

# Leukaemia<sup>UK</sup>

Annual Report 2024



[leukaemiauk.org.uk](https://leukaemiauk.org.uk)



Our vision:

To stop leukaemia  
devastating lives

Our values:

We are curious  
We explore new possibilities,  
restless for progress

We are bold  
We push boundaries and  
go further than ever before

We are collaborative  
We bring people together, galvanising and  
inspiring them to change the future

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Fiona Hazell,  
Chief Executive



Ian McCafferty,  
CBE, Chair

## Putting people affected at the heart

Reflecting on 2024, I am filled with immense pride at the progress we've made in amplifying the reach and impact of our work. This year, we ensured the voices of those impacted by leukaemia were heard like never before. Throughout our general election campaign, our supporters and expanding group of Community Champions took an extraordinary 11,400 actions. They signed and sent letters, visited Westminster to deliver our open letter to political party leaders, and engaged in patient sessions with researchers and policymakers. Our storytellers shared their experiences across multiple platforms, ensuring that the challenges faced by those with leukaemia were acknowledged at the highest levels.

The results were clear. Our political engagement programme garnered support from 18 MPs for an Early Day Motion for our Spot Leukaemia campaign and more MPs than ever are now in active conversation with our policy team.

Alongside making waves with our advocacy, funding pioneering research remains a central pillar of what we do. This year, we are proud to have provided seven new funding awards totalling over £1.1 million.

This year our funded researchers published 18 papers, each one increasing our knowledge of leukaemia and helping to discover better, kinder treatment paths. They included findings from former John Goldman Fellow Dr Sunniyat Rahman who discovered a new way that cancer genes can become active, and Dr Daniel Coleman, who developed a potential new treatment strategy for acute myeloid leukaemia (AML).

Chris Corbin, a longstanding advocate in the leukaemia community, was named our first-ever Patron this year. We also appreciated the continued efforts of Ambassadors like Juliet Sear and Hannah Peckham, who have helped raise our profile

and spread awareness. Amongst other amazing achievements, we saw a massive 3,000% rise in social media engagement as we utilised the power of digital reach.

This year was equally spectacular for fundraising. We raised a record £3.49m and are deeply appreciative of the 588 individual supporters who held concerts, ran marathons, and sky-dived to help our mission. We are especially grateful for the incredible legacy received from Lili Preston, which far surpassed any we have ever received and will make a huge difference to our work. Our 25th 'Who's Cooking Dinner?' event was a poignant night to remember and raised an impressive £300k. The achievements of our fundraising team are even more extraordinary given the current economic challenges that all charities continue to face.

Behind the scenes we continued to make Leukaemia UK a great place to work by introducing new policies, including our Equality, Diversity, Belonging, and Inclusion policy (EDIB). We created three new roles and more staff engaged in our annual survey, underscoring our commitment to a supportive, inclusive workplace.

Looking back, we've achieved so much, but we are not slowing down. We remain ambitious, inspired by our supporters and the opportunities that lie ahead.

Our success is due to the hard work, passion, and dedication of our community, and I extend my deepest thanks to everyone who has contributed to our mission. Together, we will continue to grow, innovate, and make an even greater impact in the fight against leukaemia.



## Delivering on our strategy

As we move into 2025, we look ahead with determination and ambition, building on the momentum of 2024 to create an even greater impact for those affected by leukaemia. With 2024 marking the halfway point of our five-year strategy, we know we've laid strong foundations for the opportunities ahead in our mission to stop leukaemia from devastating lives.

In 2025, we will continue our commitment to saving and improving lives through strategic investments in research, tireless campaigning, and raising awareness of leukaemia's signs and symptoms. We will nurture a culture of curiosity, supporting innovative research projects and driving improvements across all areas of our organisation, from HR to digital transformation. We understand that we cannot achieve our mission alone, which is why we will strengthen our network of patients, clinicians, researchers, staff, and Trustees.

Our ambitions for 2025 remain bold. We will focus on the Government's 10-Year Health Plan and National Cancer Plan to ensure the needs of people affected by leukaemia are represented. Our work with the leukaemia community will deepen to ensure our advocacy is evidence-based and reflective of their needs. The patient voice, central to all we do, will continue to guide our growing group of Community Champions, Ambassadors, storytellers, and supporters.

Research investment remains at the heart of our mission. In 2025, we will mark the 10 year anniversary of our John Goldman fellowships and look forward to demonstrating the impact of these to date and funding more early career researchers, alongside continued investment in our Follow Up

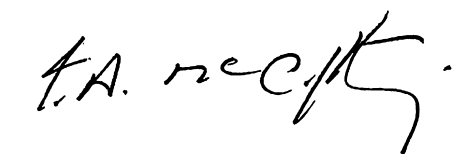
Fund, Project Grant, and the Patient Care Pioneer Award introduced in 2024.

Building Leukaemia UK's profile remains a priority. We will strengthen our brand through strategic PR planning, focusing on thought leadership and promoting our policy and advocacy priorities. Our real-life stories initiative will expand to represent an even broader range of experiences, exploring innovative ways to share these vital narratives.

After a record-breaking year for fundraising in 2024, our goal for 2025 is to do even better. From our first-ever Facebook Fundraising Challenge to relaunching the Mini Masters golf event, we will continue diversifying our fundraising events to attract new supporters and deepen engagement with existing ones.

Internally, we are committed to strengthening our organisation and fostering an inclusive, dynamic environment. In 2025, we will focus on increasing our engagement score in our third staff survey, and starting the development of our new Leukaemia UK strategy for 2027 onwards.

The continued collaboration of our dedicated community of patients, supporters, clinicians, researchers, advocates, and staff is key to our success. Thank you for being part of this journey with us.







# A year of impact





# 2024 – a year of impact



## January

**Kick-started our policy and advocacy drive ahead of the general election** in earnest and made a new staff appointment to lead this area of work



## February

**International Childhood Cancer Day** – great engagement around the story of Henry, who had recently rung the bell after three years of treatment for ALL, as well as support from Ambassador Saffron Vagher

**Announcement of Dr Matthew Blunt's John Goldman Fellowship Follow-up Fund award** to continue his work to benefit CLL patients



## March

**Launch of our general election manifesto** including our Open Letter which gained 7,000 signatures



## April

**London Landmarks Half Marathon** where 31 runners raised £22k

**London Marathon** with 49 runners who raised £132k



## May

**First DIDACT workshop of the year**

**Posted our first Leukaemia UK TikTok video** at the Hackney Half Marathon to celebrate our biggest-ever team entry – 150 runners

**Staff Survey** which saw an increase in engagement score from 73% to 77%



## June

**Delivered our Open Letter to the leaders of all the parties** with the help of our Community Champions

Sent out a call for our supporters to **email letters to their parliamentary candidates**

## July

**Launch of our supporter action to write to their MP, MS or MSP** - 2,937 supporters wrote letters, reaching 625 out of the 650 sitting in parliament

**Awarded over £560k in funding** for four John Goldman Fellows

**Announced £50k funding** for our first Patient Care Pioneer Award

**Two laboratory tours took place at the Francis Crick Institute and University College London** with Professor Dominique Bonnet and Dr Noelia Che



## August

**We launched our annual Spot Leukaemia campaign**, ahead of Blood Cancer Awareness Month in September, which reached 2 million people





## September: Blood Cancer Awareness Month

**18 MPs supported an Early Day Motion** highlighting our Spot Leukaemia campaign

**10 runners raised £10k** in the Great North Run

**Photocall at the Scottish Parliament** attended by 42 MSPs, with 14 MSPs attending our drop-in session

**Our 25<sup>th</sup> Who's Cooking Dinner?** raised our biggest-ever fundraising total of £300k



## October

Worked with **Myeloma UK** and **Lymphoma Action** to secure a commitment from the NHS England Cancer Programme to develop a Best Practice Timed Pathway for the three key blood cancers. We will be developing this work in 2025

**Our GP survey results were published in Pulse Today**

## November

**Second DIDACT training day**

Dr Victor Lombart and Dr Yang Li hosted a **tour** of their **research laboratories at University College London (UCL)**



**Attended the Labour Party conference**

**Our 2024 Annual Science Seminar** at Wellcome Collection

**Attended the Liberal Democrat Party conference**

**Our DRTV ad won the 'Best Medium Charity Film' award** in the Third Sector Awards 2024



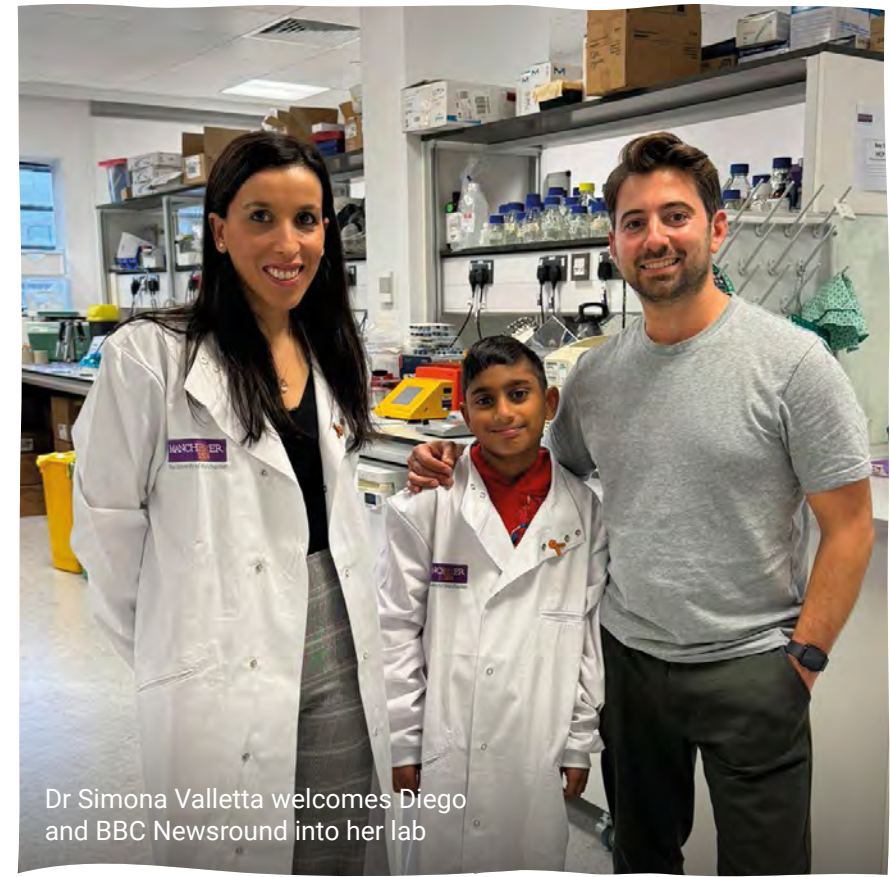
## December

**Responded to the government's 10-Year Health Plan consultation** and secured 63 submissions from supporters

**Awarded one John Goldman Fellowship Follow-up Fund** to Dr Samanta Mariani from the University of Edinburgh

**Awarded our £250k Project Grant** to Professor Brian Huntly from the University of Cambridge

**BBC Newsround filmed a feature** explaining blood cancer to children in Dr Simona Valletta's laboratory

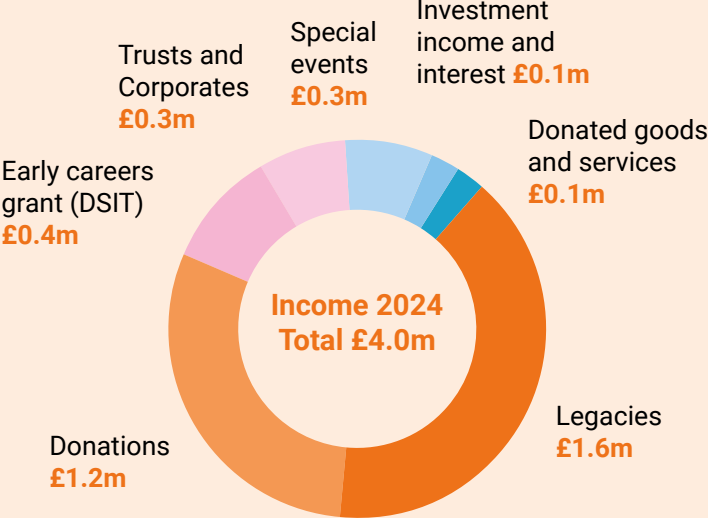
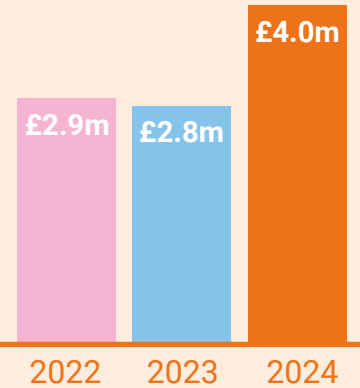




# Our achievements

in 2024

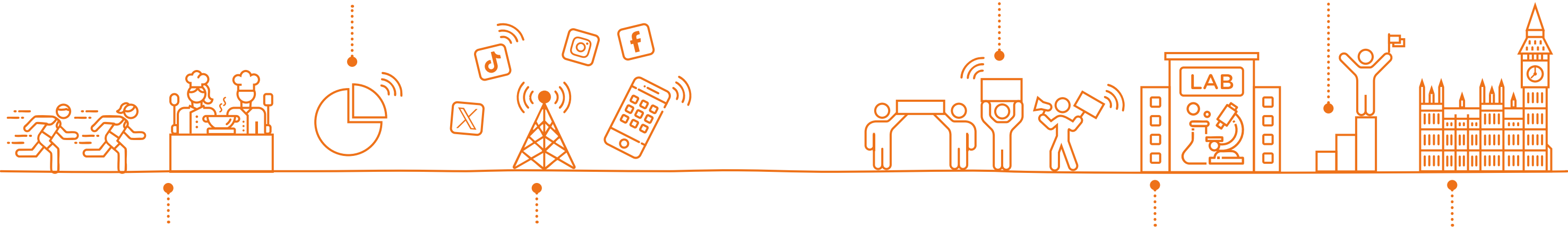
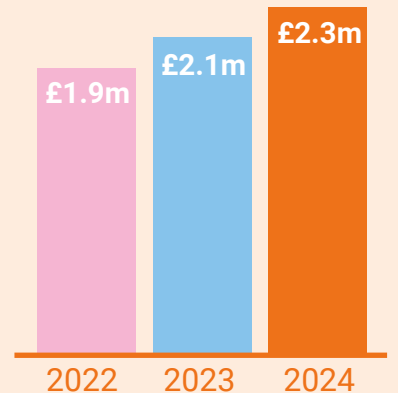
## Income



## Community

**14 new**  
Community Champions

## Charitable activities spend



## Fundraising

**150 people**

ran the Hackney Half Marathon in May, our biggest ever team

**25 years**

of Who's Cooking Dinner? which this year raised £300k

**£3.49m**

raised through fundraising - our highest-ever amount

## Awareness

**22% Brand awareness**

of Leukaemia UK - up from 19%

**3,000% increase**

in social media engagements

## Research

**1 brand new**

Patient Care Pioneer Award to boost advancements in care

**18 published papers**

advancing our knowledge of leukaemia

**7 new funding awards**

totalling £1,113,125

## Campaigning

**11,400 actions**

taken by our supporters around the general election

**90 parliamentarians**

across the UK stepping up for Leukaemia UK



## Our strategy





**Vision:**  
To stop leukaemia devastating lives

**Mission:**  
To accelerate progress through the life-changing research that matters most to people affected by leukaemia

**Values:**  
We are curious, bold and collaborative

**Goal 1:** Save more lives

- Harness the power of science to gain a better knowledge and understanding of leukaemia
- Drive progress in awareness and diagnosis of leukaemia to improve survival
- Fund innovative research to discover new, more effective life-saving treatments for leukaemia
- Advocate that every leukaemia patient has access to the best available therapies

**Goal 2:** Improve more lives

- Accelerate the development of smarter, kinder therapies for leukaemia
- Champion advancement in better treatment and care for all
- Transform standards of care and support by establishing 'whole person' care into mainstream practice
- Fund patient-focused applied research to improve access to the best possible care and support those affected

**Enabler 1:**  
Put the needs of everyone affected by leukaemia at the heart of all we do and advocate for progress

**Enabler 2:**  
Invest in research to accelerate progress in diagnosis, treatments and care

**Enabler 3:**  
Build our profile, engagement and influence to grow our support and impact

**Enabler 4:**  
Invest strategically to grow sustainable net income

**Enabler 5:**  
Make Leukaemia UK a great charity to work for and with



Vogue model  
and **Leukaemia UK**  
**ambassador**  
**Saffron Vadher**  
lab tour  
See page 35



Put the needs of everyone with leukaemia at the heart of what we do and advocate for progress



Staff and supporters hand in our open letter to party leaders

## At a Glance

**14** new **Community Champions** signed up to ensure a strong patient voice across all we do

**11,400** actions taken by our supporters including:

- Nearly 7,000 signing our open letter to political party leaders ahead of the general election
- Writing to 1,583 parliamentary candidates in their constituencies, asking for a commitment to improving leukaemia diagnosis, treatment and care if they were elected
- 2,937 supporters writing to their elected MPs inviting them to come on board with Leukaemia UK's work

**90** parliamentarians across the UK have stepped up for Leukaemia UK this year

**1** vitally important **National Cancer Plan for England** (due to be published in 2025) promised by the Government, after a passionate campaign by our supporters and the wider cancer community

**704** people helped by the **Cost of Living with Leukaemia Fund** in partnership with Leukaemia Care

### Action ahead of the 2024 general election

This year's general election provided a dynamic focus for our advocacy work. Our small policy and advocacy team achieved big results in putting leukaemia on the agenda for the incoming government and giving a voice to those affected.

We delivered a hugely successful political engagement programme and mobilised our supporters to take a total of 11,400 actions. We learnt how powerful hearing from a constituent with lived experience of leukaemia directly can be in gaining support or interest from a policy maker. Our patient survey yielded 300 responses which shaped our campaign, and we tried new tactics to influence at a range of levels - from supporters sending email letters to political candidates, to direct meetings with the NHS and England's Department of Health and Social Care (DHSC).

In response to the general election, we put together our **Demanding Better for Those Affected by Leukaemia manifesto**. This later became our **Take Action Save Lives** policy report which outlined our priorities for the new government. We identified five key areas for change:

- To find kinder, more effective treatments
- Improvements in early diagnosis

- Access to the best treatments for all patients
- All leukaemia patients having a full holistic needs assessment from diagnosis, throughout treatment and into recovery
- Publication of better, more consistent health data and clinical audits to improve the quality of diagnosis, treatment, and care for leukaemia patients.

We launched the campaign on 15th March with an open letter to the leaders of each political party asking them to prioritise saving and improving more lives affected by leukaemia in the new Parliament and, if elected, in government. It was eventually signed by nearly 7,000 of our supporters.

On 4th June we delivered the letter to the headquarters of the three major political parties - Conservatives, Liberal Democrats, and Labour - and posted it to others. Five committed Leukaemia UK supporters, including three Community Champions, made the journey to London to help us.

We sent out a call for our supporters to email individual letters to the parliamentary candidates standing in their constituency on 7th June, again highlighting the work of Leukaemia UK and the importance of supporting the creation of a new Cancer Plan by the next government, which recognises the unique needs of blood cancers. Over 1,580 letters were sent.





## Post-election successes

Once the results were known and the new MPs were in place, we drove forward our next wave of activity with the aim of making ourselves and our mission known to the new Government.

On 9th July 2,937 our supporters wrote to their newly elected representative asking them to help Leukaemia UK save and improve more lives affected by leukaemia. **We reached an incredible 625 MPs out of the 650 sitting in Parliament** with an average of 4.7 emails per MP. We were thrilled when this resulted in 60 MPs expressing their interest in being involved in Leukaemia UK's work.

Combined with talking directly to MPs, MSs and MSPs, that means an extraordinary total of 90 parliamentarians across the UK have stepped up for Leukaemia UK this year.

- **18 MPs supported an Early Day Motion highlighting our Spot Leukaemia campaign** and the importance of earlier diagnosis of leukaemia. It drew attention to the findings of a survey we carried out as part of the campaign which revealed 30% of GPs would be deterred from referring patients with symptoms for a full blood count because of limits in blood testing capacity. Early

Day Motions usually attract only a couple of signatures, so this was a significant result.

- **15 written questions pointing to the need for improvements in leukaemia care and treatment were submitted across both the House of Commons and House of Lords** including asking the Government what proportion of leukaemia patients received their diagnosis within the 28 day standard, and how many have been offered a holistic needs assessment in the last 12 months.
- **We met directly with six MPs** as Leukaemia UK and four more as part of the Blood Cancer Alliance, including Clive Jones MP who went on to table the Westminster Hall debate on the merits of a cancer strategy in England, Justin Madders MP, and The Rt Hon Penny Mordaunt MP. They listened carefully when we told them about the issues people with leukaemia and other blood cancers face, and what we want the Government to do.
- **42 MSPs attended our Spot Leukaemia photocall** at the Scottish Parliament (see picture above) with 14 more coming to our drop-in session which were both focused on the importance of early diagnosis.

From all this activity we are delighted to say we have secured three policy commitments:

- **More detailed data for leukaemia from the National Disease Registration Service in England (NDRS).** This will help us understand survival rates by leukaemia type and other important information that will inform our future research and campaign work.
- **NDRS has invited us to join their haematology data improvement working group** which is developing the availability of data showing incidence, routes to diagnosis, and survival rates.
- And best of all, off the back of our call for a national cancer strategy, the **Government has confirmed it will create a National Cancer Plan** (to be launched in 2025).

## Community Champions spread the word

**We were excited to welcome 14 new Community Champions** - a group of highly engaged individuals with lived experience of leukaemia who we support to help drive our mission for change.

The Community Champions put their experience into everything from raising awareness in their local networks and talking to decision-makers, to fundraising and doing media interviews. We're so grateful for their energetic support. We're looking forward to expanding the number of Community Champions next year and seeing an even greater impact from their work.

## Our voice at national level

Shortly after the election, the new Government announced its intention to develop a Ten Year Health Plan which would include an overhaul of the NHS. This plan poses a once-in-a-decade opportunity for us to secure commitments for leukaemia. To be published in summer 2025, it will see three major healthcare shifts: hospital to community, analogue to digital, and sickness to prevention. During the consultation we called for:

- **A National Cancer Plan with a focus on blood cancers**
- **Improvements to the early diagnosis of leukaemia**
- **Commitment to doubling the five-year survival rate for AML from 22% to 44%**
- **More and better data and improvements in clinical practice for leukaemia.**

We collaborated with our charity partners and coalitions to ensure leukaemia was explicitly included in the responses submitted by Cancer52, Blood

Cancer Alliance, and the Charity Medicine Access Coalition. Leukaemia featured in 63 submissions to the 'Ideas for Change' section of the consultation, more than other responses relating to the most common cancers.

This year we also secured meetings with key decision makers such as the National Cancer Programme Director in NHS England, the National Cancer Policy and Elective Care Director in Northern Ireland as well as the Director of the National Disease Registration Service in NHS England. At all of them we discussed priorities for improvements, and ways we can collaborate with them to drive change. We will continue these conversations in 2025.

We have also been working with the NHS Health Economics Unit on a research project which uses data from anonymised GP patient records and admissions to hospital to provide a detailed picture of leukaemia diagnosis. This will help us to understand the impact of late versus early diagnosis and help point to some possible solutions. This project will conclude in 2025.

## Working with GPs for quicker diagnosis

Our work with GPs strengthened this year with a new alliance with the Royal College of GPs, in partnership with Leukaemia Care. We commissioned market researchers Savanta to survey 1,000 GPs across the UK to help us understand the level of awareness of leukaemia symptoms including fatigue, bruising, bleeding and repeated infections. We also wanted to know if they follow clinical guidelines to ensure patients presenting with certain symptoms are referred for a full blood count test in 48 hours – the frontline test which will show anomalies and point to leukaemia.

The survey revealed that levels of symptom awareness are high, but 30% of GPs would not refer for full blood counts. They said this was due to capacity issues in blood testing services or because the clinical guidelines are not clear. Our findings were published at Pulse Today, a popular journal among GPs. The Royal College of GPs then agreed to work together with us to call on the Government to invest more in blood testing services and to increase the GP workforce. We also met with NICE, the national body that develops clinical guidelines, who are willing to work with us to improve the clarity of the referral guidelines for leukaemia.







## Community Champion Darren Poinasamy

Losing his mum Jeya to leukaemia has spurred Darren Poinasamy to truly live up to his title of Community Champion at Leukaemia UK during 2024 with his dedicated and passionate support.



Jeya passed away in 2020 from acute myeloid leukaemia (AML). She had never before been hospitalised for an illness when in November 2019 she developed a cold that wouldn't go away.

***"She was always full of life and just kept on going, but she became really ill and tired," says Darren, 46, who lives in Fleet, Hampshire, and is now CEO of Phoenix Asset Group after a previous career as a Director in the medical communications industry. "As well as the cold she had pains in her legs. But repeated trips to the GP failed to diagnose her. They said the cold would just go away, and that she might have varicose veins."***

In January 2020, Jeya collapsed at home in Egham, Surrey and was rushed to hospital where she received her devastating leukaemia diagnosis. The 67-year-old was moved to a specialist treatment centre at Hammersmith Hospital in London. Because of her age and, by that time, the severity of her cancer, it was decided she wasn't strong enough for a stem cell transplant. She began chemotherapy but passed away during an operation for an internal infection in August.

***"She had worked as an accounts manager for the same company for 40 years and was very dedicated to her job, but I found out afterwards that she had been sleeping at her desk every lunchtime at work. It was very extreme and unlike her to be so tired."***



***"I wish there was better awareness and education amongst primary care physicians so that adding up two or three symptoms would automatically trigger a blood test or take the conversation further. And an emphasis on the care of the patient and understanding how they are feeling emotionally."***

Darren's commitment to a future where leukaemia diagnosis is quicker and care for patients is improved has driven his Community Champion work. He wrote to his MP Alex Brewer to invite her to our drop-in event in February 2025, and a second time asking her to take part in the second reading of Rare Cancers Bill in the House of Commons. Thanks to his diligence, Alex is meeting Darren in person next year. As well as featuring in our Spot Leukaemia campaign press release and carrying out media interviews. He also took part in our Annual Science Seminar's Patient Engagement Session to share his experience.

And Darren isn't the only one in the family who's been actively representing Leukaemia UK. His son Diego, who was nine years old at the time, appeared on a BBC Newsround special in December. Diego was filmed with John Goldman Fellow Dr Simona Valletta in her research laboratory in Manchester, where he was given a tour and an explanation of her work, and a chance to ask questions. The programme was aimed at helping children understand what blood cancer is and what a research scientist does.

***"Diego was five years old when he lost his grandmother and at the time I don't think I appreciated how badly he took it, I was so caught up in my own feelings. Being a Leukaemia UK Community Champion helps me support an amazing charity in as many ways as possible. Not only through fundraising events but activities that can make a real difference to how leukaemia is perceived, diagnosed and treated in the UK. I lost my mother to leukaemia over four years ago and working with people affected by the cancer either as a patient or having lost someone special in their life just keeps me connected to a difficult time that I never want to forget. And if anything I can do helps someone else not lose someone special or enables a better care service, then I hope my mum is looking down and feeling proud."***



## John Goldman Fellow, Dr Simona Valletta



Dr Simona Valletta leads a research team at Manchester University who are looking into acute myeloid leukaemia (AML), the most common leukaemia in adults. The Valletta team is looking at the microenvironment which causes cancer cells to thrive in the hopes of identifying new targets and improving the survival of AML patients.

AML is characterised by the accumulation of immature malignant myeloid cells in haematopoietic tissues. Although new

therapies are providing hope for improved survival, chemotherapy remains the backbone of treatment and haematopoietic stem cell transplantation is still the best hope for many AML patients. The majority of patients achieve complete remission but a significant proportion of them relapse. Relapse is in part due to the leukaemic cells that hijack the tumour microenvironment (TME) creating a more favourable environment and facilitating immune evasion, supporting survival of AML cells.



Darren's son Diego took part in a BBC Newsround Special alongside Dr Simona Valletta



# Invest in research to accelerate progress in diagnostics, treatment and care

Researchers gather at our annual science seminar

## At a Glance

7	new funding awards totalling £1,113,125
4	4 John Goldman Fellowships, 1 John Goldman Fellowship Follow-up Fund and 1 Project Grant
2	three-year projects and 2 John Goldman Fellowships on AML, recognising the progress that needs to be made with the most common form of acute leukaemia
1	Patient Care Pioneer Award – our first, aiming to boost advancements in care
18	published papers, all advancing our knowledge of leukaemia and potential new treatments
20	research awards worth a total of £3,114,993 that were active in all or part of 2024.

Leukaemia UK continues to invest in the research that matters most. This year we were able to continue to support both established and early career researchers in their pioneering work. With a new Patient Care Pioneer Award, we've also expanded our ability to champion vital research in how people with leukaemia are supported and treated.

### Bringing the scientific community, patients and leukaemia advocates together

Over 80 delegates enjoyed our 2024 Annual Science Seminar at Wellcome Collection in London on 24th September 2024.

Amongst them were past and present Leukaemia UK-funded researchers along with Scientific and Medical Advisory Group members, Patient Experience Advisory Panel representatives, Community Champions, Trustees, donors and many other friends of Leukaemia UK.

The Seminar has been held every year since 2017. The event looks back at how far leukaemia research has already come, as well as breakthroughs that could be made in the future.

We also provided £5,000 for International Scholarships that enabled nine early career

researchers to attend the 26th Annual John Goldman Conference on Chronic Myeloid Leukaemia: Biology and Therapy. Held in Prague, Czech Republic in September, the event is organised every year by the European School of Haematology and presents cutting edge talks on current research in chronic myeloid leukaemia (CML).

£4,000 from our Conference Support Fund went to four events in the UK of relevance to the leukaemia research community. These were the Cambridge Lymphoma Biology International Symposium, the Childhood Leukaemia Research UK (CLR-UK) 21st Annual Meeting in Cambridge, the Paul O'Gorman Leukaemia Research Centre CML workshop in Glasgow, and the Fourth Scientific Workshop on Haematological Tumour Microenvironment and its therapeutic targeting in London.

Patients, supporters and Leukaemia UK staff were treated to tours around research laboratories funded by our John Goldman Fellowships this year. While we've done tours in the past, 2024 was the year we committed to doing more, with the aim of showing what the day-to-day work of our Fellows is like to more people.

In July there was a visit to the Francis Crick Institute in London, hosted by previous member of our Scientific and Medical Advisory Group Professor Dominique Bonnet, and Dr Noelia Che welcomed a group to University College London. And in November Dr Victor Lombart and Dr Yang Li hosted a tour of University College London (UCL).





This year's prestigious John Goldman Fellowships saw £563,327 invested in four groundbreaking research projects aimed at developing kinder, more effective treatments for aggressive blood cancers. Each year we award new Fellowships to talented researchers in the early stages of their careers. Each of this year's Fellowships will run for a minimum of 18 months.



Dr Yang Li  
University College London

Dr Yang Li will focus on T-cell acute lymphoblastic leukaemia (T-ALL), a serious blood cancer that primarily affects children and young adults, and in particular the TAL1 gene, which is elevated in about half of T-ALL cases and contributes to cancer growth. By studying how TAL1 interacts with other proteins, Dr. Li aims to develop targeted therapies to disrupt this cancer-promoting process.

Dr Yang Li said: *"It is an honour to be awarded this Fellowship and for my career to get this kind of recognition. Leukaemia UK's support provides me with the opportunity to really focus on the pathway I wish to develop for my own career in the hope of opening more treatment options for people diagnosed with this type of leukaemia."*



Dr Cecile Lopez  
University of Cambridge

Dr Lopez's research aims to uncover how the protein ERG influences gene expression and genome organization within leukaemia cells. Excessive ERG production is linked to AML progression, allowing cancer cells to thrive by activating growth-promoting genes while suppressing those that encourage healthy cells to develop and mature.

Dr Cecile Lopez said: *"This Fellowship is incredibly important to me as it provides me with a wonderful opportunity to carry out vital research for people affected by AML, which is one of the most common types of leukaemia. I hope to play a part in ensuring that people diagnosed with AML have the best chance of benefiting from the most effective treatments."*

Dr Cecile Lopez (University of Cambridge), and Dr Eliza Yankova (University of Cambridge) are both working on acute myeloid leukaemia (AML). AML progresses rapidly and is challenging to treat.

Dr Giorgia Chiodin  
University of Southampton

Dr Giorgia Chiodin will study Burkitt lymphoma (BL), a fast-growing and aggressive type of non-Hodgkin lymphoma that targets B cells in our immune system and which has a poor prognosis. In BL, the sugar modifications found on immunoglobulin proteins, known as N-glycosylation sites, might influence how the tumour behaves. While previous studies on similar cancers suggest these sugar changes could play a significant role in tumour growth, their exact impact on BL is still a mystery. Dr Chiodin is diving into research involving data from a large cohort of BL patients to explore where these sugar modifications are located and how they relate to patient outcomes, aiming to uncover vital patterns that could inform future treatment strategies.



Dr Eliza Yankova  
University of Cambridge

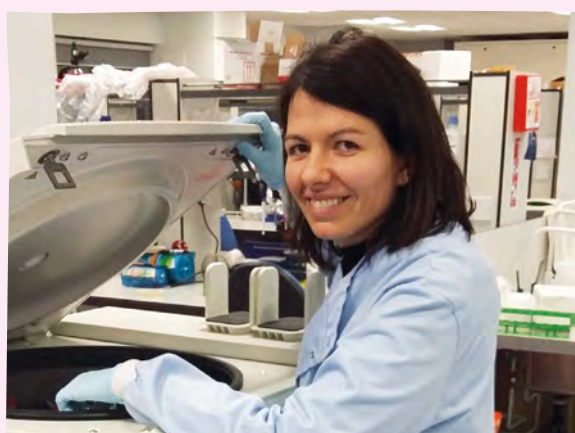
Dr Eliza Yankova wants to develop innovative treatments for AML by targeting the enzyme METTL1. This enzyme has been found to play a significant role in the development of AML by creating a chemical marker on tRNA molecules, which help cancer cells survive and proliferate. Dr Yankova and her collaborators aim to create a small-molecule inhibitor that blocks METTL1's activity, potentially slowing down leukaemia growth while sparing healthy cells.

AML affects approximately 3,100 people in the UK annually, with 2,600 dying from the disease each year. Survival for AML is amongst the worst of any cancer, and our current AML-focussed funding highlights the needs for more research into this highly complex disease.





## John Goldman Follow-up Fund



**This year's John Goldman Follow-up Fund recipient was Dr Samanta Mariani from the University of Edinburgh.** Dr Mariani was awarded her John Goldman Fellowship in 2021 to delve deeper into one form of infant leukaemia; overall, leukaemia is the most common type of cancer in children. This project was also chosen to receive the Olive Boles award for innovation. She and her team explored how leukaemia-associated macrophages – a type of white blood cell – contribute to the development of blood cancer.

Dr Mariani and her team found that macrophages, which are normally involved in defending the body, may actually be helping leukaemia cells to grow in cases of infant

leukaemia. The team was able to identify how these macrophages are altered by leukaemia, opening the door to developing treatments that could reprogram them to return to their original, disease-fighting state.

Dr Mariani's Follow-Up Fund, which totals nearly £250,000, will shift her focus to acute myeloid leukaemia (AML).

The research is centred on two key proteins, GPR56 and GPR97, which are overexpressed in difficult-to-treat AML cases. GPR56 is linked to poor outcomes in AML patients, and recent discoveries suggest that GPR97 may provide a 'back-up' function when GPR56 is depleted, potentially contributing to treatment resistance. Using human AML cells, Dr Mariani's work will aim to understand how these proteins interact and influence the progression of AML. By identifying the signalling pathways they control, her team hopes to repurpose existing drugs or develop new treatments to target these pathways, paving the way for more effective therapies.

**Their ultimate goal is to find treatments that can overcome resistance in AML patients. This could lead to safer, more effective therapies, helping to improve survival rates and quality of life for patients with aggressive AML. Her work could also benefit other areas of cancer research.**

Professor Brian Huntly is a clinical research scientist who combines running a laboratory group with his practice as a Consultant Haematologist in Addenbrooke's Hospital. He is also Head of the Department of Haematology at the University of Cambridge, a member of the European Haematology Association Executive Board and Research Committee and Chair of their Fellowships and Grants Committee. This year he was awarded nearly £249,854 to investigate the role of HOXA9 in acute myeloid leukaemia (AML).

Higher than normal levels of HOXA9 are found in the leukaemic cells of about 70% of AML cases and are associated with worse outcomes. However, while HOXA9 is central to AML development and progression, we know little about how it is regulated or how it controls other genes. Understanding these mechanisms is critical for developing new therapies to improve survival rates.

This project focuses on uncovering how the protein HOXA9 operates in AML including which genes HOXA9 directly regulates across different AML subtypes, how HOXA9 drives cancer growth, and how

HOXA9 itself is controlled at the genetic and protein levels. This should identify potential weak points that could lead to more effective treatments for AML turning it from being a life-threatening disease to one that is curable or can be well-managed.

*"I am delighted that Leukaemia UK is supporting our lab's research on the role of the protein HOXA9 in AML," said Professor Huntly. "We have some exceptionally talented scientists working with us and have built up very strong expertise in the study of HOXA9. We think the project has great potential to help patients. As well as a scientist, I am a haematology consultant who has treated leukaemia patients for thirty years. There have been great improvements to the treatment we can offer patients but there is so much more progress we could make in developing kinder and more effective treatments, and AML is perhaps the area that we need further progress the most."*

## Our new Patient Care Pioneer Award

At Leukaemia UK we recognised there was a need for funding for projects that focused on the patient care side of the leukaemia experience as well as supporting vitally important lab-based research projects. So this year we're delighted to have allocated £50,000 to our very first Patient Care Pioneer Award (PCPA).



Professor Francesco Forconi from University Hospital Southampton is the recipient of the award. His research will develop a cutting-edge risk assessment tool for chronic lymphocytic leukaemia (CLL), aiming to better predict the patients in which the disease is unlikely to progress and who could remain on low or no treatment. This project has the potential to significantly improve quality of life for CLL patients and reduce the strain on the NHS.

CLL is often managed with a 'watch and wait' approach, which some patients call 'watch and worry' as it involves frequent blood tests and specialist monitoring. Only around 25% of CLL patients ever require any actual treatment. Professor Forconi's work wants to predict early on which patients fall into the remaining 75% of patients in the lower-risk category.

Professor Forconi said: *"I am honoured to receive the inaugural Patient Care Pioneer Award from Leukaemia UK. This innovative funding initiative supports our cutting-edge research at University Hospital Southampton, where we are developing an advanced computer-based risk assessment tool for chronic lymphocytic leukaemia (CLL). By precisely characterizing the B-cell receptor, the fundamental driver of the tumour, we aim to identify CLL patients at low risk of disease progression. This will significantly reduce unnecessary clinical interventions, enhance the quality of life for CLL patients, and alleviate strain on healthcare resources. Our work promises to revolutionise the 'watch and wait' approach, providing a more personalized and efficient care pathway that prioritizes patient well-being and optimizes medical resource allocation."*

We are excited to be able to continue to offer our PCPA funding into 2025.

## Published work

This year saw a total of 18 papers and three reviews written by our researchers published, ensuring the scientific community remained aware and up to date with the latest impactful work funded by Leukaemia UK. We were also proud to share these breakthroughs with our supporters, highlighting the discoveries our funding has helped create and offering hope for better treatment options in the future.

Dr Sunniyat Rahman's work on 'Focal deletions of a promoter tether activate the IRX3 oncogene in T cell acute lymphoblastic leukaemia' featured in the well-known journal Blood. The paper was co-authored by Professor Marc Mansour who was also the keynote speaker at our Science Seminar. It focused on the discovery of a new way that cancer genes (oncogenes) can become active, and therefore potential ways to stop them. Dr Sunniyat, from University College London, is a 2019 John Goldman Fellow.

Dr Daniel Coleman wrote about 'Pharmacological inhibition of RAS overcomes FLT3 inhibitor resistance in FLT3-ITD+ AML through AP-1 and RUNX1'. The paper was featured in iScience. The work focused on relapse in acute myeloid leukaemia (AML) which often involves mutations in the FLT3 gene. Dr Coleman wrote about how this resistance can be overcome using pan-RAS inhibitors, offering a potential new treatment strategy. Dr Coleman was a Fellow in 2021 when he worked at the University of Birmingham, and now works for a company researching cancer drugs.

## Project Grant

Each year we award a single Project Grant. They are open to all applicants but usually support the work of well-established researchers.





## DIDACT

The DIDACT Foundation is dedicated to advancing the understanding and treatment of blood cancers such as leukaemia through the education, training, and support of healthcare professionals to develop and deliver clinical trials. These vitally important members of the research and clinical community are working hard to bring about breakthroughs in the fight against blood cancers. DIDACT Foundation Academy puts particular emphasis on empowering the next generation of researchers with the knowledge, skills, and confidence needed to carry out impactful clinical trials.

DIDACT training days gather all these researchers together to connect eager clinical minds and offer tools and insights to enable them to conduct trials safely and ethically.

**In 2024 we were the inaugural funder for DIDACT Foundation Academy, providing £50,000 to support their workshops.** The two Clinical Trials Training Days also saw a mentorship programme being established for young researchers to benefit from the knowledge and methods of more experienced colleagues.

***"A wonderful experience of working together with enthusiastic peers, colleagues, and leaders in the field. The interaction with the network has been invaluable for thinking widely about research proposals, potential future trials, and career planning. It has been helpful to develop alongside a supportive network. The faculty are all approachable, bring a great range of experience, and foster a welcoming environment."*** Dr. Jahanzaib Khwaja (UCLH)



## Spotlight on...

### The legacy of Eli Simpson

While based in the UK and funding UK researchers, Leukaemia UK's work has worldwide impact for the treatment of blood cancers. Dr Giulia Orlando's research project was supported in 2024 by a family from Australia whose little boy died from the rare form of leukaemia that she is studying. Jodie and Pete Simpson, from near Bairnsdale, Victoria, generously gave funding towards her work in the hopes that one day other families won't have to go through the devastating loss they have experienced.

Little Eli Simpson was just 15 weeks old when he began to show symptoms that would quickly become fatally aggressive leukaemia. He was a typical, bouncing healthy baby. But in January 2008, Jodie and Pete spotted bruising and tiny red dots on his legs.

***"He also had blood in his poo and high temperatures,"*** said Jodie. ***"We immediately went to our doctor, who initially thought he might have a bowel obstruction. He referred us to a paediatrician, who requested a blood test."***

The test showed abnormalities and Eli was sent to hospital in Melbourne, four hours away, where he was eventually diagnosed with juvenile myelomonocytic leukaemia (JMML).

***"Eli was given two rounds of intensive chemotherapy each lasting five days, and then three weeks recovery. He had to get his spleen removed and was then given a bone marrow transplant."***

***"The treatment plan for the transplant was terrible. Ten days of strong chemotherapy killing his 'bone marrow factory', so he could take on his donor's. At one stage, he had a medicine so toxic he had to have a bath every six hours for 24 hours."***

Eli was eventually allowed home but tragically became sick again four weeks later and on 16th November 2008 died of a pulmonary haemorrhage - a complication of his transplant. He was just a year old.



***"To have found a researcher looking into JMML is incredible. Since we lost Eli we have gone on to have two more boys. Eli's memory is still with us every day and he would have been 18 this year. We know a cure is in the future but, in the meantime, we feel this is something we can do to help in the present. While it has been nearly 16 years since we lost him, we still hold hope that his legacy helps others."***

## Spotlight on...

### Researcher Dr Giulia Orlando

Dr Giulia Orlando from the University of Oxford received her John Goldman Fellowship in 2021 to study a rare form of chronic blood cancer that affects just 1.2 children in every million - juvenile myelomonocytic leukaemia (JMML).

***"This dataset will pave the way to identify novel vulnerabilities that will hopefully translate into clinical avenues,"*** said Dr Orlando. ***"Being a mom of two young children I cannot even imagine the courage and strength Eli's parents had in confronting with Eli's diagnosis. Studying JMML can help other malignancies and I am hoping to raise awareness on how this research can have broader reach."***





# Build our profile, engagement and influence to grow our support and impact



**Billie the Brave**  
See page 36

## At a Glance

**22%** Brand awareness – up from 19%

**658** separate pieces of media coverage across national and regional media

**3000%** increase in engagements and a 234% increase in impressions month-on-month on social media during Blood Cancer Awareness month in September

**49%** increase in LinkedIn followers and a 29% increase in Instagram followers

**30** new case studies shared their leukaemia stories across our content

It was a year of firsts in our communications, including setting up our first TikTok account, welcoming our first Patron Chris Corbin, and spearheading new digital and social media collaborations with our Ambassadors and celebrity supporters.

We worked closely with our advocacy team's first-ever major campaign around the general election, supporting them with digital marketing to boost numbers of signatures on petitions and emails to prospective and newly elected MPs, MSs and MSPs. The campaign saw strong engagement from our supporters.

We also welcomed on board more storytellers and shared their experiences in new and increasingly engaging ways. Putting people affected by leukaemia at the heart of all our communications has this year enabled us to reach more people than ever before with our messages.

### Helping people understand the impact of our research

A new monthly research blog and a regular science-focused social media series were just two of the ways that we've explained the vital but complex research we carry out to a wider non-scientific audience in 2024. This not only helps people

understand why it's important but increases the number of people who have heard of Leukaemia UK and our ability to raise money to fund more projects.

Our work in highlighting individual researchers has expanded over 2024, including video content for social media, print and broadcast press appearances and lab tours. We're grateful to all our researchers who've this year co-written blogs with us on subjects including infant leukaemia and cord blood stem cell donation and have provided quotes and input into coverage in national and regional media.

### Meet our first Patron Chris Corbin OBE



The renowned restaurateur Chris Corbin was announced in 2024 as Leukaemia UK's first-ever Patron. Chris has been involved with the charity for many years, including driving our successful Who's Cooking Dinner? annual fundraiser.

Chris's passionate involvement comes from his own life-changing leukaemia diagnosis back in 1990 when he was at the peak of his career running restaurants such as The Ivy and was just 38.

What started out as a skin rash ended with the devastating news he had chronic myeloid leukaemia (CML).



***"It was like a thunderbolt. I had a life-threatening disease. I didn't break down on the spot but you always remember those words."***

Chris was treated at Hammersmith Hospital under the expert care of the renowned haematologist Professor John Goldman. Professor Goldman established Leukaemia UK – the charity that became Leukaemia UK.

It took four years to find a suitable stem cell donor, and Chris went into full remission after his transplant. But the donation also changed his life in another unexpected way. He started exchanging letters with his donor and finally met him. Chris and Leicestershire businessman Stewart North went on to become such good friends their families continue to holiday together to this day and Chris and wife Francine are godparents to Stewart's children.



After years of volunteering as the Chair of the Board of Trustees at Leukaemia UK, Chris's new role as Patron came, poignantly, in the 30<sup>th</sup> anniversary year of his stem cell donation.

***"Leukaemia of course changes everyone's life but it was profound for me, and in so many positive ways. I've raised lots of money, I've met some wonderful people, and I feel like I've given back because I was so very lucky to receive so much."***

## Getting creative with social media



As social media platforms continually throw out new ways to utilise them, we continue to experiment with how best to reach the people who need to hear about our work. This year we saw some fantastic results, and we will continue to take this creative approach into 2025.

We tried a series of collaborations with our Ambassadors, celebrities and Who's Cooking Dinner? chefs which helped us to reach new audiences far beyond our owned platforms. We also regularly boosted organic posts, again with success in amplifying our brand to new audiences.

Another new and exciting initiative was **the launch of our TikTok channel**, opening up a whole new group of generally younger people to Leukaemia UK. **Our highest performing video had over 3k views** and more than 200 likes.

A focus not just on new initiatives but on quality content saw **18% more people engage with our posts this year, with 24% of those who saw our posts actually engaging with them**. Total engagements were 317,732.

We're delighted to say that **over 1.3m (1,316,481) people saw our content in 2024. Our Instagram followers grew by 31% and our LinkedIn followers were up by an impactful 52%**. In September alone, which is Blood Cancer Awareness Month, 234% more people saw our content on social media, compared to the previous month – a total of 294k impressions.

## Encouraging people to Spot Leukaemia



**Our annual Spot Leukaemia campaign, run in September in partnership with Leukaemia Care, saw us highlight the often-confusing symptoms of leukaemia** so that patients, relatives and even doctors are more aware of the significance of bruising, bleeding, fatigue and repeated infections.

This year, we rolled out a new strategy for content delivery which allowed us to reach 1.2m people. **We saw a 4,000% increase in engagements across the hashtag Spot Leukaemia in September, compared to the previous month**. And we featured 47 times in national, regional, health and broadcast outlets across September and October. We also ran a successful campaign on Boom radio, specifically targeting our 65+ demographic, which reached more than 900,000 listeners over the six-week campaign period. A survey to 2000 listeners following the campaign found that 73% of people were more likely to visit their GP and ask for a blood test, should they experience any leukaemia symptoms, after hearing the ads.

This year over 16,000 people visited the Spot Leukaemia website in September – a 45% increase on 2023. Encouragingly, 66% of people who answered our survey on the website said they would visit their GP with symptoms. We also worked with medical influencers and media GPs, which was a great way to ensure the credibility of our messaging and to reach more people.

## Reaching our audiences

This year we achieved **658 pieces of coverage across national and regional**, with a focus on quality and impact, targeting outlets with high audience figures in specific groups. Of the **26 broadcast pieces** we achieved with the help of interviews by our spokespeople, **11 of them were on TV including BBC and ITV**. With online news consumption increasing we were also pleased to achieve an impressive 544 online pieces of coverage. Much of this was made possible with the help of the **30 new storytellers we welcomed to Leukaemia UK in 2024**, enabling us to consistently underpin our messages with the real experiences of patients and their families, putting them at the heart of everything we do.

Our website still remains a lynchpin of our communications suite, where people go to look up symptoms, find out about our vital research projects and read the stories of patients and their families. **We were delighted that the numbers of people who searched for us through regular search engines rather than clicking on paid search nearly doubled - 62,010 users, representing an increase of 93%, and 68% above target for the year**. Our referral traffic increased 66% with new links driving traffic from other websites such as hackneymoves.com, the website for the Hackney Half which was our largest third-party challenge event.

Despite the success of our general election campaign in rallying support through emails, we continue to see lower than targeted open and click through rates. We'll be taking a close look at this in 2025 with the aim of improving these figures through activities such as data cleaning and segmentation, improving integration across platforms and developing our supporter journeys and stewardship programmes.

## Celebrity support from our Ambassadors

Our celebrity Ambassadors offered their energetic support to us throughout this year, helping us drive forward our mission to improve treatment and care for people with leukaemia.

As well as our new Patron Chris Corbin, **we announced TV baker Juliet Sear as our Ambassador**. Oscar, the son of her childhood friend, was diagnosed with acute lymphoblastic leukaemia (ALL) at just three years old. After gruelling treatment and

one relapse, Oscar was fortunately saved by ground-breaking medical research. He's now become a professional chef himself.

***"As a mother of three myself, it was heart-breaking to see what Oscar and his family had to go through. Oscar and my children are very close in age, so we were all shocked by his leukaemia diagnosis and how it affected his family,"*** Juliet remembers.

Juliet was a guest at Who's Cooking Dinner? where we also welcomed our Ambassadors Dougray Scott, Hannah Peckham, and Francesco Mazzei (who cooked on the night), as well as reality TV star Georgia Harrison, actor George Sear and podcast host Lennie Ware. Hannah and her son Bodhi, who has leukaemia, were shown in a film on the night and Hannah delivered a powerful speech to the 200 guests.

Hannah, along with ambassador Saffron Vadhvani, also took up the invitation to attend a laboratory tour with one of our John Goldman Fellows to learn more about Leukaemia UK's life-saving research. Both gave interviews about their leukaemia experiences and our work to national media outlets.

Our Christmas Campaign featured Ambassadors and Who's Cooking Dinner? alumni sharing their 'Recipes for Research', giving users a way to download new delicious recipes, give us a donation and sign up for email communication from us. We used the initiative to explore new technical, data and supporter journey learnings.

We're also enormously grateful to Dougray Scott who revived his Mini Masters golf tournament this year ready for launch in 2025 – more about that on our Fundraising page.







## Billie the Brave

Little Billie Turner's story touched everyone when we shared it across the media in 2024, with coverage by ITV News in London and Yorkshire, The Star and The Metro.

Billie had spent nearly a third of her life in hospital undergoing gruelling treatments for leukaemia. At one point the little girl was in intensive care for a week after the chemotherapy drugs that were killing her cancer left her vocal cords paralysed and in need of a tracheostomy. Her incredible strength has given her the nickname, and the Instagram account, @billiethebrave\_.

Billie was just 21 months old at the start of November 2022 when she came down with what appeared to be a sickness bug. After trips to her GP and A&E in Sheffield, where Billie lives with mum Freyja, dad Zac and sister Ada, she was eventually transferred to the Oncology Ward at the Sheffield Children's Hospital. On 29th November 2022 her family was told she had acute lymphoblastic leukaemia (ALL)

*"I felt like the world was about to end. I knew deep down something was wrong with her but we never expected that,"* said Freyja.



Billie had five rounds of chemotherapy and six weeks of a trial immunotherapy drug, and the family have spent the best part of two years going in and out of hospital with her. Freyja and Zac had to cancel their wedding, which was scheduled for September 2023, as Billie was so poorly, but hope to have a combined wedding and celebration for the end of Billie's treatment in 2025.

*"The chemotherapy they use is so harsh on little kids' bodies,"* said Freyja. *"It would be nice to have a future where there are kinder treatments."*

Freyja's childhood friend Hannah Smith was a rock to the family during Billie's treatment, looking after her sister Ada and making sure Ada's routine remained normal. Hannah, who works as a canine physiotherapist, also ran the London Marathon in 2024 and raised £4,000 for Leukaemia UK in honour of Billie. Inspired by Hannah, Zac and Freyja have signed up to run the 2025 event for Leukaemia UK.



## Edita Jucaite

The extraordinary story of how having lip fillers led to Edita Jucaite's leukaemia diagnosis, spread the message about the importance of spotting symptoms across 155 media including BBC South TV, BBC Online, The Mirror, The Sun online, and OK! Magazine online as well as international online outlets.

Edita works as a dental nurse in Banbury, Oxfordshire. At the end of April 2023 she was acting as a model for her dentist colleague who was learning how to do aesthetics injections under highly experienced trainer dentist Dr Brian Franks.

Edita had successfully had both botulinum toxin and dermal fillers before.

*"When the dermal filler went into my lip it immediately swelled up,"* said Edita, 36. *"Dr Franks and his colleague were concerned and said they wanted me to see my doctor. What I hadn't mentioned before we started was that I had bruises elsewhere on my body, which hadn't been caused by me knocking into something."*

*"This swelling and bruising as a consequence of treatment was something I had personally not encountered before,"* said Dr Franks. *"We ended the treatment session at that point. On further questioning Edita then disclosed that she did bruise rather easily and revealed some previous bruising on other parts of her body. I advised her that she should seek a medical opinion."*



*"I said yeah yeah with no intention of going but the next day a large bruise had spread outside my lip and on the inside of my mouth,"* said Edita. *"I was at work as normal and another colleague, who'd lost her sister to cancer, insisted that I ring my GP. She said she'd also noticed I was losing weight, which I hadn't been trying to, and she was worried."*

*"The blood test was done in the morning and by 3pm they called me. The doctor told me they thought I might have leukaemia and needed to go straight to hospital. It was awful, such a shock, I burst into tears. I couldn't hear or think of anything else apart from the fact I might die."*

Edita went straight to Churchill Hospital in Oxford where on 18th May 2023 she was diagnosed with chronic myeloid leukaemia (CML). She was started immediately on chemotherapy tablets and regular blood tests in hospital. Once her white blood cell count had normalised she was put on the drug Imatinib which she will take for the rest of her life.

*"Not many people can say having lip fillers saved their life, but I can,"* said Edita. *"If Dr Franks and my colleague hadn't seen the swelling on my lip for themselves and pushed me to go to the doctor, I would have put it off and put it off, and the consultant said that would have meant it would have been so much harder to treat."*





# Invest strategically to grow sustainable net income



Hackney Half Marathon

## At a Glance

£3.49m	raised from all our fundraising sources - the highest ever amount for the charity
£692k	raised by a new record of 588 individual fundraisers to support our work
25	years of Who's Cooking Dinner? which this year raised £300k
150	people ran the Hackney Half Marathon in May - our biggest ever turnout
£717k	raised through Philanthropic giving - 65% more than last year

2024 was an incredible year for our fundraising. We grew our income to the highest it's ever been, a fantastic £3.49m, which will allow us to invest in even more life-changing research projects and impactful advocacy. This was a particularly remarkable achievement amidst economic turbulence and what remains a challenging environment for all charities trying to meet their targets and fund their work.

Our goal was £3.2m, which we beat thanks to an incredible effort by our small but mighty team and with the compassionate dedication and generous giving of a huge variety of people and organisations.

We had 588 individuals fundraised for us in 2024, more than double the 258 in 2023, raising a magnificent £692k. We are grateful to each and every one of them.

Elsewhere £717k was raised through philanthropic giving with impactful donations from corporate partners, trusts, foundations and individuals, representing a 65% year on year growth from 2023. This is the highest amount we've ever achieved and is the result of our new Philanthropic Giving and Corporate Partnerships Programmes being rolled out.

## 25 years of Who's Cooking Dinner?

Our flagship fundraising event, Who's Cooking Dinner? celebrated its 25th year in 2024 not only with a truly spectacular evening but with a bigger-than-ever fundraising total of £300k. Our overall fundraising through Special Events reached £320k thanks to Who's Cooking Dinner? spin-off and other beneficiary events and donations. This money will help us move forward next year with even more vitally important research projects which aim to develop kinder and more effective treatment for leukaemia.

A combination of fundraising on the night, corporate sponsorship and partnerships contributed to this amazing total, which was over £80k more than we raised last year.



The stunning evening at the Dorchester brought back founders Chris Corbin, who was also announced as Leukaemia UK's new Patron this year, and Peter Gordon. Both have a personal connection to leukaemia.



Chris celebrated the 30th anniversary of his stem cell transplant and recovery from chronic myeloid leukaemia (CML) in 2024, and Peter donated the bone marrow which saved his sister Tracey's life when she was diagnosed with the blood cancer.

This year we used new social media collaborations to highlight the profile of chefs including Tom Kerridge and Claude Bosi. **We reached 175,000 people with our social media content** around the event, and our collaboration reels with chefs and Ambassadors on Instagram received over 162,000 views. **We also achieved 24 pieces of media coverage** across food, London, and lifestyle outlets both before and after the event.

On the evening we showcased a film featuring young Bodhi Peckham, who is currently undergoing leukaemia treatment, making pancakes with Elliot Grover, Executive Chef from 45 Park Lane. The delicious results were enjoyed by one of our John Goldman Fellows, Dr Giulia Orlando. Bodhi's mum Hannah, one of our Leukaemia UK Ambassadors, also delivered a passionate speech reflecting on the impact of her son's diagnosis and how important it is to find kinder and more effective treatments so that children like Bodhi can enjoy their childhood to the fullest.

The evening ended with a set from legendary bass guitarist and leukaemia survivor John Illsley. John was one of the founding members of Dire Straits and has won multiple BRIT and Grammy Awards. He was diagnosed with chronic lymphocytic leukaemia (CLL) in 1999. He received chemotherapy and a successful stem cell transplant.

**Since its inception in 1999, Who's Cooking Dinner? has raised an astonishing £8m** towards leukaemia

research. It's also spread the word to a vast audience about the devastation the disease causes, and the importance of our mission at Leukaemia UK.



20 tables of 10 guests were treated to incredible dishes including lobster from Francesco Mazzei, steak from Elliot Grover of 45 Park Lane, which is listed in the world's best steak restaurants, and Clare Smyth's famous 'Core-teser' dessert. The Grand Auction, following the dinner, gave the winners a money-can't-buy experience where our celebrity and world-class chefs committed to preparing dinner for them in the winner's home or at an exclusive venue.

Previous Who's Cooking Dinner? alumni have included Rick Stein, Giorgio Locatelli, Brett Graham, Jean-Philippe Blondet, Mark Hix, Jose Pizarro, Gordon Ramsay, Angela Hartnett and Marcus Wareing.

This year it was the turn of **Francesco Mazzei from Villa Corinthia, Tim Hughes from Scott's, Sam White from 45 Jermyn Street @ Fortnum & Mason, Romy Gill MBE, Elliott Grover from CUT @ 45 Park Lane, Claude Bosi from Bidendum, Tom Kerridge from The Hand and Flowers, Ravinder Bhogal from Jikoni, Soon Li Ong from Kyubi at The Arts Club, Michael Caines from Lympstone Manor and Clare Smyth from Core, Mario Perera of The Dorchester, Tom Booton from The Grill at The Dorchester, Ashley Palmer Watts of The Devonshire, and Benjamin Ferray Castell of Pavillon amongst others.**

We're incredibly grateful to all our chefs and also to The Dorchester for allowing us to take over their kitchens and for hosting this fabulous evening of food and fundraising.



## Malcolm and Ruth Knight



Malcolm Knight channeled his grief at losing his beloved wife Ruth to a rare leukaemia with a fitting memorial fundraising event in 2024 which raised an incredible £15,000 for Leukaemia UK.

Malcolm, 70, met Ruth at a rowing club in Thames Ditton, Surrey and after their wedding in 1988 they embarked on a life of adventure, activity and community, much of it focused on rowing, boats and their love of being on the water.

Ruth was first diagnosed with myelodysplastic syndrome (known as MDS, a blood cancer which can occur as a precursor to leukaemia) in 2019 through a routine blood donation. She was put on a 'watch and wait' protocol and continued with her rowing, fitness and community activities despite her tiredness. But in spring 2023 her blood tests showed her condition was deteriorating. She was put on an immunosuppressant drug but eventually in November her condition changed to full-blown acute myeloid leukaemia (AML). She started

chemotherapy but then doctors discovered she had the rare Type TP53. This type of AML is so aggressive that there was no form of treatment. Palliative care was organised at home, and Ruth passed away in the early hours of the 29th December 2023.

On Saturday 11th May 2024 – the weekend before what would have been Ruth's 70th birthday - Malcolm completed seven rows of 7km along the Thames near their home. Friends and fellow rowers joined him not just on the water but to hold other events to contribute to the magnificent total. Malcolm has also since been a guest at our Trustee and staff meetings, sharing his experience and emphasising the importance of research particularly into rare types of leukaemia.

**"For us it was seven weeks from the diagnosis to the sad conclusion – incredibly fast which shocked everyone. We MUST do all we can to find a treatment for this form of AML,"** said Malcolm.







## Running for fundraising success

We celebrated yet another milestone this year with our biggest ever team running the Hackney Half Marathon in May. **150 runners raised over £70,000** for us and following this success we'll be buying 200 places in 2025 to raise even more.



In total, **more than 588 people took part in challenge events in 2024 raising a total of £542k**. Our other running events in 2024 were:

- The London Marathon where 49 runners raised £132k
- The London Landmarks Half Marathon where 31 runners raised £22k
- The Great North Run where 10 runners raised £10k

Eleven brave and dedicated fundraisers also opted to jump out of planes this year, sending our fundraising total from skydiving sky-high to £18k!

The popularity of the Hackney Half and the growth across our Challenge Events portfolio meant that the team were exceptionally busy this year. To help with this we appointed a new Challenge Events Officer so that more dedicated support could be given to our enthusiastic runners, continuing to grow this side of our income in the future.

## More ways to support Leukaemia UK

In 2024 we took important strides in making it a smoother process for our incredible supporters to keep in touch with us and vice versa. In April we welcomed our first ever CRM Manager, to oversee the migration of key supporter data onto our Salesforce database across the charity, which will lead to less staff time spent on admin, and more on engaging with our supporters.

**A total of 64 people fundraised for us in the community, up from 23 in 2023. Between them, they raised a fantastic £147k.** From singing in choirs to collections at market stalls and in schools, people mobilised their local communities to stop leukaemia devastating lives. We are very grateful to all of them.

In 2024 we also tested a number of new community fundraising initiatives including Give50 and Cooking Up Change.

Give50 was created to mark the upsetting statistic that only 50% of people diagnosed with leukaemia survive for five years. Supporters were encouraged to use their imaginations and set about raising money with everything from 50 bounces on a trampoline every day for a month to a 50 mile walk and asking 50 friends and family to give £50 each. We were blown away by their creativity and passion.

Cooking Up Change was a local fundraiser, where restaurants competed to raise the most money for Leukaemia UK. The winner was Abby Khalique and her restaurant Purbani in Southampton, who raised an incredible £7,030. We were delighted to welcome them to Who's Cooking Dinner? as their prize and present them with a special trophy to display at the restaurant.

In 2025 we will be looking at creating a mass participation event to add to our community fundraising portfolio and engage even more supporters.

## Generous support from Trusts and Foundations

**In 2024, our Trust income grew by an impressive 30%, raising £178k thanks to the incredible generosity of more than 40 charitable trusts and foundations.** Their support drives groundbreaking research and accelerates progress in our mission to stop leukaemia devastating lives, and with more investment in the team in 2025 we hope to further expand our portfolio of partnerships with strategic grant makers.

### Rosetrees: A thriving partnership for Research Innovation

2024 marked the fourth year of Leukaemia UK's partnership with Rosetrees, enabling the joint funding of another John Goldman Fellow, Dr Eliza Yankova, for two years. Since 2021, this collaboration with Rosetrees - an expert and ambitious funder - has channelled £500,000 into early-career research projects. These projects address critical areas, including:

- Understanding stem-cell relapse
- Developing new treatment pathways for B-cell acute lymphoblastic leukaemia (B-ALL)
- Reshaping the acute myeloid leukaemia (AML) microenvironment to improve survival rates
- Exploring innovative approaches to slowing AML growth.

*"Enabling out-of-the-box thinking is key to our funding philosophy, and we are delighted to continue working with Leukaemia UK to support cutting-edge medical research. This partnership is leading to better understanding and improved treatments for leukaemia."*  
- Dr Vin Rajkumar, Head of Research, Rosetrees

Rosetrees was set up in 1987 by Nat and Teresa Rosenbaum to celebrate their golden wedding

anniversary and is now headed by their son, Richard Ross CBE. Rosetrees makes grants to cutting-edge medical research with the aim of improving the health and wellbeing of society. They currently support around 300 projects, and we are deeply grateful for their ongoing recognition of our vital work.

### Robert Luff Foundation

We welcomed renewed support from the Robert Luff Foundation Ltd. Their generous contribution helps our 2023 Project Grant, led by Professor Terry Rabbitts. His research focuses on a pioneering approach to targeting fusion proteins, using antibodies to penetrate cancer cells - an innovation that could enhance AML treatment while reducing side effects.

## Growing our giving from corporate partners and philanthropists

In yet another record for 2024, we celebrated the highest ever amount raised in support of our work from both corporate partners and philanthropists; the extraordinary overall total of £717k. Their incredible generosity will enable us to speed up funding of research projects and push ahead with our impactful campaigning in the future.

**We raised £116k through our Corporate Partnerships Programme** which was driven by our new strategy securing grants from the pharmaceutical sector. This alone achieved £65k. We also benefitted from £51k from corporate donations.

An incredible £100k came from just three major donors. One of them was a multi-year grant from Hannah and David Lewis, in support of Dr Matthew Blunt's John Goldman Fellowship Follow-up Fund. Hannah and David were instrumental in the founding of the charity Leukaemia, after they sadly lost their daughter Catherine Lewis to chronic myeloid leukaemia (CML) in 1991 when she was aged just 27. Along with Professor John Goldman, Hannah and David raised £10 million for the Catherine Lewis Centre at the Hammersmith Hospital which opened in 2002. We're so grateful to receive this long-term commitment from supporters who have done so much in support of leukaemia research and Leukaemia UK today.

Elsewhere, **£717k was raised through our Philanthropy Programme, an incredible 65% increase on last year and the highest amount we've ever achieved.** We also launched a new Philanthropy Strategy which saw some wonderful partnerships begin to develop. We will drive the expansion of our Philanthropy Programme in the coming year, strengthening existing partnerships and developing new ones. We want to create sustainable income sources so we can plan to invest in more lifesaving research.



## Our award-winning DRTV ad



Our first-ever DRTV (Direct Response Television) advert was launched on Boxing Day 2023. Actor Richard Tate, himself a leukaemia survivor and former patient of Professor John Goldman, played a grieving father who leaves a gift in his Will to help fund leukaemia research, following the loss of his young daughter to the disease.

The advert enabled us to bring Leukaemia UK's message to a mass TV audience for the first time. In 2024 it was shown again across ITV2, ITV3 and ITV4 as well as smaller channels such as Eden, reaching over ten million adults with an average of four views per person. We chose channels that are popular with older audiences, and approximately one in five adults in our target age range saw the advert.

In September we were thrilled to discover **the advert had won the 'Best Medium Charity Film' award in the Third Sector Awards 2024**. Our thanks to the teams at 11 London and MADAM films for helping us create such an inspiring piece. At the time of writing, the film has been shortlisted for the Chartered Institute of Fundraising and the Smee and Ford legacy film awards in similar categories for 2025.

**Leukaemia UK saw its biggest ever donation this**

year, with an extremely generous £800,000 received from the estate of Lili Preston, with the remainder of the bequest still to come. This money will be transformative to our work, and we are so grateful to Lili and all our other supporters who so generously left us gifts in their wills this year, who are included on pages 90-91.

## An extra course is served for Who's Cooking Dinner?

This year we continued to develop ideas for new events that will build relationships with people who have lived experience of leukaemia and want to give back, alongside businesses who want to offer ongoing support at events.

We were delighted when two of our Who's Cooking Dinner? Committee members, Hala Sayess, Founder and CEO of innovative high end hospitality platform Cheffie, and Francesco Mazzei, the renowned Italian-born chef currently in residency at Villa Corinthia in London, came together to host a Supper Club at The Pavilion Club in Knightsbridge in aid of Leukaemia UK in October. Around 50 guests enjoyed an evening of exceptional food and drink while listening to powerful speeches outlining why their support is so needed. This has helped us bring the excitement and flavour of Who's Cooking Dinner? to an even greater number of people.



## Simon Chin

Simon Chin enjoyed 18 months of extra life thanks to the power of research into leukaemia treatments. He chose to give a generous donation in his Will to Leukaemia UK to push this work forward even more, so that it will benefit others.

Simon, who was 65 at the time, and enjoying life in Stamford, Lincolnshire after retiring from a varied business career, was diagnosed with acute lymphoblastic leukaemia (ALL) in October 2020. After a course of chemotherapy, Simon received a stem cell transplant using donor bone marrow cells from his son Michael.

*"It ended up giving us a year and a half more with him, which was amazing,"* said son Phil, 38, who lives in Wheathampstead in Hertfordshire with wife Amy and their three children.

*"We had a big family gathering for his next birthday in October 2021 which was also nice as it was the first time we'd all been together since COVID. Family was the most important thing for him. My son Milo was born in January 2021 so he got to meet him and get to know him, which was precious time."*

Sadly, Simon's leukaemia relapsed, and he passed away in January 2022 at the age of 67.

*"Charity and giving back to society were always a huge part of Dad's life,"* added Phil. *"After developing leukaemia, he changed his Will to include Leukaemia UK."*



Phil also set up a donation page for Simon's funeral which raised £2,000 for us. And he has decided to do even more fundraising – securing a place in the 2025 London Marathon which he will run to support our work.



*"Leukaemia doesn't just affect the patients - it affects the family, the nurses and doctors looking after the person, everyone. Dad wanted to leave something meaningful in the hope that, at some point, there will be a cure for leukaemia and other people won't have to go through everything he did. You never know which donation will lead to the tipping point."*

A still from our award-winning TV ad





Make Leukaemia UK a great charity to work for and with



At a Glance

11	new or updated policies
3	new roles created, and 4 existing roles reshaped
25%	staff turnover, a significant improvement on last year and well below the Chartered Institute of Personnel and Development benchmark
77%	engagement in our second staff survey, an increase of 4%

Leukaemia UK is growing to help meet the needs of our strategy. In 2024 our team worked hard to attract the best talent, increase our diversity, and support everyone to ensure that Leukaemia UK remains a great place to work.

Two major pieces of work that our HR and finance team leadership also carried out this year were a substantial overhaul of all our policies and the development of four new ones including our Equality, Diversity, Inclusion and Belonging (EDIB) policy. The good news is that staff turnover is decreasing, and more people than ever engaged with our second staff survey which also showed a 4% uplift in how positively people felt about working at Leukaemia UK. The results of the survey will inform how we operate during 2025.

Our commitment to Equality, Diversity, Inclusion and Belonging (EDIB)



Our new EDIB policy aims to position Leukaemia UK as a leading charity in living these values. Not just in our employment practices but in everything we do. 2024 was the year we completed drawing up the policy and rolled it out across all our functions.

We used a new documentation system to ensure all of our policy and advocacy work is informed by a variety of patient voices and experiences. And we now collect diversity monitoring information for every researcher who registers for an account with our Funding Management System, so that we can monitor EDIB data on potential, successful and unsuccessful applicants.

The drive for improved EDIB also informed our communications. We added alternative text/image descriptions to our images on social media, emails and the website to make our content more accessible for people with sight loss. Captions and subtitles were included in our video content on social media to make it more accessible for people with hearing loss. We also carefully considered the emojis, text and hashtags we used on social media copy so that it was more easily translated by screen-reader devices for our blind or partially-sighted supporters. We began the process of diversifying our pool of storytellers and strove for representation across our photography and film resources.

We've increased the number of location-specific fundraising activities so that more people can easily take part. Photographers at our key events have captured the diversity of our participants and we ensure these pictures are used across our marketing materials so everyone can 'see themselves' as a part of our community.

We want to recruit the widest possible range of people at Leukaemia UK so we can truly represent the patient community across all aspects of our mission. This year we introduced an anonymous recruitment process to reduce unconscious bias and gave a preview of the types of interview questions in advance so candidates can give their best. We also removed our mandatory Christmas closure period, allowing colleagues to use that leave at other times of year if they wished.

Finally, at this year's Who's cooking Dinner? we focused on securing a more diverse range of chefs and were thrilled when the wonderful Romy Gill, Clare Smyth and Ravinder Bhogal joined us. This will continue to be a big focus for the event going forwards and we hope to make more headway in this area in 2025.



## Attracting new recruits and looking after our staff



We work hard to attract the very best people – which we know then becomes a risk as they're so good, other charities want to recruit them! Making Leukaemia UK a great place to work in every way is the key to retaining staff, and in 2024 we're delighted to say our **staff turnover fell consistently over the year, down to 25% by the end of the year.**

By the end of 2024 we had 30 employees – they include a job-share and two maternity covers so that's 25 roles in total. Amongst these, three new positions were introduced this year – our Head of Policy & Advocacy who lead our general election campaign and will continue to drive our influence at the highest level, two new paid Policy Interns (who were both unfortunately snapped up for full-time roles elsewhere) to encourage and develop talented individuals who are just starting out on their careers, and a CRM Manager. We also re-shaped the roles of Director of Fundraising, Governance & Operations Manager, Head of Digital Engagement and our Corporate Partnerships Manager.

The good news is that next year will bring about further expansion as we get more of the right people in place to meet our goals.

This year we also launched our second Staff Survey which enjoyed increased engagement score in staff survey from 73% to 77%. We took more valuable information from this survey and will keep doing more.

## A fresh chapter for our policies

A full overhaul of our policies kicked off in March this year to make sure they were fit for purpose and leading the way amongst charities. **Four completely new policies were created covering EDIB, carers leave, stress management and whistleblowing.**

Elsewhere, we fully updated our policies on flexible working, sickness absence (including enhancements to paid sick leave), maternity, paternity (which now includes enhanced paternity pay which is above the statutory level, in line with other family-friendly policies), shared parental leave, adoption and surrogacy, and parental leave.

We're proud that these robust, thoughtful and best practice policies make Leukaemia UK a great place to work.

## In-housing and new systems move us ahead

We're delighted to say that this year all our financial management has been brought completely in-house. This will make us more responsive and reactive with improved insights for our management team. And we're very pleased we achieved another clean financial audit. We also introduced and embedded a new digital system for running our Human Resources function.

New management software has been brought in this year to help save time and paper for Board and Committee meetings. And we carried out an audit of the wide range of skills amongst our much-valued Trustees, meaning we can target our recruitment of future Trustees for an excellent fit.

We also comprehensively updated our risk register and began initial stage thinking on the development of our new strategy. To help inform this, and our wider charitable activities, this year we undertook a 'Theory of Change' process. This is a method used by many charities and other organisations to guide their strategies by defining the pathways and steps to the change they want to make – in our case, stopping leukaemia devastating lives. Our Theory of Change was developed with input from patients, clinicians and researchers, and it is going to provide a strong underpinning for the development of our next organisational strategy which will launch in 2027.



## Dr Georgia Papacleovoulou

Leukaemia UK's Head of Policy & Advocacy



A strong dedication to health improvement for everyone has driven Dr Georgia Papacleovoulou throughout her career.

*"Since I was a child, I have been passionate about health and social justice and always wanted to advocate for those in need and improve lives. I was President at the student union at high school and was part of the student association at my university in Greece."*

Born in Athens, Greece, Georgia completed her degree in Molecular Biology and Genetics in Democritus University of Thrace, Alexandroupolis, Greece before moving to Edinburgh in Scotland in 2004. There she did her Masters in Reproductive Biology and a PhD focusing on how natural biological events during a woman's reproductive life can lead to ovarian cancer. Her PhD work was awarded with the prestigious Young Endocrinologist Lecture Prize awarded by the Society for Endocrinology.

She then moved to London to take up a role at Imperial College London and Kings College London as a Biomedical Scientist, looking at a rare complication of pregnancy.

*"During my time in academia, I worked closely with health charities that supported my research. Through this I started developing a strong interest in health policy and advocacy. Research is a missed opportunity if it cannot be brought to the clinic so it can reach the patients when they need it. This is when I decided to change career path and move to the charity sector where I could make a broader impact on improving healthcare systems and outcomes for patients with less common and rare disease."*

Georgia spent seven years at Pancreatic Cancer UK, developing and leading its policy and health improvement programme and securing a number of national policy commitments and in some cases working directly with health policy makers.

*"I was excited when I saw Leukaemia UK's Head of Policy and Advocacy position. Throughout my*

*career, I have dedicated myself to improvements for less common and rare diseases, believing that meaningful societal progress can only be achieved when the needs of these populations are recognised and addressed. Leukaemia remains a relentless killer that doesn't discriminate. I was inspired by the organisation's vision to stop leukaemia devastating lives. It's a small but mighty team and I've thoroughly enjoyed playing my part to drive change during 2024 which has been a pivotal year."*

*"I'm so proud of the impact we've had through our first ever public-facing manifesto campaign that called political leaders to commit to a cancer strategy after the general election and to ensure they champion leukaemia within this. Our manifesto was informed by those affected and we campaigned with our supporters and the wider cancer community; and now the Government has committed to a dedicated national cancer plan due to be published in 2025."*

*"We also pushed ahead with our Spot Leukaemia campaign, co-run with Leukaemia Care, to ensure people with symptoms of leukaemia have timely access to full blood counts - an easy and inexpensive test to diagnose or rule out leukaemia."*

Georgia was given the position of Blood Cancer Alliance's Policy Co-Chair role with Myeloma UK this year, an opportunity for her to collaborate with several other blood cancer charities to drive policy change.

*"Looking ahead, I want to continue to work with all those with the power to drive change. That includes people with lived experience, researchers, healthcare professionals and policy makers within NHS, government and industry. Leukaemia UK will continue building on the momentum and successes of this year and I will work on new projects that will further improve patient outcomes and ensure that those affected by leukaemia have the best diagnosis, treatment and care they deserve to live long and well."*







## Trustee Caroline Evans

One of Leukaemia UK's longest-serving Trustees, Caroline Evans looks back with pride at the journey the charity has been on over the past nine years. She joined ELF (the Elimination of Leukaemia Fund) just before the charity rebranded to become Leukaemia UK and then merged with Leuka.

Caroline, 62, who lives in Greenwich, London, describes the thread that runs through her varied career and her work with Leukaemia UK as a combination of strategy and project work. She studied Natural Sciences at Cambridge and then worked as an editor of science, engineering and maths textbooks at Hodder & Stoughton and MacMillan. She left publishing to become a founding director of EdComs, a communications agency working with schools, brands, government and charities. After a stint as CEO of the Pearson Teaching Awards, Caroline joined the Royal Academy of Engineering to set up and run the Queen Elizabeth Prize for Engineering – a global prize which celebrates engineering innovations and promotes the sector as a career. Since 2015 Caroline has run her own consultancy, working mainly with charities and charitable foundations.

Before being invited to join Leukaemia UK Caroline had been on the Board of other charities. Leukaemia had also affected people close to her. **"My step-brother died of leukaemia when he was nine. After another close family friend was diagnosed and treated at King's College Hospital in London, my dad became a**



**founding Trustee of ELF and did an incredible amount of fundraising and awareness raising to support the work at King's."**

When Caroline's father eventually stepped down, she was asked if she would like to take on the role to continue the family link. **"I joined ELF at a time of major change. It was an enormous privilege to be a Trustee as we set a new path for the organisation. Rebranding to become Leukaemia UK raised our profile and brought opportunities – including the merger with Leuka."**

After nine years in the role, Caroline is stepping away, believing that every charity needs a regular turnover of Trustees to bring fresh energy and perspectives to the board.

**"Much of my working life has been about developing a vision, setting a strategy and managing delivery to achieve a specific goal. I've tried to bring those skills and expertise to my role as a Trustee at Leukaemia UK. It's also been a great pleasure to work with an inspiring team of colleagues – on the Trustee board and within the executive team. I'm proud of all that we've achieved together. As we come to the end of our first five-year strategic plan, it's clear that Leukaemia UK has achieved extraordinary growth and impact and established its place in the sector. On a personal level it's been a rich and fulfilling experience, but it's time for others to take over now. I'm looking forward to seeing where Leukaemia UK goes next."**





Our plans for  
2025 – the  
year we will...





# Our plans for 2025

## Enabler 1

### Advocacy

- Continue to build upon the impact seen in our policy and advocacy work during 2024, with the Government's commitment to a 10 Year Health Plan and a National Cancer Plan as our focus
- Build and strengthen relationships with policymakers around the UK
- Hold our first parliamentary event to launch our policy report, and deepen engagement with MPs and policy makers
- Increase our work with the leukaemia community to make sure that the changes we call for are evidence based and reflect their specific needs
- Expand the number of Community Champions and see an even greater impact in their work.

## Enabler 2

### Research

- Offer the full suite of John Goldman Fellowships, Follow Up Fund, Project Grant and Patient Care Pioneer awards
- Continue to provide valuable funding to support the DIDACT Foundation Academy and other events in the UK of relevance to the leukaemia research community
- Offer a new funding scheme to enable young researchers to attend events that will support their career development
- Connect researchers with their interests outside of the science, whether this is patient input into research, policy and advocacy work or public awareness of leukaemia
- Continue to build our relationship with our fundraising team so that people wanting to give to Leukaemia UK understand the detail and importance of the research their money funds
- Plan two more laboratory tours with our researchers
- Expand the factual and scientific information available across all our platforms.

## Enabler 3

### Communications

- Build our brand among key audiences, increasing understanding of our work, growing our community of supporters and improving the experience for them in being part of LUK
- Make Leukaemia UK the go-to charity on leukaemia through strategic PR planning, with an emphasis on thought leadership and promoting our policy and advocacy priorities
- Develop our real-life stories, looking at how we can increase the diversity of those we work with and exploring different ways to tell their stories
- Grow a network of Ambassadors and Patrons, exploring opportunities for the appointment of a new ambassador in 2025
- Continue to grow our online reach and engagement through our website, social activity and wider digital work
- Maximise the role of research and advocacy within our comms content and activities
- Continue to improve the accessibility of our channels and content
- Grow the team by appointing a dedicated PR and Communications Officer with a focus on events and fundraising to bolster our expertise and improve capacity in the team to take up new projects.

## Enabler 4

### Fundraising

- Test our first ever Facebook Fundraising Challenge in the early summer
- Introduce the Mini Masters Event with 'Golf's Greatest Garden Party' at Sunningdale Heath in the summer (4th July)
- Build on our new Philanthropy Programme, strengthening existing partnerships and developing new ones to create sustainable income sources
- Raise more money by having a diverse portfolio of events and initiatives that appeal to a variety of people so we can invest in more life-changing research and impactful campaigning
- Broaden our supporter network to across more differing groups of people
- Ensure people affected by leukaemia see themselves represented throughout fundraising, and understand the impact of our work across UK communities
- Grow the number of challenge events participants, with 200 places in the Hackney Half and more in other events across the UK.

## Enabler 5

### Great place to work

- Aim to increase the engagement score in our third staff survey
- Investigate how AI can make a difference to the way we work
- Transition to a new IT Support Provider
- Continue to develop and take forward our Equality, Diversity, Inclusion and Belonging approach
- Commence development of our new Leukaemia UK strategy
- Work towards registration with the Officer of the Scottish Charity Regulator (OSCR)
- Undertake a carbon footprint audit and develop our environmental approach
- Introduce enhanced cyber-security assessment and training.



# Structure and Governance





Our passionate team

Senior Leadership Team

The Trustees delegate day-to-day management of the charity to the Chief Executive, who works with a Senior Leadership Team (SLT). The SLT is made up of the Chief Executive and Directors of Income, Communications, Research and Advocacy, and Finance & Resources.

Staff

Over the course of 2024 our staff numbers increased to 30, with a FTE of 26.

Alongside our central London premises, new for us in 2023, we have continued to support staff through our hybrid working, wellbeing and family-friendly policies, which have been reviewed according to staff feedback.

Volunteers

We are nothing without our volunteers who generously give their time and expertise to support us, and this year we have reviewed our volunteering policies and processes to make sure that we can use this valuable resource as effectively as possible.

We are incredibly grateful to the 44 individuals who have given up their time for us this year. This includes the 28 experts that make up our Scientific and Medical Advisory Group, the 11 members of our Patient Experience Advisory Panel and the five people who provided volunteer support around events and community fundraising. We are incredibly grateful to all our volunteers for everything they do to help the charity, people with a diagnosis of blood cancer, and their friends and families.

Status

Leukaemia UK operates as a Charitable Incorporated Organisation (CIO) and is governed in line with its constitution dated 3 December 2013. Our objectives are to relieve sickness and preserve and protect health, in particular by:

- Promoting research into leukaemia and/or related disorders
- Providing support directly or indirectly to people affected by leukaemia and/or related disorders, including the maintenance of specialist treatment units.

Public benefit

Trustees can confirm that they are informed by the Charity Commission’s guidance on public benefit and that they have complied with Section 17 of the Charities Act 2011 to have due regard to this area. Any research that we fund must be available to everyone regardless of race, religion, gender, sexual orientation, or age, amongst other factors.

Board of Trustees

Trustees contribute their services to the Board on a voluntary basis and are responsible for the governance of the charity, ensuring it meets its statutory responsibilities, as well as determining overall strategy, policies, and direction, with the expert guidance of the Senior Leadership Team. We aim to appoint Trustees with a diverse range of skillsets and backgrounds, which includes those with lived experience of blood cancer, in line with our aim to put those affected at the heart of all we do.

The constitution states there must be a minimum of three and a maximum of 15 Trustees. All Trustees have a term length of three years and are eligible to serve three consecutive terms. A Trustee who has served for three consecutive terms may not be appointed for a fourth consecutive term save with the approval of two-thirds of the Board of Trustees.

Any new Trustees are invited by agreement of the existing Trustees, having due regard to the skills, knowledge and experience required for the effective administration of the charity.

The full Board usually meets four times a year. In January 2024 there was an additional Board away day with a focus on reviewing progress against the strategic plan.

The Leukaemia UK Board of Trustees consists of:

- Alastair Adam
- Amanda Stewart (Vice-Chair)
- Professor Alejandro Madrigal
- Caroline Evans
- Chris Corbin OBE (resigned July 2024)
- Ellen Broomé

- Emma McKinley
- Ian McCafferty CBE (Chair)
- James Barlow
- James Fairclough
- Dr Jo Reynolds
- Karen Cracknell
- Luke Cripps
- Miriam Jordan Keane



We would like to extend our heartfelt thanks to Chris Corbin OBE for his outstanding contribution to Leukaemia UK, including his impactful tenure as Chair. His leadership and dedication have helped shape the charity we are today, and we look forward to continuing to work with him in his new role as Patron.





## Scientific and Medical Panel

Independent expert review is an integral part of the decision-making process when awarding funding. Leukaemia UK is a member of the Association of Medical Research Charities (AMRC), the UK membership organisation of leading medical and health research charities. Our funding review process complies with the AMRC's principles of expert review, which ensure that member charities support high quality research, maximise the impact of their funding, and deliver changes that really matter to their communities.

All funding applications are reviewed by at least five members of our Scientific and Medical Advisory Group (SAMAG) and at least two independent external expert reviewers, as well as representatives from our Patient Experience Advisory Panel. SAMAG is the collective name for the Leukaemia UK Expert Review Panels (ERPs) that review all applications to

Leukaemia UK for funding. In 2024, Leukaemia UK had three ERPs: the John Goldman Fellowship (JGF) ERP; the Project Grant and JGF Follow-up Fund ERP; and the Patient Care Pioneer Award ERP.

Leukaemia UK implements a policy on Conflicts of Interest, whereby all ERP members and independent external expert reviewers are asked to declare any conflicts they may have with the application or applicant/s, in order that these are properly managed, in line with the AMRC's principle of impartiality. The reviewers assess applications for their relevance, quality and feasibility, to make recommendations for funding.

Leukaemia UK's ERPs make their recommendations for funding to Leukaemia UK's Board of Trustees, who make the final decisions on which applications will be approved for funding.

## In the year under review, SAMAG membership consisted of:

- Ms Surabhi Chaturvedi, King's College Hospital
- Ms Ruth Clout, Christie NHS Foundation Trust
- Prof. Mark Cragg, University of Southampton
- Prof. Nick Cross, University of Southampton
- Dr Amir Enshaei, Newcastle University
- Prof. Francesco Forconi, University of Southampton
- Prof. Olaf Heidenreich, Newcastle University
- Prof. Vignir Helgason, University of Glasgow
- Prof. Ian Hitchcock, University of York
- Dr Karen Keeshan, University of Glasgow
- Ms Michelle Kenyon, King's College Hospital
- Prof. Ulf Klein, University of Leeds
- Prof. Cristina Lo Celso, Imperial College London
- Dr Orla McCourt, University College London Hospital
- Dr Sharon McKenna, University College Cork, Ireland
- Prof. Alison Michie, University of Glasgow
- Dr Kim Orchard, University Hospital Southampton NHS Foundation Trust
- Dr Elspeth (Beth) Payne, University College London
- Prof. Chris Pepper, University of Sussex
- Dr Cristina Pina, Brunel University
- Dr Lisa Russell, Newcastle University
- Ms Nicola Scott, Leeds Teaching Hospital
- Dr Claire Seedhouse, University of Nottingham
- Prof. John Snowden, Sheffield Teaching Hospitals NHS Foundation Trust
- Prof. Alex Tonks, Cardiff University
- Dr Roochi Trikha, King's College Hospital
- Prof. Helen Wheadon, University of Glasgow
- Prof. Owen Williams, University College London, Great Ormond Street Institute of Child Health

## Finance Sub-Committee

The Committee meets four times a year and in the year under review its members were: Alastair Adam, Emma McKinley and James Barlow (Chair). Ian McCafferty also attends as an observer. The committee is responsible for advising the Board on operational and strategic financial planning, including reviewing plans, budgets, management accounts and reforecasts. It reviews matters of financial governance including financial policies, processes and controls, and advises on the appointment of external auditors. The committee also sets and recommends the Investment Strategy to the Board for approval and oversees the management and performance of investments.

## People & Culture Sub-Committee

This committee provides assurance to the Board on the charity's culture, workforce planning and development, HR policies and procedures, and other matters related to organisational development. The Committee meets three times a year and its members during the year under review were Amanda Stewart, Caroline Evans, Ellen Broomé and Karen Cracknell (Chair).

## Remuneration Sub-Committee

The Committee meets at least once a year and in the year under review was made up of Amanda Stewart, Caroline Evans, Ellen Broomé, Ian McCafferty (Chair) and Karen Cracknell. It sets and reviews the pay and benefits policies and processes for the charity, using sector benchmarking. The Committee reviews pay on an annual basis. Each year a pay award is considered but not guaranteed, with any agreed uplift applicable from April.

## Development Sub-Committee

This committee provides assurance to the Board on the charity's strategic investment in growing sustainable net income, profile, engagement and influence, in support of the five year strategy to save and improve more lives. It also assists the Board in establishing ambitious but realistic goals and targets in relation to this, provides a forum for discussion of best practice and reviews risks and mitigations related to the charity's income, marketing and communications. The committee met three times in the year under review and is made up of Board members Alejandro Madrigal, Chris Corbin, Jo Reynolds, Luke Cripps, and Miriam Jordan Keane (Chair), as well as external expert Antony Newman (Global Brand Director at Merlin Entertainments).





Our finances

This report covers the period from 1st January 2024 to 31st December 2024.

Income

Total income for 2024 came to £3,967,327 including £104,422 of investment income. The main sources of income came from grants, legacies and donations, including donated goods and services, totalling £3,632,742.

Fundraising expenditure

Fundraised income during 2024 was achieved with an increase in expenditure from £1,415,067 in 2023 to £1,547,592. The increased expenditure was largely due to consolidating the growth of the staff team to promote growth in income post-merger. This is leading to successful income generation which can sustain and grow our world-class research programme to deliver long-term progress in leukaemia treatment, diagnosis and care.

Charitable expenditure

Expenditure on charitable activities during 2024 was £2,271,173 - increased from £2,074,677 in 2023.

Grants

A total of £1,200,712 was committed as new grants in the year.

Surplus

We ended the year with a surplus after net gains on investments of £260,709 compared to a deficit of £549,681 in the prior year.

Reserves

The charity holds free reserves to:

- Provide a financial buffer to manage short to medium term income risks and/or unexpected costs
- Provide a buffer in the event of a significant decline in the value of the charity's investment portfolio.
- Invest in strategic opportunities that further the charity's aims
- Maintain stakeholder and donor confidence and meet legal obligations.

The Trustees consider it prudent to maintain free reserves (i.e. unrestricted, undesignated funds) equivalent to six to nine months of expenditure excluding grant funding. This would allow for a managed wind-down of the charity, including paying staff notice periods, statutory redundancy pay and lease liabilities.

Based on the current budget, a full year's expenditure excluding grant funding rounds to £3 million. This equates to a target range of £1.5 million to £2.25 million.

The charity has set up two designated funds in 2024:

- 1) AML Fund - £300,000 of reserves have been designated to support current and future research into Acute Myeloid Leukaemia (AML). The trustees have set this sum aside to reflect their strategic commitment to investing in this area.
- 2) Fixed Asset Fund - a designated fixed asset fund has been created to mirror the net book value of fixed assets, to reflect the fact that they are illiquid, and therefore not part of free reserves.

Reserves at 31 December 2024

At the end of 2024, the total funds of the charity were £2,667,149 up from £2,406,440 at the end of 2023, made up as follows:

	2024	2023
Restricted reserves	£110,719	£96,902
Designated AML fund	£300,000	-
Designated Fixed Asset fund	£15,613	-
Unrestricted reserves remaining	£2,240,817	£2,309,538
Total reserves	£2,667,149	£2,406,440

The current level of free reserves of £2,240,817 is towards the upper end of the target range of £1.5m to £2.25m, however, our strategy and funding model developed in 2022 sets out a plan to spend some of these funds to accelerate progress towards our vision and mission over the remainder of the strategy period. The expectation is that free reserves will be well within the target range by the end of 2025.

The reserves policy will be reviewed annually, or sooner if there is a significant change in the charity's financial situation or risk profile.

Financial statements

The charity's financial statements are set out on pages 73 to 89.



Going concern

Like many charities, Leukaemia UK is planning for the continued impact of the cost-of-living crisis, aware that as donors feel the squeeze, charitable donations are an area that may have to be cut from people's spending. However so far, thanks to the incredible generosity of our supporters and the hard work and dedication of our team, the impact of this has not yet been significantly felt.

Our plan and budget for 2025 will see us drawing on our reserves to invest in growing the charity post-merger as we deliver our strategy and continuing to diversify our income streams to improve our financial resilience, focusing particularly on growing our supporter base. We have reviewed our Reserves Policy so we can invest in our charitable work to deliver greater impact for those affected by leukaemia. It is therefore reasonable to expect that the charity has adequate resources to continue in operation for the foreseeable future, representing a period of at least 12 months from authorisation of the financial statements. Given this, the Trustees consider it appropriate for the financial statements to be prepared on a going concern basis as outlined in the Statement of Trustees' Responsibilities.

Investments

The Trustees take a cautious and prudent approach to investment of the charity's funds. To ensure that investments are appropriately diversified, they have agreed for funds to be split between:

- Short and medium-term bank money market deposits
- A portfolio of investments managed by the firm of stockbrokers, Investec.

This split of resources is designed to balance potential returns with appropriate risk, as well as ensuring enough liquidity to meet cash flow requirements. The long-term investment portfolio is managed by investment managers to ensure a cash income source through dividends and interest which is withdrawn from the portfolio on a quarterly basis, and to achieve capital growth by reinvesting funds from disposed of investments.

The only restriction placed on the investment portfolio is an instruction that the firms must not invest charity funds in tobacco companies. All long-term investments are managed by Investec, which provides regular updates to Board meetings throughout the year. Investec is invited annually to present to the Finance & Audit Sub-Committee.





Ethics

Equality, Diversity, Inclusion & Belonging

Leukaemia UK recognises the critical importance of working with individuals from all backgrounds and community groups affected by and interested in leukaemia. This helps build a charity that values knowledge, understanding, innovation, and difference in others.

We are committed to ensuring all current and potential staff members and volunteers are offered the same opportunities regardless of their sex, sexual orientation, age, disability, gender status, maternity status, marital status, race, religion, social status or economic status.

We listen to those who have received a leukaemia diagnosis and want to make sure that their experiences and opinions are being heard. By focusing on what matters most to those whose lives are impacted by leukaemia, we will do everything we can to make sure that the next person diagnosed has a better experience than the last. We aim to listen, learn and collaborate with others to increase equality, diversity and accessibility across all we do.

We have developed an Equality, Diversity, Inclusion & Belonging Policy, and introduced it to staff and Trustees in learning and development workshops. We have begun to improve our offer to employees and introduced new recruitment processes to enhance and broaden our appeal and reach to potential candidates and limit bias. We have recruited a job-share partnership to our Director of Communications role. Given our small workforce this highlights our commitment to flexible working and was covered in the charity sector media. We also have a Patient Experience Advisory Panel to help us better represent and reflect the diverse experiences of those affected by leukaemia and renewed the membership of our Board of Trustees and Scientific Panel.

Use of animals in research

Animal research has played a vital part in many medical discoveries. Some of the biggest breakthroughs in our understanding of blood cancers and the development of new treatments would not have been possible without the use of animals. Most biomedical research is carried out using non-animal methods, but sometimes these methods simply cannot replace the use of animals.

Leukaemia UK supports the view, together with the majority of academics and every major UK charity that conducts medical research, that using animals in research is sometimes necessary to develop new treatments for human diseases.

Leukaemia UK will fund proposals that include research with animals only where there is no alternative, and where the proposals fully comply with the Animals (Scientific Procedures) Act 1986. All animal research carried out in the UK must be

approved and licensed by the Home Office.

Leukaemia UK is a member of the Association of Medical Research Charities (AMRC). All AMRC members support the AMRC position statement on the use of animals in research.

We support the guiding principles of the 3Rs (replace, refine and reduce) that underpin the humane use of animals in scientific research. Any proposed research using animals is therefore required to consider how to:

- 1. ‘Replace’ animals with alternatives wherever possible
- 2. ‘Refine’ experimental techniques, to ensure best practices for animal welfare
- 3. ‘Reduce’ the number of animals used to a minimum, to obtain information from fewer animals or more information from the same number of animals.

Working with life science and the healthcare industries

Leukaemia UK understands the importance of working in partnership with all stakeholders with an interest in leukaemia and other blood cancers, including industry, to achieve common goals and to ultimately improve the lives of people affected by leukaemia.

Leukaemia UK welcomes funding from a wide range of companies from life science and healthcare industries and has no preference for working with any one company. Such partnerships should enable us to achieve the charity’s mission to stop leukaemia devastating lives, without compromising our independence and integrity, and we will only work with pharmaceutical and biotechnology companies where we can ensure compliance with the most recent ABPI Code of Practice. In 2024 income from life science and the healthcare industries accounted for 1.6% of our income.

We acknowledge that both collaborative working and financial support from life science and health care industries are important, but at the same time we recognise the need for partnerships to be transparent. We operate any such partnerships according to a series of rules and guidelines, underpinned by agreed governance principles.

Fundraising ethics

Leukaemia UK voluntarily subscribes to the Fundraising Regulator and its Code of Fundraising Practice. The Fundraising Regulator investigates and takes appropriate action on cases of public concern. We are also signed up to the Fundraising Preference Service which enables individuals to opt out from receiving fundraising communications from us. We continue to work closely with the Fundraising Regulator and with the Institute of Fundraising to

help improve standards and ways of working across the charity sector.

Complaints handling

Complaints and supporter feedback provide important sources of information about the impact that our work has on our supporters and members of the public, giving us insights and lessons for future fundraising activities. We are committed to delivering the highest possible standard of service and supporter care.

As part of our complaints policy, we promise:

- To provide a fair complaints procedure that is clear and easy to use
- To publicise our complaints procedure so that people know how to make a complaint
- To make sure that all complaints are investigated in a timely way
- To make sure that complaints are, wherever possible, resolved and that relationships are repaired
- To gather information that helps us to improve what we do.

During 2024 we received two complaints from supporters regarding a campaign which they found upsetting. Our fundraising team worked quickly to discuss and explain the issues raised with the supporters concerned.

Our risks

We have a stringent approach to risk management, with the risk register and processes reviewed quarterly by the Finance Committee and by the full Board of Trustees. The Trustees actively review the major strategic, business and operational risks that the charity faces and confirm that they have established systems to manage significant risks.

The risk management process takes account of several factors when identifying risks, including internal factors such as staff expertise, cash and donation levels, and current commitments, as well as external factors including reputational risk, trends within the sector and changes in legislation. Each risk is then given a rating based on the level of impact it might have on the operations of the charity against the likelihood of any negative impact occurring.

The top three risks identified by the management team at the end of the reporting period are outlined below:

Risk	Mitigating activities
Income fails to grow in line with plans and strategy, or declines	<ul style="list-style-type: none"><li>• Investment in fundraising team to grow sustainable income streams</li><li>• Investment in communications team to grow brand awareness and underpin successful fundraising</li><li>• Investment in legacy marketing to grow this income stream</li><li>• Income growth trends monitored at SLT and Board</li><li>• Reserves can cover some short-term shortfalls</li></ul>
Cost-of-living crisis exerts critical squeeze on charity finances, with increased costs and reduced income	<ul style="list-style-type: none"><li>• Investment has been made in fundraising team aiming to shore up and increase income</li><li>• Diversification of fundraising efforts into corporate, pharma, trusts, and increased legacy marketing</li><li>• Regular monitoring and forecasting to provide early warning of pinch points</li><li>• Reserves can be used to plug short-term gaps</li></ul>
Failure to attract and retain suitable talent	<ul style="list-style-type: none"><li>• Benefits package improved in 2023</li><li>• Salaries kept under review and pay increase process in place</li><li>• Development plans (training/qualifications) in place and reviewed</li><li>• Exit interviews undertaken to capture feedback and learnings</li><li>• Annual staff survey to gather feedback and benchmark against other charities</li></ul>



# Statement of Trustees' Responsibilities



The Board of Trustees presents its Annual Report and Accounts for the year ended 31 December 2024. The Trustees are responsible for preparing the Trustees' Annual Report and the financial statements in accordance with applicable law and regulations. Charity law requires the Trustees to prepare financial statements for each financial year. Under that law, they are required to prepare the financial statements in accordance with UK Accounting Standards and applicable law (UK Generally Accepted Accounting Practice), including FRS 102, The Financial Reporting Standard applicable in the UK and Republic of Ireland. Under charity law, the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the charity and any excess of expenditure over income for that year.

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

- Select suitable accounting policies and then apply them consistently
- Make judgements and estimates that are reasonable and prudent
- State whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue its activities.

The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charity's transactions and disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Charities Act 2011. They have general responsibility for taking such steps as are reasonably open to them to safeguard the assets of the charity and to prevent and detect fraud and other irregularities.

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

In addition, the Trustees confirm that they are happy that the content of the annual review in pages 3 to 65 of this document meet the requirements of the Trustees' Annual Report under charity law. They also confirm that the financial statements have been prepared in accordance with the accounting policies set out in the notes to the accounts and comply with the charity's governing document, the Charities Act 2011 and Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with FRS 102, The Financial Reporting Standard applicable in the UK and Republic of Ireland.

Each person who is a Trustee at the date of approval of this report confirms that:

- So far as the Trustee is aware, there is no relevant audit information of which the charity's auditors are unaware
- The Trustee has taken all the steps they ought to have taken as a Trustee to make themselves aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

This report was approved and authorised for issue by the Board of Trustees on 17th July 2025 and signed on its behalf.

A handwritten signature in black ink, appearing to read 'I.A. McCafferty'.

Ian McCafferty CBE, Chair





# Accounts 2024





# Independent auditor's report to the Trustees of Leukaemia UK

## Opinion

We have audited the financial statements of Leukaemia UK (the 'charity') for the year ended 31 December 2024, which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cashflows and the related notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31 December 2024, and of its incoming resources and application of resources, including its 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 Charities Act 2011.

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

## Conclusions relating to going concern

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

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

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

## Other information

The other information comprises the information included in the Trustees' annual report, other than the financial statements and our auditor's report thereon. The Trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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

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

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

## Responsibilities of Trustees

As explained more fully in the Trustees' responsibilities statement, the Trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the charity or to cease operations, or have no realistic alternative but to do so.

## Auditor responsibilities for the audit of the financial statements

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

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect

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

Our assessment focused on key laws and regulations the charitable company has to comply with and areas of the financial statements we assessed as being more susceptible to misstatement. These key laws and regulations included but were not limited to compliance with the Charities Act 2011, taxation legislation, data protection, anti-bribery and employment legislation.

We are not responsible for preventing irregularities, including fraud. Our approach to detecting irregularities, including fraud, included, but was not limited to, the following:

- obtaining an understanding of the legal and regulatory framework applicable to the Charity and how the Charity is complying with that framework, including agreement of financial statement disclosures to underlying documentation and other evidence;
- obtaining an understanding of the Charity's control environment and how the Charity has applied relevant control procedures, through discussions with management and by performing walkthrough testing over key areas;
- obtaining an understanding of the Charity's risk assessment process, including the risk of fraud;
- reviewing meeting minutes of those charged with governance throughout the year; and
- performing audit testing to address the risk of management override of controls, including testing journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for bias.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

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

*Glen Bott*

Glen Bott (Senior Statutory Auditor)  
for and on behalf of

**Cooper Parry Group Limited**  
Cubo Birmingham  
4th Floor  
Two Chamberlain Square  
Birmingham  
B3 3AX

18th July 2025.

Cooper Parry Group Limited are eligible to act as auditors in terms of section 1212 of the Companies Act 2006.

# Statement of financial activities

For the year ended 31 December 2024

	Notes	Unrestricted Funds 2024 £	Restricted Funds 2024 £	Total Funds 2024 £	Total Funds 2023 £
<b>Income from</b>					
Donations and legacies	3	2,973,286	659,456	<b>3,632,742</b>	2,543,866
Other trading activities	4	230,163	-	<b>230,163</b>	173,408
Investments	5	104,422	-	<b>104,422</b>	91,012
<b>Total income</b>		<b>3,307,871</b>	<b>659,456</b>	<b>3,967,327</b>	2,808,286
<b>Expenditure on</b>					
Raising funds	6 & 7	1,547,592	-	<b>1,547,592</b>	1,415,067
Charitable activities	6 & 8	2,220,722	50,451	<b>2,271,173</b>	2,074,677
<b>Total expenditure</b>		<b>3,768,314</b>	<b>50,451</b>	<b>3,818,765</b>	3,489,744
Net gains/(losses) on investments	12	112,147	-	<b>112,147</b>	131,777
Net income/(expenditure)		(348,296)	609,005	<b>260,709</b>	(549,681)
Transfer between funds	16	595,188	(595,188)	-	-
Net movement in funds		246,892	13,817	<b>260,709</b>	(549,681)
<b>Reconciliation of funds</b>					
Total funds brought forward	16 & 17	2,309,538	96,902	<b>2,406,440</b>	2,956,121
<b>Total Funds carried forward</b>	16 & 17	<b>2,556,430</b>	<b>110,719</b>	<b>2,667,149</b>	2,406,440

The notes on pages 76 to 89 form part of the financial statements.  
All the above results arise from continuing activities.  
There were no other recognised gains or losses other than those stated above.



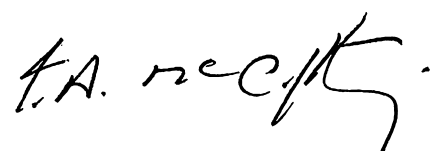
## Balance sheet

As of 31 December 2024

	Notes	Total Funds 2024 £	Total Funds 2023 £
<b>Fixed assets</b>			
Tangible assets	11	15,613	26,865
Investments	12	3,561,192	2,971,915
<b>Total fixed assets</b>		<b>3,576,805</b>	<b>2,998,780</b>
<b>Current assets</b>			
Debtors and prepayments	13	562,929	1,111,499
Investments		169,244	215,653
Cash at bank and in hand		1,431,983	745,138
<b>Total current assets</b>		<b>2,164,156</b>	<b>2,072,290</b>
Creditors - amounts falling due within one year	14	(2,117,990)	(1,590,452)
<b>Net current assets</b>		<b>46,166</b>	<b>481,838</b>
Grants awarded - due in more than one year	15	(955,822)	(1,074,178)
<b>Total net assets</b>		<b>2,667,149</b>	<b>2,406,440</b>
<b>Funds of the charity</b>			
<b>Restricted</b>	16 & 17	110,719	96,902
<b>Unrestricted</b>			
Designated	16 & 17	315,613	-
General	16 & 17	2,240,817	2,309,538
<b>Total unrestricted</b>		<b>2,556,430</b>	<b>2,309,538</b>
<b>Total Funds</b>		<b>2,667,149</b>	<b>2,406,440</b>

The notes on pages 76 to 89 form part of the financial statements.

These financial statements were approved and authorised for issue by the Board of Trustees on 17th July 2025 and signed on their behalf by:



Ian McCafferty CBE  
Chair

## Statement of cash flows

For the year ended 31 December 2024

	Total Funds 2024 £	Total Funds 2023 £
<b>Cash flows from operating activities</b>		
Net income/(expenditure) for period (as per SOFA)	260,709	(549,681)
Adjustments for:		
Depreciation charges	11,252	10,034
(Profit)/loss on disposal of tangible asset	-	-
Investment income received	(104,422)	(91,012)
Net gains/(losses) on investments	(112,147)	(131,777)
(Increase)/decrease in debtors	548,570	(550,046)
Increase/(decrease) in creditors due in less than one year	527,538	(97,530)
Increase/(decrease) in grants payable - due in more than a year	(118,356)	367,442
	<b>752,435</b>	<b>(492,889)</b>
<b>Net cash flows from operating activities</b>	<b>1,013,144</b>	<b>(1,042,570)</b>
<b>Cash flows from investing activities</b>		
Investment income received	104,422	91,012
Purchase of tangible fixed assets	-	(12,613)
Proceeds from sale of investments	2,852,731	701,717
Purchase of investments	(3,332,798)	(742,014)
(Increase)/decrease in short term investments	46,409	(8,212)
Decrease/(increase) in cash held in portfolio	2,937	60,797
<b>Net cash flows from investing activities</b>	<b>(326,299)</b>	<b>90,687</b>
<b>Change in cash and cash equivalents in period</b>	<b>686,845</b>	<b>(951,883)</b>
Cash at bank and in hand brought forward	745,138	1,697,021
<b>Cash at bank and in hand carried forward</b>	<b>1,431,983</b>	<b>745,138</b>

The notes on pages 76 to 89 form part of the financial statements.



# Notes to the financial statements

## 1. Accounting policies

### Basis of preparation of the financial statements

The financial statements have been prepared in accordance with 'Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) second edition (effective 1 January 2019)', the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), including Update Bulletin 2, and relevant charities law.

The effect of any event relating to the year ended 31 December 2024, which occurred before the date of approval of the financial statements by the Board of Trustees has been included in the financial statements to the extent required to show a true and fair view of the state of affairs at 31 December 2024 and the results for the year ended on that date.

The functional currency of the Charity is sterling and amounts in the financial statements are rounded to the nearest pound.

### Legal status

Leukaemia UK is a charitable incorporated organisation registered in England & Wales, and meets the definition of a public benefit entity. The registered office is 26 Great Queen Street, London, WC2B 5BL.

### Going concern

The Trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the Charity to continue as a going concern. The Trustees have made this assessment for a period of at least one year from the date of approval of the financial statements.

The Trustees have considered the Charity's forecasts and projections and have taken account of pressures on donation, fundraising and investment income. After making enquiries, the Trustees confirm that the Charity has adequate resources to continue in operational existence for the foreseeable future and that there are no material uncertainties that would impact this assessment. The ongoing global economic uncertainty has had no material impact on this assessment. The Charity therefore continues to adopt the going concern basis in preparing its financial statements.

### Fund Accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees in

furtherance of the general objectives of the Charity and which have not been designated for other purposes.

Designated Funds are unrestricted funds which have been designated for a specific purpose by the Trustees. The aim and use of each designated fund is set out in note 16 of the financial statements.

Restricted funds are funds that are to be used in accordance with specific restrictions imposed by donors or that have been raised by the Charity for particular purposes. The cost of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in note 16 of the financial statements.

### Income

All income is included in the Statement of Financial Activities when the Charity has entitlement, there is probability of receipt and the amount is measurable.

For donations and gifts this is when they are received. Gift Aid is recognised on a receivable basis as part of the income to which it relates.

Grants are recognised in full in the year in which they are receivable except in situations where they are related to performance in which case they are accrued as the Charity earns the right through performance.

Fundraising income is accounted for gross, with any associated costs presented as expenditure.

Interest is recorded when it is receivable.

Dividends are accounted for when due, and tax recoverable on such income is accounted for based on the repayment due in the fiscal year ending in that accounting year.

Realised gains or losses are recognised when investments are sold. Unrealised gains or losses are accounted for on revaluation of investments at the period end.

### Expenditure and irrecoverable VAT

Expenditure is accounted for on an accruals basis and liabilities are recognised as expenditure when there is a legal obligation committing the Charity to the expenditure, it is probable that settlement will be made, and the obligation can be measured.

Non-recoverable VAT is included against the expenditure heading to which it relates.

Indirect costs, including governance costs, which cannot be directly attributed to activities, are

allocated between activities proportionate to the direct costs incurred in those activities.

Grants payable are payments made to third parties in furtherance of the Charity's objectives.

Unconditional grant offers are accrued in full once the recipient has been advised of the grant award and the payment is probable. Where grant awards are subject to performance conditions that are outside of the control of the Charity these are accrued when the recipients have been notified of the grant award.

Multi-year grants are recognised at their historic cost and thereafter at the best estimate of the amount required to settle the obligation at the reporting date. Where payments are due over more than one year from the date of the award and there are no unfulfilled conditions which are within the control of the Charity and the effect of discounting is immaterial, no adjustment is made to discount the liability to its present value at the reporting date.

### Taxation

As a registered charity income and gains are exempt from Corporation Tax to the extent that they are applied to the charitable objectives.

### Donated goods and services

Where goods are provided to the Charity as a donation that would normally be purchased from suppliers this contribution is included in the financial statements as an estimate based on the value of the contribution to the Charity.

### Investments

Investments are initially measured at their cost and subsequently measured at their fair value at each reporting date, which gives rise to unrealised gains/losses at the end of the financial period which is reflected in the SOFA. Realised gains/losses are calculated as the difference between the sales proceeds and the opening carrying value or the purchase price if acquired during the financial period. Partial disposals are accounted for using the average value. Fair value is based on the quoted price at the balance sheet date without deduction of estimated future selling costs.

### Tangible fixed assets and depreciation

Tangible fixed assets are stated at cost less accumulated depreciation and any impairment losses, with individual assets over £1,500 being capitalised.

Depreciation is provided at rates calculated to write off the cost of each asset, less its estimated residual value, over the useful economic life of that asset as follows:

- Computers – straight line over 4 years
- Fixtures and fittings – straight line over 5 years

### Cash at bank and in hand

Cash at bank and in hand includes cash in hand, deposits with banks and funds that are readily convertible into cash at, or close to, their carrying values, but are not held for investment purposes.

### Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount is applied.

### Creditors

Creditors 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.

### Financial instruments

Basic financial instruments are measured at amortised cost other than investments which are measured at fair value.

### Critical estimates and judgements

In preparing financial statements it is necessary to make certain judgements, estimates and assumptions that affect the amounts recognised in the financial statements. The treatment of tangible fixed assets is sensitive to changes in useful economic lives and residual values of assets. These are reassessed annually.

The charity recognises residuary legacies once probate has been granted, which therefore requires an estimation of the amount receivable. This calculation is based on the estate accounts provided by the executor and allows for a proportion of costs incurred in finalising the estate, as well as any uncertainties around valuation of physical assets.

Donated goods and services are based on an estimate of the value of the contribution to the Charity as per the accounting policy above.

In the view of the Trustees in applying the accounting policies adopted, no judgements were required that have a significant effect on the amounts recognised in the financial statements nor do any estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

### Pensions

Pension contributions payable under a defined contribution scheme are charged to the SOFA in the accounting period to which they relate.

### Employee benefits

The costs of short-term employee benefits are recognised as a liability and an expense.

### Operating leases

Rentals payable under operating leases are charged against income on a straight-line basis over the lease term.



## 2. Comparative statement of financial activities

	Notes	Unrestricted Funds 2023 £	Restricted Funds 2023 £	Total Funds 2023 £
<b>Income from</b>				
Donations and legacies	3	2,027,544	516,322	2,543,866
Other trading activities	4	173,408	-	173,408
Investments	5	91,012	-	91,012
<b>Total income</b>		<b>2,291,964</b>	<b>516,322</b>	<b>2,808,286</b>
<b>Expenditure on</b>				
Raising funds	6 & 7	1,415,067	-	1,415,067
Charitable activities	6 & 8	2,028,955	45,722	2,074,677
<b>Total expenditure</b>		<b>3,444,022</b>	<b>45,722</b>	<b>3,489,744</b>
Net gains/(losses) on investments	12	131,777	-	131,777
Net income/(expenditure)		(1,020,281)	470,600	(549,681)
Transfer between funds	16	543,852	(543,852)	-
Net movement in funds		(476,429)	(73,252)	(549,681)
<b>Reconciliation of funds</b>				
Total funds brought forward	16 & 17	2,785,967	170,154	2,956,121
<b>Total Funds carried forward</b>	<b>16 &amp; 17</b>	<b>2,309,538</b>	<b>96,902</b>	<b>2,406,440</b>

## 3. Income from donations & legacies

	Unrestricted Funds 2024 £	Restricted Funds 2024 £	Total Funds 2024 £
Donations	1,310,843	141,400	1,452,243
Grants	35,234	518,056	553,290
Legacies and in memorium	1,565,518	-	1,565,518
Donated goods and services	61,691	-	61,691
<b>Total income from donations &amp; legacies</b>	<b>2,973,286</b>	<b>659,456</b>	<b>3,632,742</b>
	Unrestricted Funds 2023 £	Restricted Funds 2023 £	Total Funds 2023 £
Donations	852,978	-	852,978
Grants	58,900	499,600	558,500
Legacies and in memorium	1,002,385	16,722	1,019,107
Donated goods and services	113,281	-	113,281
<b>Total income from donations &amp; legacies</b>	<b>2,027,544</b>	<b>516,322</b>	<b>2,543,866</b>
		<b>Total Funds 2024 £</b>	<b>Total Funds 2023 £</b>
Office accommodation and related costs		-	33,682
Who's Cooking Dinner support		35,321	69,399
Other		26,370	10,200
<b>Total donated goods and services</b>		<b>61,691</b>	<b>113,281</b>



## 4. Income from other trading activities

	Unrestricted Fund 2024 £	Restricted Funds 2024 £	Total Funds 2024 £
Ticket sales	123,718	-	<b>123,718</b>
Auctions and raffles	93,500	-	<b>93,500</b>
Other	12,945	-	<b>12,945</b>
<b>Total income from other trading activities</b>	<b>230,163</b>	<b>-</b>	<b>230,163</b>

	Unrestricted Fund 2023 £	Restricted Funds 2023 £	Total Funds 2023 £
Ticket sales	90,625	-	90,625
Auctions and raffles	82,321	-	82,321
Other	462	-	462
<b>Total income from other trading activities</b>	<b>173,408</b>	<b>-</b>	<b>173,408</b>

## 5. Income from investments

	Unrestricted Fund 2024 £	Restricted Funds 2024 £	Total Funds 2024 £
Dividends and interest on fixed asset investments	86,185	-	<b>86,185</b>
Interest on short term cash deposits	18,237	-	<b>18,237</b>
<b>Total income from investments</b>	<b>104,422</b>	<b>-</b>	<b>104,422</b>

	Unrestricted Fund 2023 £	Restricted Funds 2023 £	Total Funds 2023 £
Dividends and interest on fixed asset investments	71,406	-	71,406
Interest on short term cash deposits	19,606	-	19,606
<b>Total income from investments</b>	<b>91,012</b>	<b>-</b>	<b>91,012</b>

## 6. Total expenditure

	Grants to institutions 2024 £	Direct staff 2024 £	Direct other 2024 £	Indirect 2024 £	Total costs 2024 £
<b>Expenditure on</b>					
Raising funds	-	706,968	657,351	183,273	<b>1,547,592</b>
Charitable activities	1,200,712	537,780	263,718	268,963	<b>2,271,173</b>
<b>Total expenditure</b>	<b>1,200,712</b>	<b>1,244,748</b>	<b>921,069</b>	<b>452,236</b>	<b>3,818,765</b>

	Grants to institutions 2023 £	Direct staff 2023 £	Direct other 2023 £	Indirect 2023 £	Total costs 2023 £
<b>Expenditure on</b>					
Raising funds	-	543,585	641,409	230,073	1,415,067
Charitable activities	1,197,425	353,924	186,011	337,317	2,074,677
<b>Total expenditure</b>	<b>1,197,425</b>	<b>897,509</b>	<b>827,420</b>	<b>567,390</b>	<b>3,489,744</b>

Indirect costs, including governance costs, which cannot be directly attributed to activities, are allocated between activities proportionate to the direct costs incurred in those activities.

A breakdown of expenditure on raising funds between restricted and unrestricted funds can be found in note 7.

Indirect costs includes the following items:

	Total costs 2024 £	Total costs 2023 £
Management & operational staff	<b>146,892</b>	170,785
Premises	<b>32,234</b>	78,976
HR, IT, finance & other professional services	<b>243,079</b>	286,388
Governance	<b>30,031</b>	31,241
<b>Total indirect costs</b>	<b>452,236</b>	567,390

Governance costs includes the following items:

	Total costs 2024 £	Total costs 2023 £
Audit and independent examination costs	<b>19,574</b>	17,054
Legal costs	<b>3,930</b>	7,766
Insurance costs	<b>5,192</b>	3,324
Other costs including trustee recruitment	<b>1,335</b>	3,097
<b>Total governance costs</b>	<b>30,031</b>	31,241

A breakdown of charitable expenditure between restricted and unrestricted funds can be found in note 8.

An analysis of staff costs can be found in note 10.



## 7. Expenditure on raising funds

	Unrestricted Funds 2024 £	Restricted Funds 2024 £	Total Funds 2024 £
Direct staff costs	706,968	-	<b>706,968</b>
Other direct costs	657,351	-	<b>657,351</b>
Indirect costs	183,273	-	<b>183,273</b>
<b>Total expenditure on raising funds</b>	<b>1,547,592</b>	<b>-</b>	<b>1,547,592</b>
	Unrestricted Funds 2023 £	Restricted Funds 2023 £	Total Funds 2023 £
Direct staff costs	543,585	-	543,585
Other direct costs	641,409	-	641,409
Indirect costs	230,073	-	230,073
<b>Total expenditure on raising funds</b>	<b>1,415,067</b>	<b>-</b>	<b>1,415,067</b>

Included within other direct costs are investment management costs of £22,871 (2023 - £20,500).

## 8. Expenditure on charitable activities

	Unrestricted Funds 2024 £	Restricted Funds 2024 £	Total Funds 2024 £
Grants to institutions	1,200,712	-	<b>1,200,712</b>
Direct staff costs	487,329	50,451	<b>537,780</b>
Other direct costs	263,718	-	<b>263,718</b>
Indirect costs	268,963	-	<b>268,963</b>
<b>Total expenditure on charitable activities</b>	<b>2,220,722</b>	<b>50,451</b>	<b>2,271,173</b>
	Unrestricted Funds 2023 £	Restricted Funds 2023 £	Total Funds 2023 £
Grants to institutions	1,151,703	45,722	1,197,425
Direct staff costs	353,924	-	353,924
Other direct costs	186,011	-	186,011
Indirect costs	337,317	-	337,317
<b>Total expenditure on raising funds</b>	<b>2,028,955</b>	<b>45,722</b>	<b>2,074,677</b>

## 9. Analysis of grants awarded in period

	Total Funds 2024 £	Total Funds 2023 £
Institute of Cancer Research	-	245,051
Medical Research Council	-	100,000
University College London	<b>150,000</b>	149,609
University Hospital Southampton	<b>50,000</b>	-
University of Birmingham	-	15,051
University of Cambridge	<b>523,108</b>	-
University of Edinburgh	<b>249,944</b>	-
University of Glasgow	-	149,510
University of Manchester	-	150,000
University of Nottingham	-	147,481
University of Southampton	<b>140,073</b>	243,066
Small project/support grants*	<b>83,358</b>	115,000
Release of prior year provision	<b>(9,169)</b>	(38,093)
Movement in discounting of commitments due in more than one year	<b>13,398</b>	(79,250)
<b>Total grants awarded</b>	<b>1,200,712</b>	<b>1,197,425</b>

\*Small project grants consist of a number of small awards which are not listed in their entirety here as they are not individually material to the accounts.

## 10. Staff numbers and costs

	Total costs 2024 £	Total costs 2023 £
Gross salaries	<b>1,184,813</b>	924,022
Employer's NIC	<b>130,944</b>	94,005
Employer's pension	<b>64,070</b>	50,267
Termination payments	<b>11,813</b>	-
<b>Total staff costs</b>	<b>1,391,640</b>	<b>1,068,294</b>

The average headcount during the year was 26 persons (2023 – 23).

One employee received employee benefits including termination payments of between £100,000 - £109,999, two employees between £70,000 - £79,999 and three employees between £60,000 - £69,999 (2023 – one employee between £100,000 - £109,999, one employee between £70,000 - £79,999 and one employee between £60,000 - £69,999).

Total remuneration to key management personnel in the year was £451,450 (2023 - £365,647).

During the period total termination/redundancy payments of £11,813 were made. This included ex-gratia payments above standard redundancy payments (2023: £0).



## 11. Tangible fixed assets

	Computer equipment £	Fixtures & fittings £	Total tangible fixed assets £
<b>Cost</b>			
Brought forward on 1 January 2024	51,367	606	<b>51,973</b>
Additions in year	-	-	-
<b>Cost carried forward on 31 December 2024</b>	<b>51,367</b>	<b>606</b>	<b>51,973</b>
<b>Accumulated depreciation</b>			
Brought forward on 1 January 2024	24,502	606	<b>25,108</b>
Charge in year	11,252	-	<b>11,252</b>
<b>Accumulated depreciation carried forward on 31 December 2024</b>	<b>35,754</b>	<b>606</b>	<b>36,360</b>
<b>Net book value</b>			
Brought forward on 1 January 2024	26,865	-	<b>26,865</b>
<b>Net book value carried forward on 31 December 2024</b>	<b>15,613</b>	<b>-</b>	<b>15,613</b>

## 12. Fixed asset investments

	Total Funds 2024 £	Total Funds 2023 £
Market value brought forward	<b>2,954,260</b>	2,782,186
Additions at cost	<b>3,332,798</b>	742,014
Proceeds on disposal	<b>(2,852,731)</b>	(701,717)
Net gains/(losses) in period	<b>112,147</b>	131,777
Market value carried forward	<b>3,546,474</b>	2,954,260
Cash held as part of the investment portfolio	<b>14,718</b>	17,655
<b>Total market value of investment portfolio carried forward</b>	<b>3,561,192</b>	2,971,915
	Total Funds 2024 £	Total Funds 2023 £
UK fixed interest bonds	<b>540,836</b>	338,579
Non UK fixed interest bonds	<b>213,978</b>	221,107
UK equities and funds	<b>183,269</b>	539,631
Non UK equities and funds	<b>1,517,004</b>	1,344,807
Other funds including cash	<b>1,106,105</b>	527,791
<b>Total market value of investment portfolio carried forward</b>	<b>3,561,192</b>	2,971,915

## 13. Debtors and prepayments

	Total 2024 £	Total 2023 £
Trade debtors	<b>1,000</b>	35,900
Accrued gift aid	<b>72,715</b>	127,320
Accrued legacy income	<b>311,668</b>	659,706
Other accrued income	<b>23,975</b>	25,098
Rent deposit	<b>4,388</b>	4,388
Cycle to work loans	<b>118</b>	-
Prepayments	<b>149,065</b>	259,087
<b>Total debtors and prepayments</b>	<b>562,929</b>	1,111,499

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

	Total 2024 £	Total 2023 £
Trade creditors	<b>107,364</b>	73,455
Payroll liabilities	<b>49,006</b>	39,408
Grants awarded - due in less than a year	<b>1,801,350</b>	1,457,463
Accruals	<b>95,688</b>	20,126
Deferred income	<b>64,582</b>	-
<b>Total creditors - amounts falling due within one year</b>	<b>2,117,990</b>	1,590,452

## 15. Grants payable

	Total Funds 2024 £	Total Funds 2024 £	Total Funds 2023 £	Total Funds 2023 £
Brought forward on 1 January 2024		<b>2,531,641</b>		2,232,644
Grants awarded (see note 9)	<b>1,196,483</b>		1,314,768	
Release of prior year provision (see note 9)	<b>(9,169)</b>		(38,093)	
Movement on discounting of commitments due in more than one year (see note 9)	<b>13,398</b>		(79,250)	
		<b>1,200,712</b>		1,197,425
Grants paid in year		<b>(975,181)</b>		(898,428)
<b>Total grants payable on 31 December 2024</b>		<b>2,757,172</b>		2,531,641
		Total Funds 2024 £		Total Funds 2023 £
Payable within one year		<b>1,801,350</b>		1,457,463
Payable within two to five years		<b>955,822</b>		1,074,178
<b>Total grants payable on 31 December 2024</b>		<b>2,757,172</b>		2,531,641



## 16. Analysis of charity funds

	Funds brought forward 2024 £	Income in year 2024 £	Expenditure in year 2024 £	Net gains/(losses) on revaluation 2024 £	Transfers between funds 2024 £	Funds carried forward 2024 £
<b>Restricted funds</b>						
BEIS funding 2023	81,902	-	-	-	(81,902)	-
DSIT funding 2024	-	375,215	-	-	(354,196)	<b>21,019</b>
Project grants	-	22,500	-	-	-	<b>22,500</b>
University of Cambridge	-	1,000	-	-	(1,000)	-
John Goldman Fellowships 2021	-	7,616	-	-	(7,616)	-
John Goldman Fellowships 2022	15,000	46,375	-	-	(59,697)	<b>1,678</b>
John Goldman Fellowships 2023	-	50,800	-	-	(39,866)	<b>10,934</b>
JGF Follow-up-Fund	-	88,833	-	-	(34,245)	<b>54,588</b>
MRC joint project	-	16,666	-	-	(16,666)	-
Community Champions	-	10,451	(10,451)	-	-	-
Data analysis project	-	30,000	(30,000)	-	-	-
Spot Leukaemia	-	10,000	(10,000)	-	-	-
<b>Total restricted funds</b>	<b>96,902</b>	<b>659,456</b>	<b>(50,451)</b>	<b>-</b>	<b>(595,188)</b>	<b>110,719</b>
<b>Designated funds</b>						
AML	-	-	-	-	300,000	<b>300,000</b>
Fixed asset fund	-	-	-	-	15,613	<b>15,613</b>
<b>Total designated funds</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>315,613</b>	<b>315,613</b>
<b>General funds</b>	<b>2,309,538</b>	<b>3,307,871</b>	<b>(3,768,314)</b>	<b>112,147</b>	<b>279,575</b>	<b>2,240,817</b>
<b>Total Funds</b>	<b>2,406,440</b>	<b>3,967,327</b>	<b>(3,818,765)</b>	<b>112,147</b>	<b>-</b>	<b>2,667,149</b>

### Restricted funds – BEIS funding

The Charity received funds from BEIS (2023) and DSIT (2024) to support John Goldman Fellowships awarded in previous years, and where grant drawdown continued in 2024. As the grant commitments were recognised in full in previous years, the grant funding has been offset against this commitment and shown as a transfer to unrestricted funds in the current year.

### Restricted funds – University of Cambridge

The Charity received funds to support its grant awards to researchers based at the University of Cambridge. As the relevant grant commitments were recognised in full in previous years, the grant funding has been offset against this commitment and shown as a transfer to unrestricted funds in the current year.

### Restricted funds – John Goldman Fellowships 2021

The Charity received funds to support the annual John Goldman Fellowships awarded in 2021, where grant

drawdown continued in 2024. As the grant commitments were recognised in full in 2021, the grant funding has been offset against this commitment and shown as a transfer to unrestricted funds in the current year.

### Restricted funds – John Goldman Fellowships 2022

The Charity received funds from a variety of sources to support the annual John Goldman Fellowships awarded in 2022, where grant drawdown continued in 2024. As the grant commitments were recognised in full in 2022, the grant funding has been offset against this commitment and shown as a transfer to unrestricted funds in the current year.

### Restricted funds – John Goldman Fellowships 2023

The Charity received funds from a variety of sources to support the annual John Goldman Fellowships in awarded in 2023, where grant drawdown continued in 2024. As the grant commitments were recognised

in full in 2023, the grant funding has been offset against this commitment and shown as a transfer to unrestricted funds in the current year.

### Restricted funds – Project grants, JGF Follow-Up-Fund, MRC Joint Project

The Charity received funds from a variety of sources to support research grants awarded in previous years, where drawdown continued in 2024. As the grant commitments were recognised in full in previous years, the grant funding has been offset against this commitment and shown as a transfer to unrestricted funds in the current year.

### Restricted funds – Community Champions

The charity received funds to support the Community Champions project- a community-based network who help support the work of the charity through advocacy and awareness-raising.

### Restricted funds – Data Analysis Project

The charity received funds to support the analysis of large-scale health data on Leukaemia in the UK.

### Restricted funds – Spot Leukaemia

The charity received funds to support its campaign to raise awareness of Leukaemia signs and symptoms.

### Designated funds – AML

Trustees have designated £300,000 to support current and future research into Acute Myeloid Leukaemia (AML), reflecting the charity's strategic commitment to investing in this area.

### Designated funds – Fixed Asset Fund

This fund mirrors the net book value of tangible fixed assets, to reflect the fact that the assets are not liquid, and therefore do not form part of the charity's free reserves.

### Comparative year only:

### Restricted funds – Project support grants

The Charity received funds from a variety of sources to support small project support grants.

### Restricted funds – North of England

The Charity received funds from a legacy to support its work in the north of England.

### Restricted funds – Research Grants

The Charity received funds from a variety of sources to support research grants awarded in previous years, where drawdown continued in 2023. As the grant commitments were recognised in full in previous years, the grant funding has been offset against this commitment and shown as a transfer to unrestricted funds in the current year .

### Designated funds – IMPACT

The IMPACT designated fund is to fund the IMPACT clinical trial, a collaborative project with Anthony Nolan, NHSBT, and the University of Birmingham. The agreement was signed early 2017, with funding split over several years originally to 31st December 2021 but was extended and has now been completed with the balance transferred back to general funds.

	Funds brought forward 2023 £	Income in year 2023 £	Expenditure in year 2023 £	Net gains/(losses) on revaluation 2023 £	Transfers between funds 2023 £	Funds carried forward 2023 £
<b>Restricted funds</b>						
BEIS funding 2022	170,154	-	-	-	(170,154)	-
BEIS funding 2023	-	421,218	-	-	(339,316)	<b>81,902</b>
Project/support grants	-	1,000	(1,000)	-	-	-
North of England	-	9,000	(9,000)	-	-	-
John Goldman Fellowships 2021	-	13,882	-	-	(13,882)	-
John Goldman Fellowships 2022	-	35,500	-	-	(20,500)	<b>15,000</b>
Research grants	-	35,722	(35,722)	-	-	-
<b>Total restricted funds</b>	<b>170,154</b>	<b>516,322</b>	<b>(45,722)</b>	<b>-</b>	<b>(543,852)</b>	<b>96,902</b>
<b>Designated funds</b>						
IMPACT	27,201	-	(15,051)	-	(12,150)	-
<b>Total designated funds</b>	<b>27,201</b>	<b>-</b>	<b>(15,051)</b>	<b>-</b>	<b>(12,150)</b>	<b>-</b>
<b>General funds</b>	<b>2,758,766</b>	<b>2,291,964</b>	<b>(3,428,971)</b>	<b>131,777</b>	<b>556,002</b>	<b>2,309,538</b>
<b>Total Funds</b>	<b>2,956,121</b>	<b>2,808,286</b>	<b>(3,489,744)</b>	<b>131,777</b>	<b>-</b>	<b>2,406,440</b>



## 17. Analysis of net assets between funds

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total Funds 2024 £
Fixed assets	3,576,805	-	<b>3,576,805</b>
Current assets	2,053,437	110,719	<b>2,164,156</b>
Current liabilities	(2,117,990)	-	<b>(2,117,990)</b>
Non-current liabilities	(955,822)	-	<b>(955,822)</b>
<b>Total net assets</b>	<b>2,556,430</b>	<b>110,719</b>	<b>2,667,149</b>

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total Funds 2023 £
Fixed assets	2,998,780	-	2,998,780
Current assets	1,975,388	96,902	2,072,290
Current liabilities	(1,590,452)	-	(1,590,452)
Non-current liabilities	(1,074,178)	-	(1,074,178)
<b>Total net assets</b>	<b>2,309,538</b>	<b>96,902</b>	<b>2,406,440</b>

## 18. Analysis of net debt

	As at 1 Jan 2024 £	Cash flows £	Other movements £	As at 31 Dec 2024 £
<b>Cash and cash equivalents</b>				
Cash at bank	745,138	686,845	-	<b>1,431,983</b>
	<b>745,138</b>	<b>686,845</b>	<b>-</b>	<b>1,431,983</b>

	As at 1 Jan 2023 £	Cash flows £	Other movements £	As at 31 Dec 2023 £
<b>Cash and cash equivalents</b>				
Cash at bank	1,697,021	(951,883)	-	745,138
	<b>1,697,021</b>	<b>(951,883)</b>	<b>-</b>	<b>745,138</b>

## 19. Lease commitments

As at 31 December 2024, the charity has the future minimum commitments under operating leases as follows (all for land and buildings):

	Total Funds 2024 £	Total Funds 2023 £
Within one year	<b>8,775</b>	13,163
	<b>8,775</b>	<b>13,163</b>

## 20. Trustee remuneration and donations

During the year, four Trustees received reimbursement of £699 expenses (2023 - £NIL). No Trustees received any remuneration (2023 - £NIL).

The Charity received no unrestricted donations from trustees during 2024 (2023 - £63).

## 21. Related party transactions

During the current year, there were no related party transactions (2023 – £Nil) other than the unrestricted donations noted in note 20 above.

## 22. Guarantees and secured charges

As of 31 December 2024 the Charity did not have any outstanding guarantees to third partners nor any debts secured against assets of the Charity (2023 - £NIL).

## 23. Legacy income

Leukaemia UK is aware of legacies of which the charity's share is estimated at £250,000 (2023: £1,000,000). This has not been included in these financial statements as it does not reach the necessary recognition criteria as laid out by the charity's accounting policy.



# Legal and administrative details

**Auditors:**

**Cooper Parry Group Limited**, Cubo Birmingham,  
4th Floor, Two Chamberlain Square, Birmingham B3 3AX

**Banks:**

**Santander**, 100 Ludgate Hill, 1st Floor,  
London, EC4M 7RE

**CAF Bank Ltd**, 25 Kings Hill Avenue,  
Kings Hill, West Malling, Kent, ME19 4JQ

**Barclays**, 1 Churchill Place, London, E14 5HP

**Investment Managers**

**Rathbones**, 30 Gresham Street, London, EC2V 7QN

**Solicitors**

**CMS Cameron McKenna Nabarro Olswang LLP**,  
Cannon Place, 78 Cannon Street, London, EC4N 6AF

# A heartfelt thank you

None of Leukaemia UK's work would be possible without our amazing community of supporters, funders, researchers, colleagues and partners. Thank you for your unwavering support and continued enthusiasm throughout 2024. Your commitment to stop leukaemia devastating lives means that together we can continue to accelerate progress in leukaemia diagnosis, treatment and care.



**A special thanks to our supporters who so generously left us gifts in their wills this year:**

- |   |  |
|---|--|
| <ul style="list-style-type: none"><li>• Michael George French</li><li>• Carol Ann Iles</li><li>• Jean Adams</li><li>• Eric Wilson</li><li>• Molly Parker</li><li>• Sandra May Galloway</li><li>• Alison Rachel Norman</li><li>• Gisela Corera</li><li>• June Elizabeth Mary Kilpin</li><li>• Janet Clare Drewitt</li><li>• Violet Clark</li><li>• Susan Linda Hart</li><li>• Margaret Jane Thomas</li><li>• Mavis Fisher</li><li>• Barbara Greenough</li><li>• Elizabeth Winifred Gardner</li><li>• Gina Vigar</li><li>• Eugene Duffin</li><li>• Rodney Howard Spendlove</li><li>• Janet Selina Cowles</li><li>• Lili Preston</li></ul> | <ul style="list-style-type: none"><li>• Simon Chin</li><li>• Margaret Warren</li><li>• Roy Edward Hunt</li><li>• Ivy Rose Burnham</li><li>• Primrose May Leigh Chenhalls Licourinos</li><li>• Vincent Hill</li><li>• Stanley Mitchell</li><li>• Judith Mary White</li><li>• Sarah Hilda Davies</li><li>• Doreem Whitaker</li><li>• David Rhys Evans</li><li>• Barbara Bradley</li><li>• Sheila Renner</li><li>• Robert John Young</li><li>• Caroline Helen Fleming</li><li>• Brian Rex Williams</li><li>• Winifred Mary McIntyre</li><li>• Vera Anderton</li><li>• Arnold Holding</li><li>• Martin Brian Vandervelde</li><li>• John Eric George</li><li>• Mabel Ann Maud Cobb</li><li>• Stanley George May</li></ul> |
|---|--|

With thanks to all the photographers whose work is featured throughout this report, and specifically Leukaemia UK's regular photographers Jake Darling and Ian Harding.





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**Charity Number:** 1154856