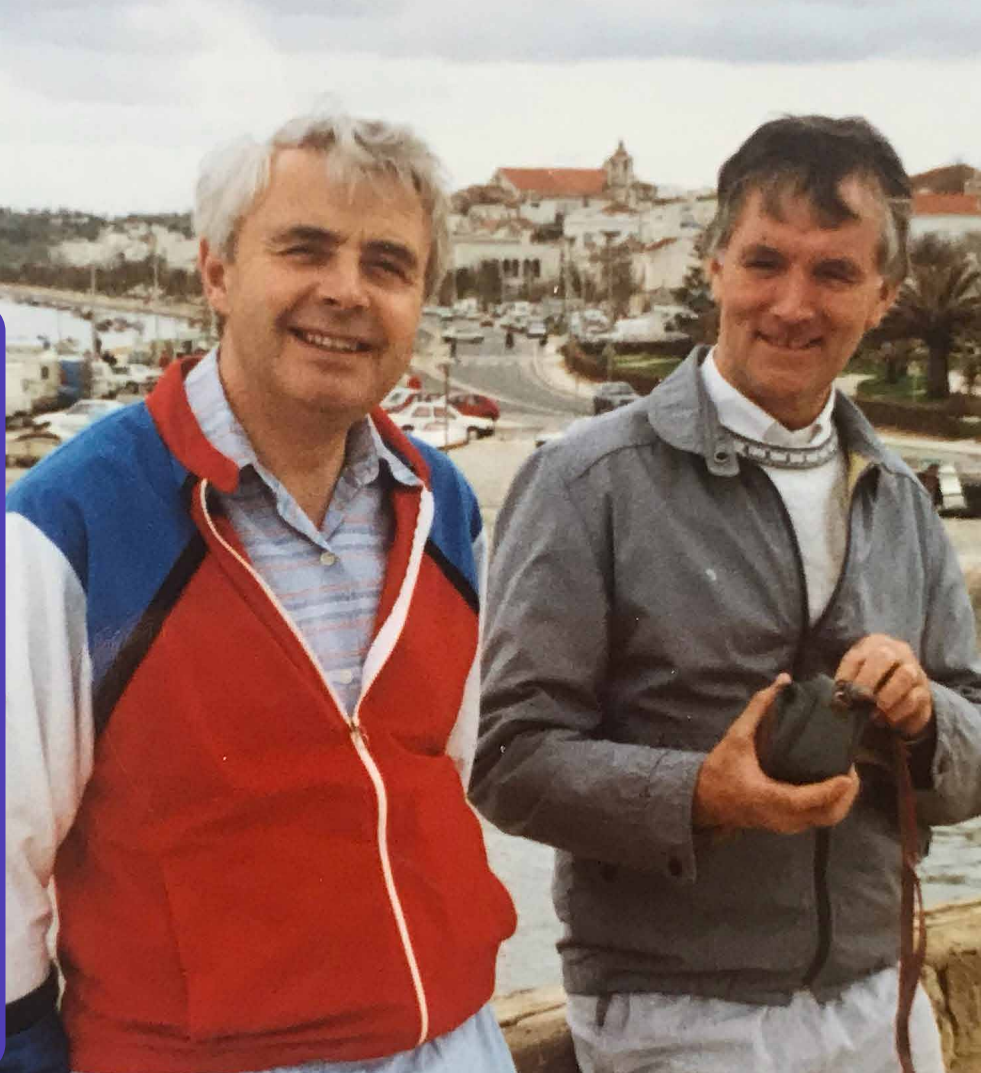
I took on 24 different activities for 24 days in honour of my beautiful Mum, Elise, who we lost last year. My challenges were set by friends and family, who know how to push me out of my comfort zone – walking up and down a ridiculously steep hill or dancing alongside a van. I raised £6,821 and I'm blown away!

Danielle from Sussex, who took on our Challenge 24 fundraising initiative





Life will never be the same but I have found some comfort from trying to prevent others from facing this heartbreak.



#### CASE STUDY



## Terence from Worcestershire

Terence lost his sister Gillian and David, his life partner and soulmate, to pancreatic cancer. Despite his devastation, supporting our work and pledging to leave us a gift in his Will has helped Terence to grieve and build hope. In recognition of this, Terence won our 2020 Inspirational Influencer Star award.

“Pancreatic cancer took the two people I loved most. Life will never be the same but I have found some comfort from trying to prevent others from facing this heartbreak.

Gillian died just three days after her diagnosis. I don’t know how I would have coped without David by my side. David died three weeks after he was diagnosed. I felt helpless and adrift but the more I learned about Pancreatic Cancer UK’s research, the more hopeful I felt about the future.

I hope the gift in my Will goes on to save others from suffering the way Gillian and David did – and prevent other families from being torn apart.”





↑ Rakesh Sharma at the Big Step Forward

## Philanthropy, trusts & foundations, and corporate partners

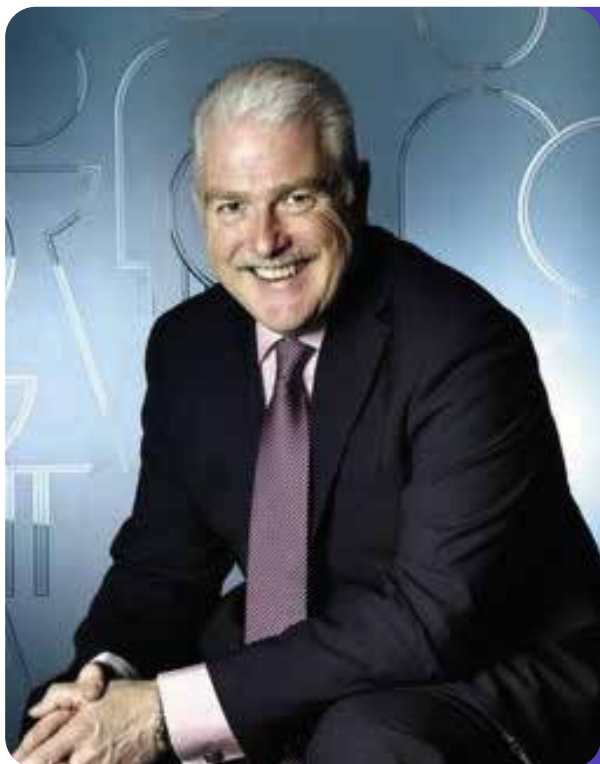
Thank you to all our wonderful **major donors** who continued to support our work in 2020/21. We're deeply grateful to the Ellis family, for their significant commitment to our research programme, in memory of Lesley. And we appreciate all of the **generous philanthropists** who supported our DoubleDonations.DoubleSurvival appeal.

A heartfelt thanks to our **ambassadors** and members of our **Development Fund Board**, who use their time, knowledge and contacts to help us access sustainable income sources. Special thanks to Robin Phillips, Stuart and Trish Fletcher, Remony and Grahame Millwater, Deborah Brown and Robert Ware, David Lewis, Alison Mackintosh,

Keith Porritt, Simon Lewis OBE, Marion Pughe-Morgan, and Jonathan Harper and his colleagues at Spencer Stuart.



↑ Lesley Ellis



We've lost friends, family and colleagues to this devastating disease. I lost my father. We're astounded, inspired and moved by the generosity of our donors, who have elevated our fundraising beyond what we could have imagined. With how threatened cancer research funding is now, we know how vital these funds are.

Stuart from Buckinghamshire, a Trustee and a member of our Development Fund Board

Former Development Fund Board Chair Simon Collins, alongside current Board members Jonathan and Stuart, took on the **Yorkshire Three Peaks Challenge** to support our work. Their team of nine, including Dame Inga Beale DBE, Frank Birkel,

Richard Chalmers, Chris Copeland, Andrew Hogan and Roger Saller, raised a phenomenal **£425,000**. Huge thanks to the whole team, and the 1,000 people who supported their efforts.



↑ Yorkshire Three Peaks Challenge







# £425,000

raised at the Yorkshire  
Three Peaks Challenge

Thank you to all of the **charitable trusts and foundations** that helped us progress our research programmes and support services. We're grateful to **Oak Foundation** for its long-term support of our research and data intelligence teams.

We appreciate **The Steel Charitable Trust's** grant towards our Early Diagnosis Research Alliance, and the donations from **Barclays UK Covid-19 Community Relief Fund** and **the Coronavirus Community Support Fund** towards our Support Line.

An amazing **110 organisations** took on workplace fundraising, sponsored events and sporting tournaments to benefit people affected by pancreatic cancer. We particularly thank our friends at the **Bank of England** for raising a fantastic **£126,000**.

Thank you to **Scotmid Co-operative** for their support of our Future Leaders Academy in Glasgow. And huge thanks to **Clarke Willmott, Greenwoods GRM and Gardner Leader**, who extended their support in response to the pandemic.

Thanks also to our industry partners **Angiodynamics, Astra Zeneca, Bristol-Myers Squibb, Elekta, Erytech, Oncosil** and **Viatis** for ensuring we can be there for people living with pancreatic cancer. Thank you also to our pro-bono partners **White & Case** and **Slaughter and May** for their ongoing support and commitment.

# Leading pancreatic cancer in the UK

## Objective

### 06

## Continue to be the UK's leading specialist pancreatic cancer organisation

As the UK's leading specialist pancreatic cancer organisation, **we're uniquely placed to bring together the pancreatic cancer community** to drive positive change. We're the only pancreatic cancer charity that sits on various national cancer strategy and recovery plan taskforces. This recognises our expertise and achievements, and increases our influence.

We equip individuals and organisations to achieve as much as possible for people affected by pancreatic cancer, by **raising awareness, pressing for change, and influencing research, policy and clinical practice.**

This was more important than ever last year, as the pandemic set back pancreatic cancer research, treatment and care. During the year, we were agile and embraced new ways of working to fulfil our leading role.

- Our Annual Summit sessions attracted **357** individuals, compared to **253** in 2019
- The Less Survivable Cancers Taskforce report on how to improve early diagnosis for these cancers attracted media coverage with an audience of **4.6 million** people
- The Less Survivable Cancers Taskforce survey findings reached **7 million** people, highlighting a lack of symptom awareness and helping to increase knowledge

# 99%



of participants rated our **Annual Summit online sessions** on **Improving Access to Chemotherapy and Optimal Nutritional Care** as excellent or good



## Bringing the pancreatic cancer community together

Our **Annual Summit** is a wonderful opportunity to bring together representatives from the whole pancreatic cancer community, to share research updates, treatment developments and policy plans. Participants range from health professionals and

researchers to policy makers and people living with pancreatic cancer. The pandemic meant that our in-person event - **Improving Outcomes Now** - scheduled for March 2020 switched to an online event in September. While this delay was disappointing, holding the event online enabled us to reach more people than usual.

We reconfigured the event to three online sessions, which focused on **improving access to chemotherapy** and **optimal nutritional care**, and **improving the pathway from diagnosis to treatment**. The sessions shared examples of good practice that will improve outcomes for people with pancreatic cancer. This attracted an unprecedented **558 delegates** from a broader geographical area than before. Attendees highly rated the sessions. Crucially, many professional delegates **made specific pledges to improve their approach** as a result of the event.



↑ Some of the speakers at our Annual Summit



//

The wish to move forward our patients' care remains central to our work.

#### CASE STUDY



### Anya from Edinburgh

Anya Adair is Clinical Lead of The Scottish HepatoPancreatoBiliary (HPB) Network and Consultant HPB/Transplant Consultant at the Royal Infirmary, Edinburgh.

Last year, she joined the Less Survivable Cancers Taskforce and worked with us to engage the Scottish Government in tackling less survivable cancers in its Cancer Recovery Plan.

"The wish to move forward our patients' care remains central to our work. Joining the taskforce has enabled us to highlight common goals and concerns of less survivable cancers, including pancreatic cancer.

The SHPBN has secured funding from the Scottish Government to improve the pathways of both pancreatic and primary hepatocellular [pancreatic and liver] cancer for all patients across Scotland. Pancreatic Cancer UK's participation in this exciting project will be critical in representing pancreatic cancer patients and their families."

## Collaborative working for greater impact

Recognising that we're stronger together, we're an active member of **multiple cancer coalitions** to make sure that people affected by pancreatic cancer aren't overlooked.



Anna Jewell

Our Director of Research, Anna Jewell, continued to chair the **Less Survivable Cancers Taskforce**. Working with this taskforce, we held three round table events in 2020/21 with representatives from the Scottish Government, patient groups and clinicians, directly influencing the **Scottish Cancer Recovery Plan**. As part of the taskforce and in partnership with **Guts UK**, we attended a meeting with the **Cancer Policy Team in Northern Ireland** to influence the 10 year cancer strategy that launches in 2021.

The post-Covid **Scottish Cancer Recovery Plan** represents a significant policy victory for Pancreatic Cancer UK and the Less Survivable Cancers Taskforce. Its proposals include **service improvements for pancreatic cancer** and other less survivable cancers. For pancreatic cancer, this includes GP access to CT scans, the pilot of Early Cancer Diagnostic Centres, national Clinical Management guidelines and a redesign of pancreatic cancer pathways – a huge step forward. As a key partner in the delivery of this plan, we continue to ensure its commitments become reality.

The people of Wales need a long-term cancer strategy. Welsh pancreatic cancer survival rates are some of the worst in the world. We welcomed the **Welsh Cancer Quality Statement** and **Cancer Recovery Plan** but believe they don't go far enough for people affected by pancreatic cancer. So we **pressed the Welsh Government** to prioritise clinical trials, early and rapid diagnosis and increasing the country's number of cancer specialists.

As a member of the **NHS England Cancer Recovery Taskforce** we're contributing to a **National Cancer Recovery Plan**. Specifically, we want this to include urgently restarting clinical trials for pancreatic cancer treatments, published data for each cancer type and better communication with patients.



I attended all three sessions and found them really interesting and positive in terms of developments in management and care. As well as being a specialist cancer nurse my father died from pancreatic cancer, so I have seen it from both sides. Pancreatic Cancer UK has managed to balance the needs of both really well."

A professional delegate at our online Annual Summit



# Stronger together

## Objective

# 07

**To increase engagement in the charity and our activities.**

The growing community of people who care about pancreatic cancer helps us to take on this tough disease. We're stronger together.

Our engagement work in 2020/21 was entirely digital because of the pandemic. Despite this challenge, we increased interest and involvement in our work. **Thank you to all of the inspiring people who supported our work** in various ways during the year.

- We secured media coverage with a potential audience of **173 million** people – **500,000** more than in 2019/20
- Our website received over **1.5 million** visits in its first six months, doubling our previous traffic

## **Community engagement across the UK**

In the past, our brilliant community co-ordinators built regional awareness of pancreatic cancer and engagement in our work by travelling to different areas.

# 60,667

**new supporters and/or campaigners joined us in 2020/21**



Unfortunately, the pandemic forced us to rethink this. We pivoted to **local, volunteer-led engagement activity across the UK.**

We reframed our volunteering programme to increase our reach and representation, particularly in Scotland, Wales and Northern Ireland. We started developing a **UK-wide volunteering network**, starting with **Team Scotland**. This approach **builds on the invaluable work that our volunteers already do** via hospital information points and fundraising activities. We will empower our volunteers to support our influencing work as well as raise awareness and funds.

Working with our wonderful supporters in this way will help us reach everyone affected by pancreatic cancer, wherever they are. But it's also important to ensure that we and our work are inclusive and welcoming to everyone, no matter who they are, and to gain



Our social media channels attracted

**1.6 million**

likes, comments and shares

understanding of who we are reaching and, crucially, who we are not. The pandemic has underlined inequalities in outcomes and social determinants of health, which we will ensure we address in the context of pancreatic cancer in our services and influencing work?

## **Pancreatic Cancer UK Star Awards**

Even a pandemic couldn't stop us from celebrating the incredible support and commitment of our supporters through our **Pancreatic Cancer UK Star Awards**. These awards recognise exceptional contributions to improving the lives of people who face this tough disease, by raising much-needed funds, spreading awareness or facilitating life-changing research. Congratulations to all of our winners.

In 2020, we received more nominations than ever, which were truly inspiring. We're hugely grateful to have **supporters who work tirelessly to improve outcomes for people** affected by pancreatic cancer. We value every single contribution to our work, no matter how small.



↑ Graham Sturge Purple Star Award winner

## **Pancreatic Cancer Awareness Month**

The pancreatic cancer community worked in new ways during **Pancreatic Cancer Awareness Month** to shine a spotlight on the disease, showing how dedicated and inventive our amazing supporters are.



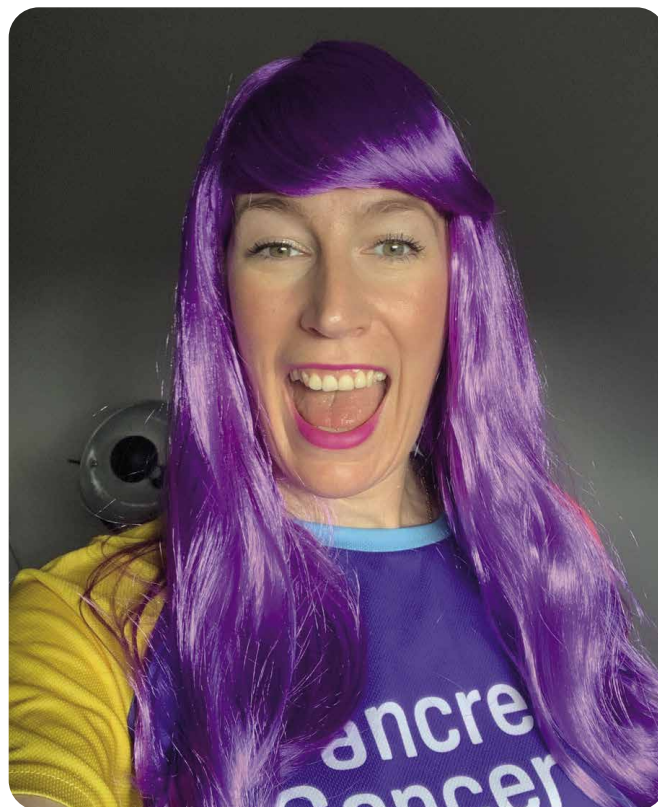
↑ Lands End Surgery in Preston taking part in Pancreatic Cancer Awareness Month

Instead of our usual Parliamentary activity and community events, people came together online to increase knowledge of the disease and how we can tackle it together.

On **social media**, we increased both our followers and engagement during the month. During November, **22 supportive MPs** also used their social media channels to raise awareness of our work. And **175** landmarks and homes across the UK glowed in purple on **World Pancreatic Cancer Day**, including Tower 42 and St Pancr(e)as station in London, City Hall in Cardiff, Edinburgh Castle, and Victoria Square, Belfast. As ever, this was a beautiful and moving way to highlight the disease and its impact.

This **awareness helps people to act on potential pancreatic cancer symptoms** and access the early treatment that can save lives. It also drives donations to fund our research programme, and our information and support services for people affected by this

tough disease. In 2020/21, this fundraising surpassed all expectations. We're delighted that this will increase our future impact.





The considerable media coverage we secure amplifies the voices of people affected by pancreatic cancer, and we're enormously grateful to everyone who shared their experiences in the media.

### ↑ Increasing our digital reach

In 2020/21, we overhauled our **digital engagement** tools to better support people affected by pancreatic cancer.

Our six-strong **Patient and Carer Advisory Board** continued to use their experience of pancreatic cancer to help steer our work in invaluable ways, such as helping us redesign our website. This **new website** is better able to immediately support people affected by pancreatic cancer. It also showcases the

research we fund, our campaigns and is an increasingly important fundraising tool.

Our online **social media** presence grew by **13%** from 2019/20. We developed a new email system to ensure our supporters receive the types of communication they want from us, and to measure our impact more effectively. This has resulted in increased click through rates.



↑ St Pancras station, lit purple on World Pancreatic Cancer Day

//

The way everyone came together to donate such a huge amount was a big lift.



#### CASE STUDY

### Adrian from Oban



Adrian was diagnosed with pancreatic cancer in May 2020. After chemotherapy, he had a gruelling operation to remove his pancreas and spleen. He was supported by his wife Angela, medical team and our specialist nurses.

Adrian's friends set up a 24-hour relay to raise funds as part of The Big Step Forward 2020. Thanks to overwhelming local backing, the team raised over £6,000.

"I have received so much support from Pancreatic Cancer UK, so it feels fantastic to help them continue their wonderful work. The way everyone came together to donate such a huge amount was a big lift. It really helped my mental health.

I'll be taking part in the Big Step Forward 2021. This, combined with taking on a role on their Patient and Carer Advisory Board [from May 2021], will ensure I continue to support Pancreatic Cancer UK in every way I can."



## Media coverage and high-profile support

The considerable media coverage we secure **amplifies the voices of people affected by pancreatic cancer**, and we're enormously grateful to everyone who shared their experiences in the media. Their compelling interviews with ITV News, The Daily Telegraph, LBC Radio and other media outlets highlighted why pancreatic cancer must be prioritised.

We spoke in the national media on a series of promising research findings, notably a large NHS England trial for a cancer blood test. Our **spokespeople featured prominently** across the BBC, Channel 5, HuffPost, the Sun and other media channels, explaining what improvements in early diagnosis could mean for people with pancreatic cancer.

During **Pancreatic Cancer Awareness Month**, we ensured this tough cancer featured in the UK-wide news agenda. We received **268 pieces of media coverage** – 27% more than in 2019/20 – in local, national, online, print and broadcast media.

Our **celebrity ambassadors**, including actor **Olivia Williams** and Radio 1 DJ **Ben Mundy** make a huge difference to our work. These ambassadors generously give their time, and use their profile and influence, to help us reach more people. **Thank you.**

In early 2021, broadcaster, comedian, actor and writer **Adil Ray** and Love Island star **Shaughna Phillips** helped to bolster our DoubleDonations.DoubleSurvival campaign via their impactful personal video messages shared on social media.



↑ Olivia Williams with pancreatic cancer researchers at Royal Free Hospital in 2019

# Looking ahead

2020/21 marked the end of a five-year strategy period for Pancreatic Cancer UK

As a result of the disruption and uncertainties caused by the global pandemic, we developed a two-year plan to steer our work from 2021–23.

This short-term plan builds on our success to date while laying the foundations of our new organisational strategy. This is designed to ensure we can deliver our 2030 goals:

- Making UK pancreatic cancer survival rates the best in the world
- Ensuring that everyone affected by pancreatic cancer will have a better quality of life



## Our goals for 2021-2023

### 1. To bring about critical breakthroughs in early diagnosis and treatment research

The best way for us to improve survival for people with pancreatic cancer in the long term is to increase the volume of research into the disease. **So we'll increase our research funding of world-class, innovative investigations to transform outcomes for people with this tough disease.** This has never been so important, as many cancer research funders are scaling back their support or pivoting to other areas.

- We'll invest further in our **Early Diagnosis Research Alliance**, a ground-breaking alliance of leading scientists who are on the cusp of finding a simple test to detect pancreatic cancer earlier
- We'll continue supporting our Future **Leaders' Academies** and **Research Innovation Fund** to develop innovative ways to diagnose and treat pancreatic cancer, now and in the years to come
- And we'll invest in tools to **better collect and understand patient data**

## 2. To transform care, everywhere

As the **only charity focused on driving improvement in pancreatic cancer care**, we're in a unique position to work with the pancreatic cancer community to **improve standards so that more people survive longer and live well** in the time they have left. So we'll create an **optimal care pathway** for pancreatic cancer.

- We'll influence the rollout of **NHS Rapid Diagnostic Centres**, to speed up and improve diagnosis
- We'll continue to **push for the NHS to implement national targets** to make sure people with pancreatic cancer are prescribed Pancreatic Enzyme Replacement Therapy
- We'll work with healthcare professionals to **standardise best practice**
- And we'll **campaign and lobby** to influence change

## 3. To increase access to, and engagement with, our services

The digital shift during the pandemic has opened up **new ways to reach people and give them the support they need**, whenever and wherever they want. So we'll seize new digital opportunities.

- We'll **re-design our services**, helping people with shared experiences to come together in digital ways
- We'll create a **digital hub for health professionals**, giving them greater access to training and support
- And we'll use **digital channels** to make sure more people know about the support we can provide

## 4. To reposition our organisation to best support breakthroughs in pancreatic cancer

We want to be an even better catalyst for the breakthroughs pancreatic cancer desperately needs. So **we'll equip ourselves to create and accelerate change**.

This is an exciting and ambitious period as we build on the unprecedented success of 2020/21. We'll continue to use data insights and digital tools, and apply our knowledge, commitment and creativity, to make the **biggest impact possible** on the lives of everyone in the UK who is affected by pancreatic cancer.

- We'll continue to **build sustainable income**, finding new ways to reach and engage supporters
- We'll implement **lean and efficient processes**, and develop our use of data
- And we'll **grow our presence across the UK** through local volunteering

# Structure, Governance and Management



## Organisational structure

The organisation is a charitable company limited by guarantee, incorporated on 19th December 2005 and registered as a charity on 13th January 2006. The company was established under a Memorandum of Association which established the powers and objects of the charitable company and is governed under its Articles of Association of the same date.

The directors of the company are also charity trustees for the purpose of charity law and under the company's Articles are empowered to manage the business of the company.

The Board comprises 14 Trustees, who are also directors of the company, including one co-opted Trustee. The Trustees who served during the period and to the date of signing this report are listed on page 90. The Board meets 4 times a year and also holds an Annual General Meeting once a year. The Trustee Board takes overall responsibility for ensuring that the financial, legal and contractual responsibilities of the charity are met, and that there are satisfactory systems of financial and other controls. All decisions are currently ratified by the Board.

Each year Trustees undertake a board effectiveness self-assessment. Since 2018 this assessment has been based on standards informed by the Nolan Principles of Public Life: selflessness, integrity, objectivity, accountability, openness, honesty and leadership and the Charity Governance Code.

The charity has a Scientific Advisory Board (SAB) that helps direct the work of the charity by providing expert advice to the Chief Executive Officer (CEO) and Trustees on:

- Development of the charity's research strategy and grant giving programme
- External referees for applications ('peer reviews')
- Assessment of and final recommendations on applications

The SAB also provides advice and support for the charity on reporting and dissemination of research results.

The day to day management of the charity is delegated to the CEO who works with the Senior Management Team; Anna Jewell, Director of Services, Research and Influencing, Sue Collins, Director of Fundraising, Marketing and Communications, and Angela Davis, Director of Finance and Corporate Services, along with a team of staff to fulfil the charity's objectives.

Up to four Trustees, including the Chair and Treasurer, are appointed to the Finance Risk and Planning Sub-committee which reviews the charity's financial and audit reports, budgets and plans on a quarterly basis ahead of making recommendations to the full Board. This committee is also responsible for ensuring the charity's risks are effectively managed and that the charity is compliant with all relevant regulations.



The Trustees also have a Remuneration Sub-committee which annually assesses staff salaries against the charity's approved Pay Policy. The Pay Policy is currently under comprehensive review, and was last reviewed in 2019.

## **Trustee induction and development**

All new full and co-opted Trustees are inducted by the CEO and the current Board in line with the charity's induction policy, and in June 2021 six new Trustees were appointed. All Trustees are encouraged to request development and training on any issues relevant to their position in the organisation. Over the course of 2020/21 Trustees have continued to support work on specific areas, including our Development Fund Board and have worked closely with and in support of the Senior Leadership Team as the charity has navigated the challenges of the Covid-19 pandemic.

## **Risk statement**

The Trustees have considered the major risks to which the charity may be exposed. Specific risks that the charity faces are:

- a) that our comments or opinions might be understood to be offering medical or other advice which we are not qualified to provide. The charity notes that it does not and cannot offer "advice" and therefore takes extreme care with the language used in its communications, most especially on its website to avoid any possible misunderstanding in this regard.
- b) that we might choose to allocate funds to programmes of work that are unlikely to succeed or are, at worst, fraudulent. The charity has established a Scientific Advisory Board whose advice will always be sought on significant research expenditure.
- c) that we may not meet our annual income targets and not be able to resource our planned activities. To this end the Charity develops an annual budget in support of its operational plan which is approved by Trustees. This forms the basis for financial monitoring. Management accounts and financial forecasts are reviewed monthly by the Treasurer and Chair, and accounts are reviewed by the Finance Risk and Planning Committee ahead of the full board of Trustees on a quarterly basis. The Charity also holds sufficient reserves to off-set income risks.
- d) that we might lose key members of staff. The Board has a succession plan, and staff contracts ensure sufficient notice periods to allow recruitment and handover.
- e) that the impact on the economy from the Covid-19 pandemic will materially reduce the charity's annual income from 2021 onwards, and changes in working practice may adversely impact on staff health and wellbeing. The charity's budgeting and monitoring process in (c) above mitigates this risk, together with the charity's level of reserves. As part of planning to re-populate our offices post-Covid, staff wellbeing and working preferences are a major consideration, with the aim of providing a working environment and approach that is both supportive and productive.

The charity has a Risk Register which has been approved by the Board and is reviewed every three months. New or emerging risks are escalated to the Board as they are identified in the intervening periods.



## Public benefit

### Pages 8-49

The Trustees confirm that they have complied with the duty in section 17 of the Charities Act 2011 to have due regard to the public benefit guidance published by the Commission in determining the activities undertaken by the charity. The Trustees' Report sets out how the charity addresses the public benefit requirement, and this is also explicit in the Charity's Aim set out below.



## Charity's aim

Our vision for the future is a world where everyone with pancreatic cancer survives to live long and well. To do this, we lead the fight against pancreatic cancer. Pancreatic cancer is tough to diagnose, tough to treat, tough to research and tough to survive, and for too long this disease has been side-lined. We want to make sure that everyone affected by it gets the help they need.



**All Trustees are encouraged to request development and training on any issues relevant to their position**

- We provide expert, personalised support and information via our Support Line and through a range of publications
- We fund innovative research to find the breakthroughs that will change how we understand, diagnose and treat pancreatic cancer
- We campaign for change; for better care, treatment and research, and for pancreatic cancer to have the recognition it needs.

↑ June, a Jog 28 miles in February challenge participant







We review all of our fundraising campaigns to ensure they fully comply with the code



## Our approach to fundraising

As a supporter-focused charity, we recognise that the progress we make for people affected by pancreatic cancer would not be possible without our supporters' generosity and passion. That is why our Fundraising Promise remains at the heart of how we fundraise.

If you choose to support us, you can be certain that we will:

- **never put you under pressure to donate**
- be clear with you about our charity's aims and objectives
- respect your choices to opt in or out of our fundraising communications
- never share or sell your details to other charities or third parties for their own marketing purposes
- comply with all relevant data protection laws
- listen and learn – you can provide feedback about our fundraising at any time
- communicate with you in a way that suits you best

To read our Fundraising Promise in full, please visit <https://www.pancreaticcancer.org.uk/fundraising-and-events/our-fundraising-promise/>.

We are registered with the regulatory body for fundraising in the UK, the Fundraising Regulator, and pay an annual levy to support its work. We adhere to the standards outlined in the regulator's Code of Fundraising Practice (the code).

We fundraise in diverse ways and tell as many people as possible about our work. Our fundraising activities currently include direct mail, email direct marketing, sponsored running, challenge and community-led events, and cash collections. We also host fundraising gala dinners and other social activities.

We review all of our fundraising campaigns to ensure they fully comply with the code, do not place an unreasonable intrusion on anyone's privacy or put undue pressure on them to donate. Our fundraising activities are also closely monitored by our internal Finance Risk and Planning Committee, which reports to our Board of Trustees.

We work with carefully selected partners to deliver some fundraising activities. Before doing so, we ensure they are fully compliant with the code and all applicable laws, including those on data protection. We also monitor their activities through regular quality assurance checks to ensure they treat our supporters fairly and have the necessary safeguards in place to protect vulnerable people.

We encourage and learn from feedback from our supporters. In accordance with disclosure guidance from the Fundraising Regulator, we received 11 complaints relating to our fundraising activity in 2020/21.





## Our people and systems

Our organisation continues to grow steadily. We aim to ensure that the infrastructure that supports our work and governance remains fit for purpose, while retaining our positive attributes and aspiring to be a 'healthy organisation'.

Our headcount was 68 as of 31 March 2021, with 7 new hires during the year, and 5 staff were made redundant following re-structure.

Like many other organisations, during 2020, we made changes to staffing structures as a result of the impact of Covid-19. In addition, from April – October 2020, approximately a third of the workforce were furloughed at various times, ranging from one to several weeks at a time.

The whole workforce were required to work from home from March 2020 with a small number of staff returning to the office from November 2020. All staff working from home were supported with work station assessments and provision of appropriate office equipment. Regular communication in the form of newsletters and virtual social gatherings was provided and along with as much flexibility as needed to cope with events such as school closures, bereavements or long term physical impact of Covid.

A comprehensive review of our salary and benefits started in the year in the year and continues, with the aim of ensuring our remuneration system is fair, transparent and competitive.

As a consequence of the pandemic, our support functions were forced to adapt to 100% remote working in a short space of time which presented challenges in areas such as finance, which was still heavily reliant on paper based processes. In 2020/21 we continued to develop our IT infrastructure in the cloud, moving much of our network to SharePoint.



**In 2020/21 we continued to develop our IT infrastructure in the cloud, moving much of our network to Sharepoint.**

Work continued on structural changes to our relationship management database to enable us to better understand our supporter and service user needs. We continued work on our implementation of Sun Systems and developed our financial reporting, together with the implementation of a document management system to facilitate remote processing of accounts payable.

Although we had relocated our offices on 16th March 2020, the general lockdown meant that we had very little use of our new office during 2020/21, and consideration is now being given to adapting it to a new post-Covid working approach, to facilitate collaboration and flexible working.



# Financial Review 2020/2021

Total income for the year was **£8,631,062** (2019/20: **£6,506,230**).

Despite the significant challenges that impacted the sector from the pandemic, our fundraising teams were able to move swiftly to digital and virtual fundraising activities. This resulted in a record year in income, against expectations that we would lose up to 50% of our turnover due to cancelled events and community activities.

Even though we have increased our funds, we nevertheless still need to raise more income to substantially grow our future funding for pancreatic cancer research, and invest in building pancreatic cancer data and digital resources, to improve care and treatment of this terrible disease.

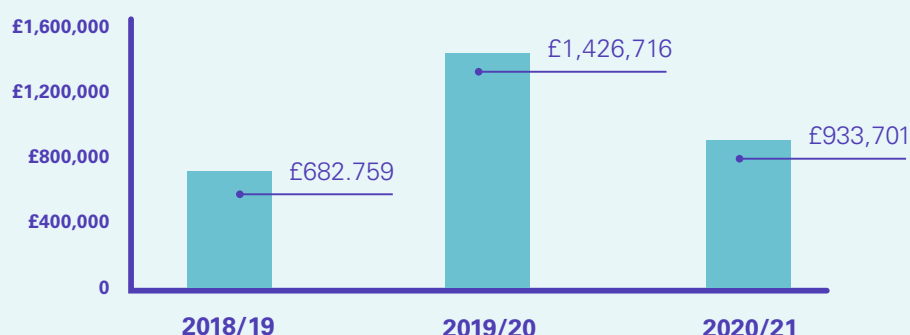
The charity received £20,285 from the Nicki's Smile Fund (2019/20: £2,848). This is a restricted fund set up in memory of Nicki Blake,

which is aimed at research into early diagnosis.

Costs of generating income were £2,284,272 for the year (2019/20: £1,784,947). We have been continuing to invest in building capacity and efficiency for longer term income growth and sustainability, although savings were secured in-year from the cancellation of major sporting events. These costs represented 27% of our total income for the year and 40% of our total expenditure.



## Research grant awards paid in cash



## Research grants

New grants are charged to the accounts in full at the date they are awarded, which is when the charity is committed to payment for the duration of the grant. During 2020/21, the charity awarded new grants amounting to £237,824 (2019/20 £834,311) and paid £933,701 (2019/20 £1,426,716) in cash in respect of grant awards made in 2019/20 and earlier. The charity has ongoing grant funding commitments of £2,048,306 shown as a creditor on our balance sheet, and has designated funds for future research projects amounting to over £1m per year. Expenditure on research in 2020/21 included costs of managing our research programme, including working with research institutions and other funders, gathering data, promoting grant investment opportunities, working with our Scientific Advisory Board, and co-ordinating reviews ahead of making grant awards for following years. Proposals for new grants undergo a robust process of review before being awarded, which can take over a year, and grant awards normally have a duration of 1-3 years.



**Proposals for new grants undergo a robust process of review before being awarded**



## Our services and support costs

In addition to providing vital research funding, we have also continued to invest in increasing the impact and effectiveness of our services, re-structuring our teams including strengthening our Nations and Volunteering team. We have extended the hours of our Support Line, we are increasing our campaigning and profile raising work and growing our information and support activities, the latter having moved to digital platforms as a result of the pandemic. This continues to broaden our reach and significantly increase the services we can provide for patients and carers, and the move to more digital based operation in the year has generated cost savings in such areas a meeting venue hire and travel. During the year, we spent £1,304,361 (2019/20 £1,738,543) on delivering our vital support and information services.



## Reserves

Total reserves at the beginning of 2020/21 were £3,060,260 (2019/20 £2,587,785) of which £45,947 were restricted reserves. At 31 March 2021, total reserves were £6,043,650 (2019/20 £3,060,261), of which £66,233 were held in restricted funds. Of the balance, the Trustees have designated a total of £3,905,935 to fund future research into the diagnosis and treatment of pancreatic cancer and fund strategic investment into pancreatic cancer data resources and digital services.

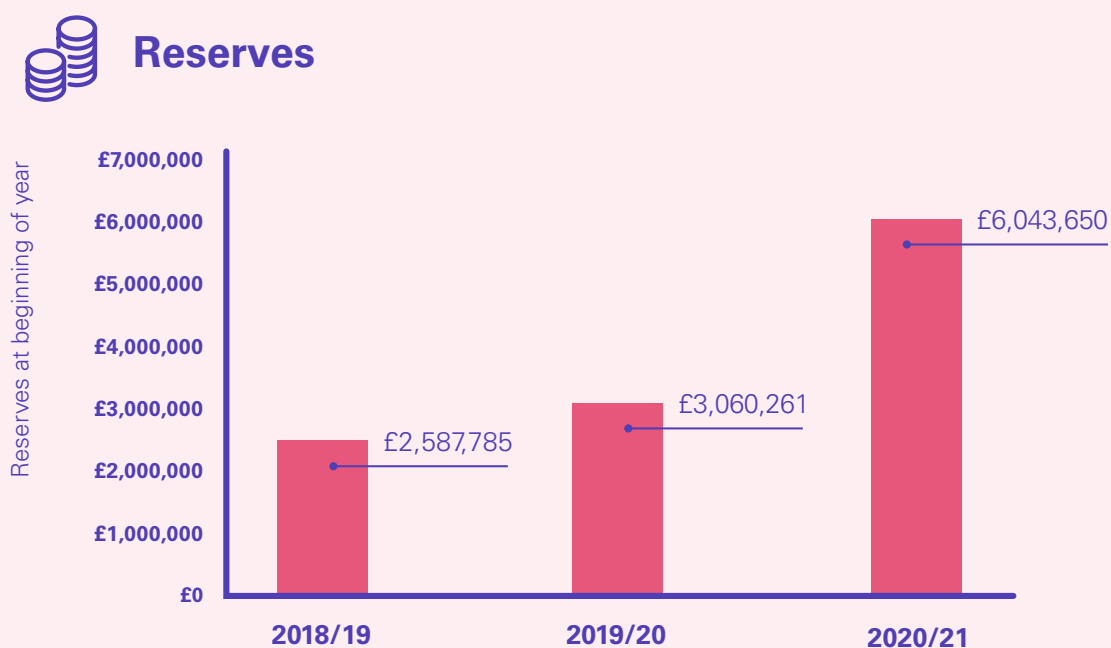
The Trustees undertook a review of the charity's reserves policy during the year and have determined a level of free reserves to be held sufficient to provide an operating cost contingency of £1,192,000 which would fund 3 months' salaries, 12 months' rent and approximately one month of all other costs.

Utilisation of the charity's reserves at 31st March 2021 is summarised below:

	£
<b>Restricted Funds</b>	<b>66,233</b>
Designated funds	3,905,935
Free Reserve:	
Operating contingency	1,192,000
Other	879,482
<b>Total Reserves</b>	<b>6,043,650</b>

£879,482 is held as a free reserve to underwrite risks in income generation in an uncertain post-Covid economic climate.

The Trustees continue to review the charity's reserves policy on an annual basis.







## Plans for the future

Since the launch of our 5-year strategy Taking it on Together in 2015/16, we have built capacity and seen significant growth in our campaigns and charitable activities, as well as having invested over **£8 million** in research. Our activities are having a tangible effect on pancreatic cancer and we are committed to continuing to deliver even more impact as we enter our next strategic phase.

We are operating in a challenging environment as a charity that is fully reliant on being able to raise voluntary income, made even more challenging now by the Covid-19 pandemic. However, beyond navigating through the aftermath of this crisis, our future plan continues to be growing income across our whole portfolio, with increased capacity and a focus on building sustained supporter relationships.

We will continue to grow our leadership role in the pancreatic cancer community and fight to make a positive impact on the outcomes for people with pancreatic cancer: through funding research into early diagnosis, care and treatment; by supporting people affected by pancreatic cancer with our Support Line and information; and by continuing to campaign and raise awareness.

We will not stop until every pancreatic cancer patient survives to live long and well.



## Responsibilities of the Trustees

The Trustees, who are also directors of Pancreatic Cancer UK for the purposes 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 and charity law requires the Trustees to prepare financial statements for each financial period which give a true and fair view of the state of affairs of the charitable company including income and expenditure, for that period. 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 judgments 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;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

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

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

The Trustees refer to the Charity Commission's guidance on public benefit when reviewing the charities aims and objectives and planning for the future.



The Trustees are responsible for the maintenance and integrity of the corporate and financial information



## Provision of information to auditors

Each of the persons who are Trustees at the time when this Trustees' Report is approved has confirmed that:

- there is no relevant audit information of which the 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.

**Signed** on behalf of the board of trustees by:

**Lynne Walker,**

Chair of Trustees

Dated: 7th October 2021







# Independent Auditor's Report

to the members and trustees of Pancreatic Cancer UK Limited

## Opinion

We have audited the financial statements of Pancreatic Cancer UK Limited for the year ended 31 March 2021 which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

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 the charitable company's net movement in funds, including the income and expenditure, 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 and the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 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 charitable company'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 trustees are responsible for the other information. The other information comprises the information included in the Trustees' Report and the Chair's and Chief Executive's statement. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement

in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

## Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the Trustees' Report (which includes the directors' report prepared for the purposes of company law) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the directors' report included within the Trustees' Report has been prepared in accordance with applicable legal requirements.

## Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report (which incorporates the directors' report).

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

- adequate accounting records have not been kept by the charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies' regime and take advantage of the small companies' exemptions in preparing the trustees' report and from the requirement to prepare a strategic report.

## **Responsibilities of trustees for the financial statements**

As explained more fully in the trustees' responsibilities statement (set out on pages 61 and 62) the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the 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**

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:

Based on our understanding of the charitable company and the environment in which it operates, we identified that the principal risks of non-compliance with laws and regulations related to charity and company law applicable in England and Wales, and we considered the extent to which non-compliance might have a material effect on the financial statements. We

also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as the Companies Act 2006, the Charities Act 2011, fundraising regulations and payroll taxes.

We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls), and determined that the principal risks were related to income recognition. Audit procedures performed by the engagement team included:

- Discussions with management including consideration of known or suspected instances of non-compliance with laws and regulation and fraud;
- Reviewing the controls and procedures of the charitable company relevant to the preparation of the financial statements to ensure these were in place throughout the year, including during the Covid-19 remote working period;
- Evaluating management's controls designed to prevent and detect irregularities;
- Identifying and testing journals, in particular journal entries posted with unusual account combinations, postings by unusual users or with unusual descriptions;
- Reviewing correspondence with regulators and tax authorities; and
- Challenging assumptions and judgements made by management in their critical accounting estimates, in particular donation and legacy recognition, recognition of grant expenditure and provisions for bad and/or doubtful debts.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: **[www.frc.org.uk/auditorsresponsibilities](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 charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 10 of the Charities Accounts (Scotland) Regulations. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.



**Jane Askew** (Senior Statutory Auditor)

Date: 26th October 2021

For and on behalf of Haysmacintyre LLP,  
Statutory Auditor

10 Queen Street Place  
London  
EC4R 1AG

# Financial Statements

## Statement of Financial Activities (Incorporating Income and Expenditure Account) For the year ended 31st March 2021

	NOTES	UNRESTRICTED FUNDS 2021 £	RESTRICTED FUNDS 2021 £	TOTAL 2021 £	TOTAL 2020 £
<b>INCOME FROM:</b>					
Donations and Legacies	2a	6,716,795	1,845,383	8,562,178	6,448,299
Other trading activities: Merchandise income		57,298	-	57,298	28,282
Investments		11,586	-	11,586	29,649
<b>Total Income</b>		6,785,679	1,845,383	8,631,062	6,506,230
<b>EXPENDITURE ON:</b>					
<b>Raising funds</b>	3	2,284,272	-	2,284,272	1,784,947
<b>Charitable activities</b>					
Information and support		974,799	333,413	1,308,212	1,738,543
Campaigning and awareness		1,309,649	-	1,309,649	1,260,228
Research	5	(64,200)	809,739	745,538	1,250,037
<b>Total Expenditure</b>	2b	4,504,520	1,143,152	5,647,671	6,033,755
<b>Net (expenditure) income</b>	2a	2,281,158	702,232	2,983,390	472,476
Funds openign balance		3,014,313	45,947	3,060,261	2,587,785
Transfers between funds		681,947	(681,947)	-	-
Funds closing balance	11	5,977,418	66,232	6,043,650	3,060,261

All of the above results are derived from continuing activities.  
There were no other recognised gains or losses other than those stated above.

The notes on pages 71-86 form part of these accounts.

Full comparative figures for the year to 31 March 2020 are shown in note 14.



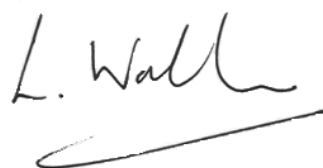
# Financial statements

## Company Number 05658041 Balance Sheet

### As at 31st March 2021

	NOTES	2021 £	£	2020 £	£
<b>FIXED ASSETS</b>					
Tangible assets	7		411,180		333,263
<b>CURRENT ASSETS</b>					
Debtors	8	1,611,827		1,289,064	
Cash and cash equivalents		5,878,256		3,895,457	
		7,490,083		5,184,522	
<b>CREDITORS:</b> amounts falling due within one year	9	(1,200,830)		(1,287,133)	
<b>Net current assets</b>			6,289,253		3,897,389
<b>CREDITORS:</b> amounts falling due after more than one year	9		(656,783)		(1,170,392)
<b>NET ASSETS</b>			<b>6,043,650</b>		<b>3,060,260</b>
<b>FUNDS</b>					
<b>Unrestricted funds</b>					
General funds	11		2,071,482		2,531,623
Designated funds	11		3,905,935		482,689
<b>Restricted funds</b>	11		66,233		45,948
<b>TOTAL FUNDS</b>			<b>6,043,650</b>		<b>3,060,260</b>

Approved by the Trustees and authorised for their issue on the 7th October 2021 and signed on their behalf by:



**Lynne Walker,**  
Chair of Trustees

The notes on pages 70 - 86 form part of these financial statements.

## Cashflow Statement

### As at 31st March 2021

	NOTES	2021 £	2020 £
<b>Cash used in operating activities</b>	A	2,125,880	(408,739)
<b>Cash flows from investing activities</b>			
Interest income		11,586	29,649
Purchase of tangible assets		(154,667)	(325,596)
<b>Cash used in investing activities</b>		(143,081)	(295,948)
<b>(Decrease) increase in cash and cash equivalents in the year</b>		1,982,799	(704,687)
Cash and cash equivalents at the beginning of the year		3,895,457	4,600,144
<b>Total cash and cash equivalents at the end of the year</b>		5,878,256	3,895,457

#### A. Reconciliation of net movement in funds to net cash inflow from operating activities

	2021 £	2020 £
<b>Net income / (expenditure)</b>	2,983,390	472,476
Depreciation charge	76,750	17,813
Investment income	(11,586)	(29,649)
(Increase) decrease in debtors	(322,763)	(301,730)
(Decrease) increase in creditors	(599,912)	(567,651)
<b>Net cash used in operating activities</b>	<b>2,125,879</b>	<b>(408,740)</b>

#### B. Analysis of changes in cash and cash equivalents

	At 01-Apr 2020 £	Cashflows £	At 31-Mar 2021 £
Cash and cash equivalents	3,895,457	1,982,799	5,878,256
	<b>3,895,457</b>	<b>1,982,799</b>	<b>5,878,256</b>

## Notes to the financial statements

### As at 31st March 2021

## 1. Accounting policies

### Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2017) - (Charities SORP (FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

Pancreatic Cancer UK meets the definition of a public benefit entity under FRS 102.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

### Preparation of accounts on a going concern basis

The trustees consider there are no material uncertainties about the Charity's ability to continue as a going concern. The review of our financial position, reserves levels and future plans gives Trustees confidence the charity remains a going concern for the foreseeable future.

### Income

All income is included in full in the statement of financial activities when the charity is entitled to the income, it is probable that income will be received and the amount of income receivable can be measured reliably.

Third party platforms, such as Just Giving and Virgin Money provide convenient mechanisms for donors to send funds to the charity. All donations from these sources are received net of charges for card transactions, Gift Aid claims (where relevant), agency fees and VAT thereon where charged. These donations are grossed up for accounting purposes with the gross donations including Gift Aid shown as voluntary income and the related card charges, fees and VAT shown as fundraising costs. Donations are recorded within the charity's accounts based on the time of processing and dispatch to the charity by the agency rather than the date of the individual donations. All Gift Aid and related fees for donations are accounted contemporaneously with the donations whether or not they have been remitted/charged.

Gift Aid claimable on donations received directly by the Charity are recorded as donation income in the accounting year when the donation is recorded. The outstanding amounts of such Gift Aid are recorded as a debtor until settlement of the claim is completed.

Investment income received from interest on deposits is included in the accounts on an accruals basis. Government Job Retention Scheme grant income represents the total amount claimed from HMRC under the CJRS. The income is accounted for in the period in which the associated salary payments are made to furloughed staff.

### Expenditure

Expenditure is recognised in the year in which they apply to. Expenditure includes attributable VAT which cannot be recovered.

The costs of generating funds relate to the costs incurred by the charity associated with attracting and processing the donations received as well as merchandising costs.

Charitable activities expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries.

Grants payable are charged to the accounts in full in the year awarded, as the charity is committed to payment for the duration of the grant.

Expenditure is allocated to the particular activity where the cost relates directly to that activity. However, the cost of overall direction and administration of each activity are apportioned based on staff time attributable to each activity.

Governance costs include the costs of governance arrangements which relate to the general running of the charity, including strategic planning for its future development, external audit, any legal advice for the trustees, and all costs of complying with constitutional and statutory requirements, such as the costs of Trustee meetings and of preparing the statutory accounts and satisfying public accountability.

## Employee benefits

Short term benefits including holiday pay are recognised as an expense in the period in which the service is received. Termination benefits are accounted for on an accrual basis and in line with FRS 102.

The charity makes pension contributions based on 4-6% of salary to staff personal pensions. The assets of these schemes are held separately from those of the charity in independently administered funds. The pension cost charge represents contributions payable under this arrangement by the charity

to the funds. The charity has no liability other than for the payment of those contributions.

## Financial instruments

The charitable company only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

## Fixed assets and depreciation

Depreciation is provided at rates calculated to write off the cost of each asset over its expected useful life. Depreciation is charged on a straight line basis, with the following expected useful life:

Computer equipment and software: 5 years

Office furniture and fittings: 10 years

Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate that their recoverable value may be less than their carrying value.

## Debtors

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

## Critical judgements and estimates

In the application of the accounting policies, Trustees are required to make judgements, estimates and assumptions about the carrying value of assets and liabilities that are not readily apparent from other sources. The estimates and underlying 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.

In the view of the Trustees, the recognition of liabilities for future grant commitments and the split of these between amounts due in less than and more than one year is an area of judgement significant to the accounts. There are no other areas of judgement or estimation that are likely to result in a material adjustment to the accounts in the next financial year.

## Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

## 2a. Income

	TOTAL 2021 £	TOTAL 2020 £
<b>Total donations and legacies income for the year includes income from:</b>		
Government Job Retention Scheme grants	201,614	nil
Gifts in kind	312,280	100,786
Tax recovered	633,983	47,753
	1,147,877	148,539
<b>Net income for the year is stated after charging:</b>		
Depreciation	76,750	17,813
Audit and accountancy fees	9,120	10,050
Hire of office equipment	2,810	2,657
	88,680	30,520

## 2b. Expenditure

	DIRECT COSTS £	GRANTS AWARDED £	SUPPORT COSTS £	TOTAL 2021 £	TOTAL 2020 £
<b>Raising funds</b>	1,861,807	-	422,465	2,284,272	1,784,947
<b>Charitable activities</b>					
Information and support	931,974	-	376,238	1,308,212	1,738,543
Campaigning & awareness	909,009	-	400,640	1,309,649	1,260,228
Research	139,474	237,824	368,240	745,538	1,250,037
	3,842,264	237,824	1,567,583	5,647,671	6,033,755

## Support Costs

	STAFF COSTS £	PREMISES & OFFICE COSTS £	OTHER COSTS £	TOTAL 2021 £	TOTAL 2020 £
<b>Cost of raising funds</b>	276,780	75,835	69,850	422,465	362,252
<b>Charitable activities</b>					
Information and support	230,553	75,835	69,850	376,238	369,881
Campaigning & awareness	254,955	75,835	69,850	400,640	384,001
Research	222,555	75,835	69,850	368,240	341,985
	984,843	303,341	279,399	1,567,583	1,458,119

Support costs have been allocated on the basis of staff time spent on each activity. Governance costs of £9,432 (2020 £19,877) are within support costs. See note 4 for further analysis.

## 3. Cost of Raising Funds

	2021 £	2020 £
Staff costs	659,554	659,554
Fundraising events	1,064,288	643,347
Merchandise	73,590	55,419
Collection agency fees and charges	64,375	64,375
Support costs (as above)	422,465	362,252
	2,284,272	1,784,947

## 4. Governance Costs

	2021 £	2020 £
Audit & accountancy fees	9,120	10,050
Trustees expenses and meetings	312	9,827
Other costs		
	9,432	19,877

Governance costs have been allocated to support costs.

## 5. Research grants payable

	2021 £	2020 £
<b>Reconciliation of grants payable:</b>		
Outstanding commitments at 1 April 2020	2,048,306	2,640,711
Grant commitments made in the year	237,824	834,311
Grants paid during the year	(933,701)	(1,426,716)
<b>Outstanding commitments at 31 March 2021</b>	<b>1,352,429</b>	<b>2,048,306</b>

All grants above were made to hospitals, medical schools and other institutions furthering research into pancreatic cancer. There were no grants to individuals in the year to 31 March 2021 (2020 none). Of the outstanding commitments £695,647 are due within one year and £656,783 after one year.

## 6. Staff costs and numbers

	2021 £	2020 £
<b>Staff costs were as follows:</b>		
Staff Salaries	2,705,204	2,528,764
Social security costs	285,878	266,223
Pension contributions	227,294	210,936
	<b>3,218,376</b>	<b>3,005,922</b>

Staff costs set out in the table include redundancy & ex gratia payments payments of £12,810 (2020 Nil).

One employee earned between £60,000 and £69,999 (2020 Nil). No employees earned between £70,000 and £79,999 (2020 1). One employee earned between £80,000 and £89,999 (2020 1). One employee earned between £90,000 and £99,999 in the year (2020 1).

Employer pension contributions in respect of these employees were £23,675 (2020 £24,853).

## Key Management remuneration

The total employee benefits of the key management personnel of the charity was £373,992 (2020 £388,627).

	NO.	NO.
<b>The average number of employees during the year was as follows:</b>		
Employees	72	67
Temporary staff	6	3
	78	70

## 7. Tangible fixed assets

	OFFICE FITTINGS £	OFFICE FURNITURE £	ACCOUNTING SYSTEM £	WEBSITE £	COMPUTER EQUIPMENT & SOFTWARE £	TOTAL £
<b>Cost</b>						
At 31 March 2020	181,822	4,803	39,550	108,654	248,578	583,406
Additions in year	39,147	-	21,165	91,184	3,171	154,667
At 31 March 2021	220,969	4,803	60,715	199,838	251,749	738,074
<b>Depreciation</b>						
At 31 March 2020	6,224	911	2,397	68,103	172,508	250,143
Charge for the year	21,496	480	10,791	23,199	20,783	76,750
At 31 March 2021	27,720	1,392	13,189	91,302	193,291	326,893
<b>Net book value</b>						
At 31 March 2021	193,249	3,411	47,526	108,536	58,458	411,180
At 31 March 2020	175,598	3,892	37,152	40,551	76,070	333,263

All tangible fixed assets are used to fulfil the charity's objects.



## 8. Debtors

	2021 £	2020 £
Other debtors	117,357	100,002
Prepayments and accrued income	1,494,470	1,189,062
	1,611,827	1,289,064

Included within accrued income is legacy income of £145,555 (2020 £732,268) being the estimated value of legacies which were notified to the charity prior to the year end.

## 9. Creditors: amounts falling due within one year

	2021 £	2020 £
Accounts payable	331,526	249,983
Other taxation and social security	70,690	78,290
Deferred Income (see below)	-	3,000
Accruals	60,803	35,834
Other creditors	42,165	42,113
Grants payable	695,647	877,913
	1,200,830	1,287,133

### Amounts falling due after one year

Grants payable	656,783	1,170,392
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### Analysis of deferred income:

Balance at 1 April	3,000	-
Amount released to income	3,000	-
Amount deferred in the year	-	3,000
	-	3,000

Deferred income relates to funds specified by donors to be spent in the next financial year.

## 10. Analysis of net assets between funds

	GENERAL FUNDS £	RESTRICTED FUNDS £	TOTAL FUNDS £
Tangible fixed assets	411,180	-	411,180
Net current assets	5,566,237	66,233	5,632,470
Net assets 31 March 2021	<b>5,977,417</b>	<b>66,233</b>	<b>6,043,650</b>

## 11. Movement in funds

	AT 31 MARCH 2020 £	INCOME £	EXPENDITURE £	TRANSFERS £	AT 31 MARCH 2021 £
<b>Unrestricted funds:</b>					
<b>General funds:</b>					
Operating contingency	1,192,000				1,192,000
Unrestricted reserves	1,339,623	6,785,679	(4,427,766)	(2,818,053)	879,482
<b>Total General Funds</b>	<b>2,531,623</b>	<b>6,785,679</b>	<b>(4,427,766)</b>	<b>(2,818,053)</b>	<b>2,071,482</b>
<b>Designated Funds:</b>					
Future research grants, data and digital development	482,689		(76,754)	3,500,000	3,905,935
<b>Total General Funds</b>	<b>482,689</b>	<b>-</b>	<b>(76,754)</b>	<b>3,500,000</b>	<b>3,905,935</b>

Funds are retained in unrestricted reserves to underwrite risk to income which may result from the impact of Covid-19 on the economy in the following year.

Transfers from restricted to unrestricted funds are to re-imburse payments made from unrestricted funds pending receipt of restricted income.

### Purpose of designated funds:

To fund pancreatic cancer research grants over the next three years, together with strategic development of pancreatic cancer data resources and digital services to patients and carers.

## 11. Movement in funds (continued)

	AT 31 MARCH 2020 £	INCOME £	EXPENDITURE £	TRANSFERS £	AT 31 MARCH 2021 £
<b>Restricted funds</b>					
Nicki's Smile	45,948	20,285			66,233
Future Leaders Fund general	-			-	-
Future Leaders Fund Oxford	-			-	-
Future Leaders Academy Beatson	-	115,025		(115,025)	-
Future Leader - D Whyte	-			-	-
General research	-	123,782	(123,782)		-
Grand Challenge	-	322,215		(322,215)	-
Living with Days in SE	-		-		-
Less Survivable Cancers Taskforce	-		-		-
Restricted Northern Ireland	-		-		-
Research Innovation Fund (RIF)	-	98		(98)	-
RIF2019 Paulkin	-	74,266		(74,266)	-
RIF2020 Kettler	-	103,280		(103,280)	-
RIF2020 TerHarr	-	54,788		(54,788)	-
Ride London100 expanding services	-	117,546	(117,546)		-
Ruth Metcalfe Research Fund	-	524,790	(524,790)		-
Support and information service	-	215,867	(215,867)		-
Support - Easy Read Publications	-		-		-
UCL - Early Diagnosis Project	-	10,000		(10,000)	-
Early Diagnosis	-	2,275		(2,275)	-
Early Detection Innovation Workshop	-	161,070	(161,070)		-
EUROPAC	-	96	(96)		-
<b>Total Restricted funds</b>	45,948	1,845,383	(1,143,151)	(681,947)	66,233
<b>Total Funds</b>	3,060,260	8,631,062	(5,647,671)	-	6,043,650

Transfers from restricted funds represent repayment of sums paid out from unrestricted funds ahead of receipt of restricted donations. Full comparative figures for the year to 31 March 2020 are shown in note 19.

## Purpose of designated funds:

### Nicki's Smile Fund

The fund relates to amounts donated by the Nicki's Smile Appeal and is to be used as recommended and agreed by the Trustees.

### Future Leaders Fund general

The fund relates to amounts donated towards our Future Leaders programme but not designated to a specific leader or research.

### Future Leaders Fund Oxford

Funds for a Pancreatic Cancer Future Leader at the University of Oxford.

### Future Leaders Academy Beatson

Funds for four PHD students to be Pancreatic Cancer Future Leaders at the Beatson Institute's Future Leaders Academy.

### Future Leader - D Whyte

Funds for Pancreatic Cancer Future Leader D Whyte and his research at the Future Leaders Academy, Beatson Institute.

### General research

The fund relates to amounts donated towards our research programme but not allocated to a specific project.

### Grand Challenge

Funds towards the Grand Challenge Award given to Barts Cancer Institute for Developing advanced CAR-T cell-based immunotherapies to improve the outcome of patients with pancreatic cancer.

## Living with Days in SE

Funds towards all our Living with Pancreatic Cancer Support Days in the South East of England. Living with Pancreatic Cancer Support Days allow people to meet a specialist nurse, other people with pancreatic cancer and their families.

### Less Survivable Cancers Taskforce

Funds toward our work as part of the Less Survivable Cancers Taskforce. The Less Survivable Cancers Taskforce is made up of six charities and is committed to improving survival rates for people affected by cancer of the brain, lung, liver, stomach, pancreas and oesophagus.

### Restricted Northern Ireland

The fund relates to amounts donated towards our support and information services work in Northern Ireland.

### Research Innovation Fund (RIF)

The Research Innovation Fund (RIF) was created to spur creative and cutting edge ideas and approaches in pancreatic cancer research including those successful in other areas of cancer research that have justifiable promise for pancreatic cancer. The awards are intended to support pilot work that will put the researchers in a better position to apply for larger grants to take their work to the next stage.

### RIF2020 Paulkin

Funding for a Research Innovation Fund (RIF) award given in 2020 to Dr Paulkin at Oxford University for work on early detection of pancreatic ductal adenocarcinomas.



### **Ride London100 expanding services**

Pancreatic Cancer UK was named Charity of the Year for 2021 Prudential RideLondon-Surrey 100. All funds from this being put to use expanding our services including more specialist nurses who provide vital support and information to people affected by pancreatic cancer when they need it the most.

### **Ruth Metcalfe Research Fund**

Funds given in memory of Ruth Metcalfe to be put towards research into pancreatic cancer.

### **Support and information service**

The fund relates to amounts donated towards our support and information services work.

### **UCL - Early Diagnosis Project Fund**

The fund relates to amounts donated by various donors to fund a University College London (UCL) project in to the early diagnosis of pancreatic cancer. UCL is the lead in a multi disciplinary research project. The project's aim is to bring the research community together with the common aim of identifying new biomarkers and approaches to enable quicker diagnosis.

### **Early Diagnosis**

Funding from various donors toward all research projects on earlier diagnosis of pancreatic cancer.

### **EUROPAC**

This is funding towards one year of funding for the European Registry of Hereditary Pancreatitis and Familial Pancreatic Cancer (EUROPAC).

## 12. Taxation

The charity is exempt from corporation tax as all its income is charitable and is applied for charitable purposes.

## 13. Related party transactions

Aggregate donations of £70,655 (2020 £85,722) were received from the Trustees in the year.

## 14. Operating lease commitments

At the year end, the charity was committed to the following future minimum lease payments in respect of operating leases:

	LAND AND BUILDINGS		OFFICE EQUIPMENT	
	2021 £	2020 £	2021 £	2020 £
In less than one year	202,495	202,495	2,810	649
In two to five years	100,415	302,910	1,381	-
	302,910	505,405	4,191	649

## 15. Comparative (Prior Year) Statement of Financial Activities

	UNRESTRICTED FUNDS 2020 £	RESTRICTED FUNDS 2020 £	TOTAL FUNDS 2020 £
<b>INCOME FROM:</b>			
Donations and legacies	5,524,197	924,102	6,448,299
Other trading activities: Merchandise income	28,282	-	28,282
Investments	29,649	-	29,649
<b>Total income</b>	<b>5,582,128</b>	<b>924,102</b>	<b>6,506,230</b>
<b>EXPENDITURE ON:</b>			
<b>Raising funds</b>	1,784,947	-	1,784,947
<b>Charitable activities</b>			
Information and support	1,629,340	109,203	1,738,543
Campaigning & awareness	1,240,228	20,000	1,260,228
Research	960,817	289,220	1,250,037
<b>Total expenditure</b>	<b>5,615,332</b>	<b>418,423</b>	<b>6,033,755</b>
<b>Net income/(expenditure)</b>	(33,204)	505,680	472,476
Funds opening balance	2,536,338	51,447	2,587,785
Transfers between funds	511,179	(511,179)	-
<b>Funds closing balance</b>	<b>3,014,313</b>	<b>45,948</b>	<b>3,060,261</b>

## 16. Comparative (prior year) expenditure

	<b>DIRECT COSTS 2020 £</b>	<b>GRANTS AWARDED 2020 £</b>	<b>SUPPORT COSTS 2020 £</b>	<b>TOTAL 2020 £</b>	<b>TOTAL 2019 £</b>
<b>Raising funds</b>	1,422,695	-	362,252	1,784,947	1,345,061
<b>Charitable activities</b>					
Information and support	1,368,662	-	369,881	1,738,543	1,422,282
Campaigning & awareness	876,227	-	384,001	1,260,228	1,039,018
Research	73,741	834,311	341,985	1,250,037	1,822,995
	3,741,325	834,311	1,458,119	6,033,755	5,629,356

## Comparative (prior year) support costs

	<b>STAFF COSTS 2020 £</b>	<b>PREMISES &amp; OFFICE COSTS 2020 £</b>	<b>OTHER COSTS 2020 £</b>	<b>TOTAL 2020 £</b>	<b>TOTAL 2019 £</b>
<b>Cost of raising funds</b>	208,867	88,466	64,918	362,251	291,930
<b>Charitable activities</b>					
Information and support	216,496	88,466	64,918	369,880	305,883
Campaigning & awareness	230,616	88,466	64,918	384,000	303,017
Research	188,600	88,466	64,918	341,984	280,530
	844,579	353,864	259,672	1,458,115	1,181,360

Support costs have been allocated on the basis of staff time spent on each activity. Governance costs of £19,877 for 2020 (2019 £23,366) are within support costs.



## 17. Comparative (prior year) analysis of net assets between funds

	GENERAL FUNDS 2020 £	RESTRICTED FUNDS 2020 £	TOTAL FUNDS 2020 £
Tangible fixed assets	333,263	-	333,263
Net current assets	2,681,049	45,948	2,726,997
Net assets at 31 March 2020	<b>3,014,312</b>	<b>45,948</b>	<b>3,060,260</b>

## 18. Comparative (prior year) movement in funds

	AT 31 MARCH 2019 £	INCOME £	EXPENDITURE £	TRANSFERS £	AT 31 MARCH 2020 £
<b>Unrestricted funds:</b>					
<b>General funds:</b>					
Operating Contingency	1,192,000				1,192,000
Unrestricted reserves	27,337	5,582,128	(4,781,021)	511,179	1,339,623
<b>Total General Funds</b>	<b>1,219,337</b>	<b>5,582,128</b>	<b>(4,781,021)</b>	<b>511,179</b>	<b>2,531,623</b>
<b>Designated Funds:</b>					
Future research and expansion	1,317,000		(834,311)		482,689
<b>Total Designated Funds</b>	<b>1,317,000</b>	<b>-</b>	<b>(834,311)</b>	<b>-</b>	<b>482,689</b>

	AT 31 MARCH 2019 £	INCOME £	EXPENDITURE £	TRANSFERS £	AT 31 MARCH 2020 £
<b>Restricted funds</b>					
Nicki's Smile	43,100	2,848			45,948
Future Leaders Fund general	-	26,500		(26,500)	-
Future Leaders Fund Oxford	-	7,500		(7,500)	-
Future Leaders Academy Beatson	-	42,014		(42,014)	-
Future Leader - D Whyte	-	22,500		(22,500)	-
General research	-	70,740	(70,740)		-
Grand Challenge	-	129,048		(129,048)	-
Living with Days in SE		1,513	(1,513)		-
Less Survivable Cancers Taskforce		20,000	(20,000)		-
Restricted Northern Ireland	-	1,960	(1,960)		-
Research Innovation Fund (RIF)		5,120		(5,120)	-
RIF2019 Paulkin		139,000		(139,000)	-
Ride London100 expanding services		22,448	(22,448)		-
Ruth Metcalfe Research Fund		218,000	(218,000)		-
Support and information service	-	74,934	(74,934)		-
Support - Easy Read Publications	8,347	-	(8,347)		-
UCL - Early Diagnosis Project	-	113,252		(113,252)	-
Early Diagnosis	-	26,245		(26,245)	-
EUROPAC	-	480	(480)		-
<b>Total Restricted funds</b>	51,447	924,102	(418,422)	(511,179)	45,948
<b>Total Funds</b>	2,587,784	6,506,230	(6,033,754)	-	3,060,260



# Reference and administrative details

## Status

The organisation is a charitable company limited by guarantee, incorporated on 19 December 2005 and registered as a charity on 13 January 2006.

## Governing Document

The company was established under a Memorandum of Association which established the objects and powers of the charitable company and is governed under its Articles of Association.

## Company No.

05658041

## Charity No.

1112708 (England & Wales)  
SC046392 (Scotland)

## Registered Office

Westminster Tower,  
3 Albert Embankment,  
London SE1 7SP

## Trustees

Mr Timothy Allsop (Resigned 22nd June 2021)

Ms Lynne Walker (Chair)

Mr Daniel Benjamin (Treasurer)

Mrs Claire Cardy

Mrs Carole Challen (Resigned 22nd June 2021)

Mrs Lisa Tennant (Resigned 16th March 2021)

Mr Stuart Fletcher

Dr Naureen Starling

Professor Stephen Smith (Co-opted)

Mr Arthur Calderwood (Appointed 22nd June 2021)

Ms Eleanor Phillips (Appointed 22nd June 2021)

Mr Greg Mueller (Appointed 22nd June 2021)

Mrs Katie Stotter (Appointed 22nd June 2021)

Mr Neil Balmer (Appointed 22nd June 2021)

Mrs Rima Horton (Appointed 22nd June 2021)

## Principle Staff

Diana Jupp, Chief Executive

## Bankers

HSBC Bank plc, 8 Canada Square, London  
E14 5HQ

Barclays Bank plc, 3-5 King Street, Reading,  
RG1 2HD

## Auditors

Haysmacintyre LLP, 10 Queen Street Place,  
London EC4R 1AG







## **Pancreatic Cancer UK**

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## **Pancreatic Cancer UK Limited**

a Charitable Company, Limited by Guarantee  
Company No. 5658041 Charity No. 01112708 Registered in England and Wales  
Scottish charity number SC046392